1. Introduction
Family planning operations are mainly undergone by healthy women of childbearing age. These operations include artificial abortions, induced abortion, normal tubal ligation, intrauterine device (IUD) placement operation, etc. Those who undergo such procedures may experience post-operative uterine perforation, bleeding, endocrine dysfunction, irregular menstruation and so on. In recent years, more and more artificial abortion operations are done in various hospitals, mainly due to, the opening of western hospitals in our country. Artificial abortion is a more commonly used remedial measure after contraceptive failure. Statistical data from the last few years has led to the discovery of the fact that artificial abortion in our country tends to be done for younger patients. There is lack of awareness about contraceptive techniques amongst the younger generation.

Drawbacks of contraception: Patients who underwent abortion are suffered with serious mental stress problems. Complications of artificial abortion usually appear after the surgery [1]. Not only that, patients who undergo family planning surgeries are often affected by a series of psychological problems due to personal, social and family factors. To solve the mentioned problems, our service station has enriched the intervention of the psychological nursing in artificial abortions, and achieved good results.

2. Materials and methods
2.1. The general information
The 90 patients who were treated in our hospital from January 2014 to October 2014 were randomly divided into two groups. The control group received routine nursing care and the experimental group received enriched psychological nursing intervention. The anxiety, pain and complications of the two groups were compared, and the Results were statistically analyzed. Result: The patients in the experimental group were treated with psychological nursing intervention. After the surgery, the state of nervous anxiety was significantly lower, the postoperative pain was mild and the complications were less. When compared with the control group, there were significant differences (p < 0.05). Conclusion: The enriched psychological nursing of patients in family planning operations can help to improve the quality of nursing and appease the mood of the patients with a positive clinical significance.

Keywords: Family planning operation, Psychological nursing, Clinical effect, Artificial abortion

ABSTRACT Objective: To explore the effect of enriched psychological nursing intervention in family planning operations, to provide a reference for the nursing work.
Method: The 90 patients who were treated in our hospital from January 2014 to October 2014 were randomly divided into two groups. The control group received routine nursing care and the experimental group received enriched psychological nursing intervention. The anxiety, pain and complications of the two groups were compared, and the Results were statistically analyzed. Result: The patients in the experimental group were treated with psychological nursing intervention. After the surgery, the state of nervous anxiety was significantly lower, the postoperative pain was mild and the complications were less. When compared with the control group, there were significant differences (p < 0.05). Conclusion: The enriched psychological nursing of patients in family planning operations can help to improve the quality of nursing and appease the mood of the patients with a positive clinical significance.

Analysis of the Effect of Enriched Psychological Nursing Intervention for Patients Who Undergo Family Planning Operations
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1. Introduction
Family planning operations are mainly undergone by healthy women of childbearing age. These operations include artificial abortions, induced abortion, normal tubal ligation, intrauterine device (IUD) placement operation, etc. Those who undergo such procedures may experience post-operative uterine perforation, bleeding, endocrine dysfunction, irregular menstruation and so on. In recent years, more and more artificial abortion operations are done in various hospitals, mainly due to, the opening of western hospitals in our country. Artificial abortion is a more commonly used remedial measure after contraceptive failure. Statistical data from the last few years has led to the discovery of the fact that artificial abortion in our...
28 cases of contraceptive failure. The menopause duration is 40–77 days, the average being (51.48 ± 6.39) days. In the experimental group, 45 patients were operated, ages between 45 and 19 with an average of (25.54 ± 5.71) years. There were 25 married patients and 20 unmarried patients. Besides, 19 cases are without contraception and 26 cases have failed in contraception. The menopause duration is 42 to 78 days, the average being (51.96 ± 5.07) days. There was no significant difference between the two groups regarding the age, marital history and menopause, $p > 0.05$, so they were comparable.

2.2. Method
The control group received routine nursing care and the experimental group received enhanced psychological nursing intervention. The anxiety, pain and complications of the two groups were compared. The degree of satisfaction of the nursing care was evaluated by the patient.

2.3. The intervention psychological nursing
During surgery, nurses should give kind nursing care with enthusiasm to create relax and harmonious environment in order to reduce psychological burden of patient. They should also be patient and careful to explain the methods and advantages of the artificial abortion procedure, to help the patients establish confidence. The nurses should provide guidance and clear explanations to the patients who have severe anxiety. If the patients have doubts, the nurses should be patient to answer clearly and articulately. They should be ready to communicate in either language to avoid the patients’ suspicion [2]. Nurses must work with an alert mind, so that the patient can establish their sense of security.

After the surgery, the nurse should actively communicate with the subject. They should help the patients to keep their minds off the surgery and divert their attention. The nurse can hold patients’ hands and wipe sweat off their face. The nurse can also press the acupuncture points to relieve their pain. The nurse should provide warm water, help them to clean up the vomiting objects, comfort and encourage the patients. Before subjecting the patient to the psychological nursing intervention, the nurses should understand the whole situation, including demographics and take individual differences into account. As for patients with low educational level, the nurses not only have to provide psychological comfort, but also pay attention to meet the needs of the patients in terms of contraception awareness. For busy patients, nurses should inform them of the importance of rest after the operation.

2.4. Observation index
After the surgery, the patient’s anxiety, pain, complications and satisfaction were measured in the form of a questionnaire. In the process of filling the questionnaire, the patients and their families were explained about its contents in detail. The patients were asked to fill the questionnaire in real time to ensure the accuracy of the study.

2.5. The data processing
The experimental data were recorded in the SPSS18.0 software package and analyzed statistically. For 95% of the confidence interval, $p < 0.05$, the difference was statistically significant. The mean + standard difference $(\bar{x} \pm s)$ was determined for the state of pain and anxiety. The groups were compared using $t$ test; complication and satisfaction were expressed as the number of cases $(n)$ and percentage ($\%$); and the results were compared using $\chi^2$ test.

3. Results
After the psychological nursing intervention, the state of nervous anxiety of the patients in the experimental group was significantly lower than that after the surgery. The postoperative pain was mild and the complications were significantly lower than those of control. The difference was statistically significant ($p < 0.05$). The detailed results are shown in the Table 1.

4. Discussion
Family planning surgery is for healthy women at a childbearing age with reproductive concerns. After giving birth, the method of birth control is used to effectively control fertility. A number of women of childbearing age resort to family planning surgeries due to faulty birth control methods, damaged condoms and other reasons that lead to contraceptive failure. Family planning surgery responds to the policy of the national family planning and lowers the family expenses. This surgical procedure is not done to cure any type of woman disease. Therefore, special atten-

<table>
<thead>
<tr>
<th>Group</th>
<th>Case</th>
<th>The anxiety state</th>
<th>Pain</th>
<th>Complications n (%)</th>
<th>Satisfaction n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The experimental group</td>
<td>45</td>
<td>41.85 ± 7.64</td>
<td>2.08 ± 0.24</td>
<td>1 (2.22)</td>
<td>45 (100)</td>
</tr>
<tr>
<td>The control group</td>
<td>45</td>
<td>49.37 ± 8.89</td>
<td>2.93 ± 0.52</td>
<td>6 (13.33)</td>
<td>38 (84.44)</td>
</tr>
</tbody>
</table>

Note: The state of anxiety of the experimental group is lower than that of the control group, $(t = 12.63, p < 0.05)$. The pain of the experimental group is lower than that of the control group, $(t = 8.26, p < 0.05)$. The complications of the experimental group are lower than that of the control group, $\chi^2 = 5.34, p < 0.05$; the satisfaction of the experimental group is higher than that of the control group, $\chi^2 = 6.94, p < 0.05$. 

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satisfaction was 84.44%. The observation group was significantly higher than the control group. The total satisfaction of the two groups was significantly different \( (p < 0.05) \). Further explanation in the family planning operation has a positive clinical significance. It helps to enrich the psychological nursing of the patients, improve the quality of nursing, and to appease the emotional of patients [7, 8].

In summary, family planning is a long-term and arduous work. In the process of carrying out family planning surgery, the patient’s psychological problem has been concerned. After the patient received the plan of parent-hood, nursing staff should always pay attention to patients’ psychological change and psychological mood. The nurse should give patients appropriate guidance and psychological comfort to the patients. Effective nursing care helps to avoid the adverse psychological mood of the patients which will affect the postoperative recovery. Therefore, enriched psychological care of patients for family planning surgery has a positive clinical significance as it can help to improve the quality of care and effectively appease the patient’s mood.

References