

Effects of Traditional Chinese Medicine Nursing Intervention Combined with Enteral Nutrition Nursing on Nutritional Indicators and Quality of Life in Severe Cerebral Infarction

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Abstract

Objective: To evaluate the effects of traditional Chinese medicine nursing intervention combined with enteral nutrition on nutritional indicators and quality of life in patients with severe cerebral infarction. **Methods:** One hundred patients with severe cerebral infarction admitted between April 2024 and October 2025 were randomly enrolled and randomly divided into two groups of 50 each. The control group received routine enteral nutrition care, while the study group received traditional Chinese medicine (TCM) nursing intervention combined with enteral nutrition care. Nutritional indicators, quality of life, complication rate, and patient satisfaction were compared. **Results:** After 2 weeks of nursing care, the study group had higher serum prealbumin (PAB) and albumin (ALB) levels, higher WHOQOL-BREF scores, and higher patient satisfaction than the control group ($p < 0.05$). After 2 weeks of nursing care, the complication rate in the study group was lower than that in the control group ($p < 0.05$). **Conclusion:** Implementing TCM nursing intervention combined with enteral nutrition care is beneficial in improving nutritional indicators and enhancing the quality of life of patients with severe cerebral infarction.

Keywords

Traditional Chinese medicine nursing intervention; enteral nutrition nursing; severe cerebral infarction; nutritional status; quality of life

Introduction

Severe cerebral infarction is one of the most common cerebrovascular diseases in clinical practice [1]. In clinical diagnosis and treatment, most patients with severe cerebral infarction will experience different malnutrition problems, resulting in a decline in their quality of life [2]. Effective nutritional care is of great significance for improving the clinical outcome of patients with severe cerebral infarction [3]. At present, enteral nutrition has become one of the core links in the comprehensive treatment and care of severe cerebral infarction. However, relying solely on enteral nutrition care, some patients still face problems such as gastrointestinal intolerance, diarrhea, abdominal distension, and constipation, which affect the absorption of nutrients and may also aggravate malnutrition due to the end of nutritional support [4]. Traditional Chinese medicine has accumulated rich experience in regulating the function of the internal organs, harmonizing qi, blood, yin, and yang, promoting the recovery of gastrointestinal function, and improving nutritional status by using appropriate Chinese medicine techniques [5]. Therefore, this article evaluates the effect of Chinese medicine nursing intervention combined with enteral nutrition care on nutritional indicators and quality of life of patients with severe cerebral infarction. The specific report is as follows.

1. Materials and Methods

1.1 General Information

Patients with severe cerebral infarction admitted between April 2024 and October 2025 were included in this study. They were randomly assigned to a control group and a study group, with 50 patients in each group. The control group consisted of patients aged 60-73 years with a disease duration of 1-5 days and a body mass index (BMI) of 21.59-26.87 kg/m². The study group consisted of patients aged 60-75 years with a disease duration of 1-5 days and a BMI of 21.44-26.19 kg/m². There were no significant differences in data between the two groups (see Table 1) ($p > 0.05$). The study was approved by the hospital's ethics committee.

Inclusion criteria: (1) meeting the clinical diagnostic criteria for severe cerebral infarction [6]; (2) being admitted to the hospital within 24 hours of onset; and (3) signing an informed consent form.

Exclusion criteria: (1) serious liver and kidney diseases; (2) gastrointestinal bleeding, intestinal obstruction, and other diseases; (3) mental illness.

Table 1. Comparison of general data between the two groups

Group	Patient (Number of examples)	Age (age)	Gender		Body Mass Index (kg/m ²)	Course of disease (d)
			Male cases (%)	Female cases (%)		
Control group	50	65.12±1.49	20 (40.00)	30 (60.00)	23.39±1.09	2.39±0.17
Research group	50	65.19±1.58	22 (44.00)	28 (56.00)	23.64±1.23	2.41±0.28
χ^2 value/t value	-	0.099	0.164		1.075	0.431
p-value	-	0.921	0.685		0.284	0.666

1.2 Methods

The control group received routine enteral nutrition care. (1) Routine care. After the doctor determined the enteral nutrition support plan, the nursing staff provided health education to the patients and their families, informing them of the importance of early enteral nutrition support and encouraging the patients to cooperate with the treatment. Before each enteral nutrition support, the position of the gastric tube should be confirmed, the temperature should be controlled at 38°C~40°C, the infusion concentration should be increased from low to high, the volume should be increased from small to large, and the speed should be increased from slow to fast. (2) Nutritional support. After the patient's condition stabilizes (usually within 24~48 hours of admission), enteral nutrition emulsion is infused at a constant rate through the nasogastric tube. During infusion, the monitoring should be increased and the infusion rate adjusted. Check the patency of the tube. If there is a blockage, the infusion should be temporarily stopped and the tube flushed. Nutritional fluid therapy should be resumed after the condition returns to normal. Monitor the patient's blood glucose, electrolyte levels, etc. every day, closely monitor the gastric retention, and understand whether the patient has diarrhea, abdominal distension, etc. Adjust the nutritional fluid prescription if necessary.

In addition to enteral nutrition care, the research group implemented traditional Chinese medicine nursing interventions. (1) Acupoint massage and moxibustion care. Zusanli, Pishu, and Weishu acupoints were selected as the main acupoints, and each acupoint was massaged with the thumb for 3-5 minutes every day. For those with qi and blood deficiency, moxibustion was applied to Zusanli, Guanyuan, and other acupoints, once a day for 20 minutes each time. (2) Acupoint application care. For patients with abdominal distension and constipation, Evodia rutaecarpa powder mixed with vinegar was applied to the Shenque acupoint, and each application was not more than 8 hours. (3) Emotional care. The theory of using emotions to overcome emotions in traditional Chinese medicine was adopted, and intervention was carried out in combination with traditional Chinese medicine five-element music to stabilize the mind and regulate the qi of the internal organs.

1.3 Observation Indicators

(1) Nutritional indicators. Serum prealbumin (PAB) and albumin (ALB) levels were measured. (2) Quality of life (WHOQOL-BREF) [7]. The total score is 100 points. The higher the score, the higher the quality of life. (3) Complication rate. Abdominal distension, infection, constipation, etc., may occur. (4) Patient satisfaction rate. A self-made

scale was used to investigate patient satisfaction. Very satisfied (> 90 points), fairly satisfied (70~90 points), dissatisfied (50~69 points), very dissatisfied (<50 points).

1.4 Statistical Analysis

Analysis was performed using SPSS 22.0 software. Count data are expressed as % (%), with rows calculated using χ^2 Test; Quantitative data are expressed as ($\bar{x}\pm s$), row... *t*-test. $P < 0.05$ indicates a statistically significant difference.

2. Results

2.1 Comparison of Nutritional Indicators between the Two Groups

Two weeks after the nursing care, the serum PAB and ALB levels in the study group were higher than those in the control group ($p < 0.05$) (see Table 2).

Table 2. Comparison of nutritional indicators between the two groups

Grouping	Patient (Number of examples)	PAB level (g/L)		ALB level (g/L)	
		Before nursing	8 days after nursing	Before nursing	8 days after nursing
Control group	50	0.43±0.13	0.19±0.05*	26.39±6.14	43.34±3.01*
Research group	50	0.42±0.14	0.38±0.11*	26.44±6.38	46.29±5.22*
t-value	-	0.3701	11.1189	0.0396	3.0963
p-value	-	0.7121	0.0000	0.968	0.0027

Note: * Comparison before and after nursing care in this group, $p < 0.05$.

2.2 Comparison of Quality of Life between the Two Groups

Two weeks after the start of the nursing care, the WHOQOL-BREF score in the study group was higher than that in the control group ($p < 0.05$).

2.3 Comparison of Complication Rates between the Two Groups

The incidence of complications was lower in the study group than in the control group ($p < 0.05$).

2.4 Comparison of Patient Satisfaction Rates between the Two Groups

The patient satisfaction rate in the study group was higher than that in the control group ($p < 0.05$).

3. Discussion

Studies have shown that malnutrition is one of the risk factors for complications such as decreased immune function and infection in patients with severe cerebral infarction [8]. It is of great significance to implement scientific and effective nursing strategies to improve the nutritional status of patients with severe cerebral infarction. Enteral nutrition support is the preferred nutritional support program for patients with severe cerebral infarction [9]. Traditional Chinese medicine nursing techniques, such as acupoint massage, moxibustion, acupoint application, and emotional care, can strengthen the spleen and stomach and enhance the absorption of nutrients [10]. Whether combining traditional Chinese medicine nursing with enteral nutrition support can further improve the nutritional status and enhance the quality of life of patients with severe cerebral infarction is the research direction of this paper.

According to the results of this study, compared with simple enteral nutrition support, the implementation of TCM nursing intervention combined with enteral nutrition nursing is beneficial to improve the nutritional indicators of patients with severe cerebral infarction, improve their quality of life and satisfaction, and reduce the risk of complications. The reason for this is that early enteral nutrition support measures can provide patients with sufficient nutrients, improve their nutritional level, and maintain intestinal function. Among the TCM nursing measures adopted, acupoint massage and moxibustion on acupoints such as Zusanli can strengthen the spleen and stomach, promote digestion and metabolism, thereby improving the tolerance and absorption rate of enteral nutrition; acupoint application to Shenque acupoint can warm the middle and dispel cold, regulate qi and relieve pain, and can effectively

prevent and treat complications such as abdominal distension and constipation related to enteral nutrition; TCM emotional care can soothe the liver and regulate qi, calm the mind and stabilize the will, improve the patient's mood and sleep, indirectly promote recovery, improve the patient's quality of life, and make the patient more satisfied with the nursing service [10].

In conclusion, implementing TCM nursing intervention combined with enteral nutrition nursing is beneficial for improving the nutritional indicators and quality of life of patients with severe cerebral infarction.

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