

Study on treatment and nursing of elderly patients with gastric cancer complicated with diabetes

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Abstract: **Objective** To study and analyze the treatment and nursing of elderly patients with gastric cancer complicated with diabetes. **Methods:** different data were analyzed and summarized. **Conclusion:** the elderly patients with gastric cancer and diabetes can cooperate with the control of blood glucose during the surgical treatment, and strengthen the nursing before and after the operation.

Key words: gastric cancer, diabetes, treatment and nursing, elderly patients

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1. Blood glucose control and surgical treatment

Gastric cancer is a common malignant tumor of digestive tract. In recent years, people's living standards have been significantly improved under the background of rapid social and economic development. However, the problem of population aging is becoming more and more serious. The incidence rate of gastric cancer and diabetes in the elderly is on the rise. At this stage, there is no specific treatment, and surgical treatment is one of the most important ways to treat gastric cancer. It is mainly used for surgical resection of tumor tissue, but for elderly patients, due to tissue and organ failure, often accompanied by basic diseases, the risk of surgery increases. Diabetes is a lifelong disease characterized by hyperglycemia. Hyperglycemia for a long time can cause the chronic injury and dysfunction of various tissues. For example, when patients with diabetes need surgery, they are easily infected, which will affect the recovery after surgery. Moreover, patients with diabetes have weak resistance and are prone to a variety of other complications, which affect the rehabilitation of patients. With the growth of age, the physical function of elderly patients gradually decrease, and their tolerance to surgery is poor. On the basis of routine nursing group, intensive perioperative blood glucose control was given. During the experiment, the researchers gave intensive blood glucose control during operation on the basis of routine nursing group. The elderly patients with gastric cancer and diabetes were treated with insulin pump, insulin was injected subcutaneously through catheter continuously, and the vessels with good elasticity were selected during vascular puncture to perform initial infusion. The dose should be determined according to the blood glucose, age, weight and other conditions of elderly patients with gastric cancer and diabetes. The puncture vessel shall be properly fixed and the puncture site shall be properly handled. Monitor blood glucose every 3h, and adjust insulin dosage according to blood glucose level to avoid excessive fluctuation of blood glucose and prevent hypoglycemia.

Gastric cancer is one of the most common malignant tumors in clinic. It is the second leading death caused by tumor in the world, and its incidence rate is the highest among gastrointestinal malignant tumors. Surgical treatment is the main treatment. In recent years, the number of patients with gastric cancer and diabetes has gradually increased. These patients have different degrees of endocrine and metabolic disorders, which to some extent increase the risk of surgery and the incidence of postoperative complications. Diabetes is a metabolic disorder, often accompanied by many complications. It is a high risk factor for the eradication of gastric cancer, which will

seriously affect the surgical treatment and prognosis of patients. At the same time, the pressure of gastric cancer and surgery will also aggravate the original diabetes to a certain extent and increase the probability of complications. Therefore, perioperative blood glucose control is very important for patients with gastric cancer and diabetes. The relevant nursing staff should closely observe the patient's changes in condition, reasonably use hypoglycemic drugs, actively alleviate the patient's negative emotions, effectively reduce the probability of postoperative complications, shorten the hospital stay, and promote the patient's recovery. Diabetes is a lifelong disease. Hyperglycemia for a long term can cause chronic damage and dysfunction of various tissues. With the improvement of people's living standards and dietary changes, the incidence rate of gastric cancer is gradually increasing, and the treatment is mainly surgical treatment. At present, the number of elderly patients with gastric cancer and diabetes is increasing. When the elderly patients with gastric cancer and diabetes undergo surgery, it not only increases the risk of surgery, but also increases the incidence of postoperative complications, thus prolonging the hospital stay of the elderly patients with gastric cancer and diabetes. Therefore, it is very beneficial to control blood glucose during perioperative period in elderly patients with gastric cancer and diabetes.

In this study, routine nursing was used in the routine nursing group, and blood glucose control was used in the intensive control group. The data showed that the intensive blood glucose control group was better than the routine nursing group in terms of satisfaction, blood glucose index, quality of life, time to reach the standard of preoperative blood glucose control, and perioperative vital signs ($p < 0.05$).

In conclusion, the nursing effect of controlling blood glucose in elderly patients with gastric cancer and diabetes is ideal.

2. Nursing before and after operation

Diabetes is an endocrine metabolic disease, which is mainly caused by high blood glucose caused by insufficient insulin secretion in the blood, resulting in abnormal protein metabolism. The main clinical manifestations are polydipsia, polyphagia, polyuria. Gastric cancer was observed by gastroscopy as ulcer type, mass type and superficial phenotype. Elderly patients with gastric cancer and diabetes can be treated surgically as long as preoperative and postoperative care is strengthened and blood glucose level is controlled. Radical surgery belongs to local treatment, with the main purpose of eradicating diseases. It is widely used in cancer treatment. On the basis of routine nursing, strengthen preoperative and postoperative nursing, including preoperative evaluation, psychological nursing, dietary guidance,

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blood glucose control, postoperative condition observation, blood glucose monitoring, complication nursing, which can effectively control blood glucose level, prevent infection and ensure the effect of surgical treatment. Shenlihua reported that strengthening preoperative and postoperative care can reduce the incidence of complications in elderly patients with gastric cancer and diabetes, ensure smooth operation and improve nursing satisfaction.

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