

# The Use of Mindfulness Based Interventions to Promote Emotional Wellbeing

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## Abstract

Nurses often experience high levels of stress and anxiety that can impact emotional wellbeing. This lack of emotional wellbeing can lead to burnout and loss of productivity. Mindfulness-based interventions have been shown to reduce stress and anxiety while increasing mindfulness and awareness. In this presentation, a variety of evidence based mindfulness interventions will be presented with time given to practice the intervention. Application of the mindfulness interventions into the practice settings will also be discussed. The results of mindfulness intervention conducted by the author with nurse anesthesia DNP students will also be shared [Stress decreased at 3-months ( $F = 4.497, p = .014, \eta^2 = .138$ ) and 6-months ( $F = 7.998, p < .001, \eta^2 = .222$ ) and anxiety decreased at 6-months ( $F = 4.686, p = .004, \eta^2 = .143$ ]. The gradual decline in stress and the delayed improvement in anxiety suggest that continuous interventions are needed to achieve positive results. Through the use of mindfulness-based interventions, the nurse can more proactively manage life stressors through self-regulation and control.

# The Relationship Between Psychological Inflexibility, Psychotic Symptoms, and Quality of Life in Individuals with Schizophrenia: A Cross-Sectional Study

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## Abstract

**Background:** Psychological inflexibility (PI), defined as the inability to adapt functionally and congruently to various situations in alignment with personal values, may exacerbate psychotic symptoms and impair quality of life in schizophrenia (SCZ). This study aimed to investigate the role of symptom severity and quality of life.

**Method:** This cross-sectional analytic study utilized data from a randomized controlled trial aimed at reducing symptoms and promoting smoking cessation among individuals with SCZ in Hong Kong (mean age 51.71, SD 9.76; 61.5% male; 35.6% smokers). The severity of psychotic symptoms was assessed using the Brief Psychiatric Rating Scale (BPRS), quality of life was measured by the EQ-5D-5L, and PI was evaluated using the Acceptance and Action Questionnaire (AAQ-II). Core components related to PI, including experiential avoidance (BEAQ), values-based living (VQ), and committed action (CAQ), were also examined. Inferential statistical analyses, including Mann-Whitney U tests, independent sample t-tests, ANOVA, Pearson correlation analysis, and subsequent multivariate analysis, were conducted using SPSS 28.

**Results:** Between October 2022 and June 2024, 104 SCZ participants completed baseline assessments. PI and its related processes, such as experiential avoidance and valuing obstruction, showed moderate positive correlations with psychotic symptom severity ( $r = 0.27-0.45$ ), while valuing progress and committed action were negatively correlated ( $r = -0.27$  to  $-0.31$ ). Quality of life was significantly moderately correlated with PI and its components, including experiential avoidance and valuing obstruction ( $r = 0.24-0.46$ ), with committed action showing a negative correlation ( $r = -0.36$ ). A weak negative correlation was observed between psychotic symptom severity and quality of life ( $r = -0.23$ ). Linear regression analysis revealed that PI was the sole predictor of both psychotic symptom severity ( $\beta=0.330$ ;  $R^2 = 27.5\%$ ) and quality of life ( $\beta=-423$ ;  $R^2 = 36.3\%$ ).

**Discussion:** Higher PI predicted more severe psychotic symptoms and lower quality of life among this SCZ sample. These findings suggest that interventions aimed at reducing PI could improve health outcomes of SCZ individuals (such as psychotic symptoms and quality of life). Further longitudinal studies and trials focusing on psychological inflexibility interventions are warranted to explore these dynamics in greater depth.

# Perforating Injury of Abdomen, Thorax and Neck in a Child with a Bamboo Stick

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## Abstract

Penetrating or perforating abdominal or chest injuries are very uncommon in the pediatric age group and are associated with a high mortality. Impalement injuries are consequence of penetration by elongated, usually fixed objects through the body.

**Case Summary:** A 10-year young child suffered from a penetrating injury to the left iliac fosse when he had fallen down from a coconut tree on to the sharp bamboo fence. The bamboo stick penetrated the abdominal wall, perforated the jejunal loops at two sites along with the fundus of stomach, the left diaphragm, upper lobe of the left lung and the bevelled end of the bamboo had exited at the neck after tearing apart the neck muscles and skin sweeping along with it few scattered pieces of jejunal tissues which were seen lying alongside. He was brought to the hospital 5 hours after the accident. On arrival he was in agony, dehydrated and scored 15/15 on Glasgow scale, remained haemodynamically stable, saturation of 93% with oxygen supplement. On examination a 75x5cm bamboo stick was in situ, which entered 4 cm medial to the left anterior superior iliac spine and exited 3 cm above the skin at the posterior triangle of neck.

**Operation:** Imaging modalities were followed by exploration via the left thoracoabdominal incision. The thorax and mediastinum were assessed in the beginning and after confirming that no great vessels were at risk, the foreign body was then carefully removed. The perforated stomach, jejunum and diaphragm were repaired. The upper lobe of lung had to be resected. An abdominal drain and two intercostals drains were placed. The total operative time was 3.30 hours and the child was managed in intensive care for 4 days and was finally discharged after two weeks.

**Conclusion:** A rare penetrating injury with damage to the multiple organs could be managed successfully possibly because of teamwork: and also due to some sensible move by the villagers as they did not try to fiddle around with the foreign body.

# **Partnerships to Reduce Stress and Promote Well-Being for Parents of School Children During the COVID-19 Pandemic: Using Online and In-Person Acceptance and Commitment Therapy**

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## **Abstract**

Community-based partnership programs can play an important role in reducing stress among children's parents by providing social support, access to resources, and skill development. The COVID-19 pandemic has had a severe impact on the mental health of parents, especially those of school-age children. This presentation will report on the development and effectiveness of group-based Acceptance and Commitment Therapy (ACT) delivered through face-to-face or online video sessions to reduce parental stress and improve mental health. Using a quasi-experimental design, with 250 participants (mainly female, mean age 40.90 years, youngest child mean age 7.68 years), 109 parents participated in the online intervention, while 141 parents participated in the face-to-face sessions. The study found significant improvements in various outcome variables after the intervention, including reduced parental stress, reduced depressive symptoms, improved mental health literacy, improved subjective well-being, and improved psychological flexibility, with effect sizes ranging from small to medium (Cohen's  $d$ : 0.152-0.508). Results also show that online video conferencing delivery methods are as effective as face-to-face formats, with similar meeting attendance rates. These findings highlight the potential of group-based acceptance and commitment therapy to relieve stress and improve mental health in parents of school-age children, particularly during the COVID-19 pandemic crisis.

# **Octogenerians, Spinal Surgery and Anesthesia- Game of Thrones**

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## **Abstract**

We faced the increase in number of octogenerians who required spinal surgery and moreover, they are ready to accept surgery despite increase peri-and postoperative complications (stroke, cardiovascular, pulmonary and kidney complications, infection). This trend can be explained by increased safety during spinal procedures thanks to improvement of surgical technique, minimal invasive approach and modern spinal implants. On the other hand, spinal pathologies in octogenerians are common associated with significant comorbidities, which is the main concern regarding anesthesiology.

The result of this game between patient expectations, reasonable indications for surgery and possible complications is still a topic of debate in everyday clinical practice between surgeon and anesthesiologist, but also in academic discussions.

We will present the results of spinal surgical treatment in octogenerians at University hospital. Indications, type of surgery, comorbidities, ICU stay, hospital stay, complications and outcome had been analysed. We also present a review of literature regarding this hot topic.

The goal of this study is to set some pillars for future protocols regarding spinal surgical procedures in old population is increasing worldwide and who are ready to undergo spinal surgery in order to achieve a high level of life quality.

# Opioid-Sparing Effect of a Cannabinoids in Treating Acute Radicular Pain: A Placebo-Controlled Randomized Clinical Trial

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## Abstract

The search for ways to reduce opioid consumption during acute pain management has attracted major scientific efforts. The opioid-sparing effect of cannabinoids has been well established in preclinical studies, yet has failed to demonstrate such an effect in many clinical trials. The current study, a randomized, double-blinded, placebo-controlled trial, evaluates the effects of a single sublingually-administered dose of a cannabinoid-formulation, containing tetrahydrocannabinol (THC), cannabidiol (CBD) and terpenes, on morphine consumption, and pain intensity using the visual analog scale (VAS).

**Methods:** Adult patients (n=69), diagnosed with acute radicular pain (VAS 6 or higher), were randomly assigned to one of three groups to receive a single dose of : (i) high-dose cannabinoid-formulation (20mg THC, 20mg CBD and terpenes), (ii) low-dose cannabinoid-formulation (10mg THC, 10mg CBD and terpenes), or (iii) placebo. The patients were then connected to a patient-controlled analgesia (PCA) pump for self-administration of IV morphine, as needed. Subjects were monitored for up to 24 hours post-treatment.

**Results:** Treatment with the high-dose cannabinoid-formulation resulted in a significant reduction in the total amount of IV morphine consumed, as compared to the placebo group (17.4±14.2 (SD) mg vs 33.2±24.6mg, p=0.031). Pain intensities were similar across all treatment groups, despite lower opioid dosages in the High-Dose Group. The opioid-sparing effect lasted beyond the known cannabinoids analgesic window, suggesting that its effect may also include improving the capacity to cope with pain. None of the subjects withdrew due to adverse effects. Hallucinations were reported in 1/26 and 2/21 in the high and low-dose groups, respectively, lasting for a maximum of one hour and resolving without any intervention.

**Conclusions:** The study demonstrates that a single dose of sublingual cannabinoid-formulation containing THC, CBD and terpenes, reduced opioid consumption in acute radicular pain, Cannabinoid treatment should be considered for use in the management of acute radicular pain.

# Robotic Assisted MRI-US Fusion Compared to Cognitive Targeted Prostate Biopsies

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## Abstract

To determine differences in cancer detection rates (CDR) of regions of interest (ROI) on magnetic resonance imaging (MRI) with robotic assisted (RA) targeted biopsies compared to visually targeted biopsies (V-TB). Patients and Methods: In this two centre, retrospective outcome study, a total of 130 consecutive men who had a pre-biopsy MRI, were biopsy naïve and had a transperineal prostate (TP) biopsy between 9/2015 and 7/2017 were included. The primary analysis consists of 39 men who had V-TB in addition to systematic biopsies (SB) and 53 men who had RA-TB in addition to SB. Outcomes were reported as CDR for any cancer and for clinically significant cancer (csC).

Results: Targeted CDR of any cancer with PI-RADS 3-5 ROIs was significantly higher in RA-TB compared to V-TB (47.2% vs 12.8%,  $p=0.001$ ). Targeted csC CDR was also higher in RA-TB vs V-TB (32.1% vs 10.3%  $p=0.014$ ).

On multivariable analysis significant factors which affected the any CDR of targeted biopsies was prostate volume (OR 1.03, 1.01-1.06) and RA-TB (OR 5.97, 1.69-21.07). For csC it was prostate volume only (OR 1.04, 1.01-1.07).

Robotic assisted biopsy results in less acute urinary retention (1.6% vs 10.3%  $p=0.04$ ), less prolonged haematuria (12.9% vs 32.4%  $p=0.009$ ) and shorter biopsy times (24min vs 32min  $p<0.001$ ).

Conclusion: Robotic assisted targeted biopsy results in higher CDR for any cancer and clinically significant cancers. It also suffers lower complications compared to grid directed TP biopsy. The ease of use and standardisation of the robotic procedure may reduce the learning curve and increase biopsy accuracy.

# The Effect of Promoting Factors on Learning by Four Different Delivery Modes

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## Abstract

**Background:** In the digital era, developing effective teaching methods is crucial due to the challenges of maintaining students' concentration amidst distractions. This study assessed the effects of learning-promoting factors both across group boundaries and within RCT groups examined in our previous study on the effectiveness of online versus live teaching(1).

**Methods:** The participants' experiences in the domains of Concentration, Anticipation, Liking and Desire to reuse were evaluated online immediately after a lesson on diagnosing pediatric respiratory issues implemented either in a Live, Live-stream, Vodcast or Podcast setting. The students rated their experiences on a scale of 1–10 with scores above a median of 8 indicating high experience levels in each factor. Learning was evaluated using a Webropol e-Test immediately and five weeks after the teaching session. The 15-minute test, comprised 10 multiple-choice questions and real-life video scenarios, measured both theoretical and diagnostic skills. The test score scale was from -26 to 28 points.

**Results:** High concentration was experienced by 70/72 (97.2%) students in the Live, 41/75 (54.7%) students in the Live-stream, 53/72 (73.6%) students in the Vodcast and 36/79 (45.6%) students in the Podcast teaching groups ( $P < 0.01$ ). High concentration promoted learning the most, resulting in a 1.93 score improvement in the short-term test and a 1.65 score improvement in the long-term test. Among those with high concentration, the average test scores ranged from 21.9 to 23.4, while the range for low concentration was 18.3–20.0.

**Conclusion:** In our study, the live teaching method resulted in the highest levels of concentration, and across learning methodologies, good concentration promoted higher test scores compared to the test scores of students with low concentration. Given the variation in concentration and test scores for different learners using the different learning modalities in our study, diverse strategies may enhance concentration for certain learners.

# **Mantle Cell Lymphoma in an Asymptomatic Male-A Case Report**

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## **Abstract**

Intestinal Lymphomas are uncommon; only <0.4 % of all colon neoplasms. Mantle Cell Lymphoma is a subtype of B-cell non-Hodgkin lymphoma (NHL) and is associated with (11;14) translocation that dysregulates the cyclin D1 gene. Only a few cases were reported in the literature. We encountered a 68-year-old male with a painless tarry stool for one day. Upper GI Endoscopy showed an active Duodenal ulcer but colonoscopy showed multiple submucosal polyps. A biopsy was performed and the pathology report indicated the tumors to Mantle Cell Lymphoma. The patient received Rituximab plus close follow-ups and remained recurrence-free. We are presenting this case for its rarity.

# **Updates in Managing Acute Pain in Patients with Opioid Use Disorder**

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## **Abstract**

At Johns Hopkins Hospital, Acute Pain Service (APS) manages a wide variety of Perioperative Pain cases, which is significantly more challenging in patients who suffer from Opioid Use Disorder.

We follow comprehensive and individualized approach to effectively address their pain while considering specific short- and long-term risks and challenges for this vulnerable patient population.

We follow inpatient multimodal and multidisciplinary approach, with focus on safe and effective discharge plans. In this presentation I will share our experience and lessons we have learned over the years, since APS started collaborating with the inpatient Substance Use Disorder Service (SUDS) and continue managing their pain after discharge at the outpatient Subacute Pain clinic.

# Impact of Live and Vodcast Teaching on Long-Term Learning, A Randomized Controlled Trial (RCT)

Marko Tolonen and Eija Piippo-Savolainen  
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## Abstract

**Background:** With the rise of recorded lectures and other digital learning modalities, the question arises: will live teaching remain necessary in the future?

This RCT study examines the effectiveness of live versus video (vodcast) teaching on long-term learning outcomes, specifically exploring whether live teaching provides unique benefits over pre-recorded formats.

**Methods:** A total of 133 medical students from the University of Eastern Finland participated in this study during 2023–2024. Students were randomized into two teaching modality groups: classroom teaching (live, N=61) and video recording (vodcast, N=72). A 45-minute lesson was delivered by the same instructors following a standardized protocol. Immediately after the lesson, students completed a MUSIC-motivation survey on their own devices, with assessments conducted at 3- and 7-days post-teaching. The test consisted of 13 multiple-choice questions focused on identifying breathing difficulties from real-life video scenarios in preschool-aged children, with score scale was from -26 to 34 points. Statistical analyses were conducted using multiple comparison and regression tests. Additionally, participants answered to survey self-reported sleep quality and alcohol use, which were analyzed alongside test scores.

**Results:** The mean test scores (SD) were 25.0 (4.6) for the vodcast group and 27.1 (3.4) for the live group, with the live group showing significantly better outcomes ( $p=0.04$ ). Participants in the live teaching group reported significantly higher levels of empowerment ( $p=0.007$ ). Interestingly, vodcast group participants rated "Caring" higher on average than those in the live group ( $p=0.025$ ). Gender also had a significant impact: female students achieved higher test scores overall ( $p=0.003$ ), and participants under 26 years performed significantly better than those over 25 years ( $p=0.04$ ) in both groups. Additionally, sleep and alcohol consumption influenced scores, particularly for women. Good sleep over two nights improved women's scores significantly ( $p=0.006$ ), while alcohol consumption over seven nights negatively affected men's results relative to women's ( $p < 0.001$ ).

**Conclusions:** Live teaching is a more effective method for supporting long-term learning compared to vodcast lesson. In educational settings, fostering supportive environments that build confidence, and engagement can significantly enhance learning outcomes, particularly for women. Schools should promote well-being and develop tailored strategies to improve performance across diverse student groups, with an investment in live teaching, as it has proven to be the most effective modality for long-term learning outcomes.

# Postoperative Pain Prediction Prior To Knee or Hip Arthroplasty by Gene Expression Analyses of the Peripheral Blood of Osteoarthritic Patients

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## Abstract

Osteoarthritis (OA) is a major source of pain, disability, and socioeconomic expenditures worldwide. Severe pain implies an indication for joint replacement in patients with end-stage OA. However, chronic postoperative pain is observed in 10-40% of patients with OA. Therefore, identification of the causes that affect the outcome of arthroplasty would permit a more accurate selection of patients, provide them with more accurate anticipations, and augment the profits of surgery for each individual. In addition, there is a need to predict the results of surgical intervention in terms of maintaining postoperative pain due to the high cost of arthroplasty.

**Methods:** We examined peripheral blood of 31 hip and 50 knee OA patients undergoing joint replacement surgery and 26 healthy volunteers. Patients were tested before and 6 months after surgery. Pain was assessed prior to surgery using VAS index and neuropathic pain questionnaires DN4 and PainDETECT. Functional activity was evaluated by WOMAC. After surgery pain indices according to VAS of 30% and higher were considered. Total RNA isolated from whole blood was used in expression studies for cathepsin S, interleukin (IL)-1 $\beta$ , tumor necrosis factor (TNF) $\alpha$ , and cyclooxygenase (COX)2 genes using quantitative real-time RT-PCR.

**Findings:** After 6 months' post-surgery pain complaints were obtained from 38.7% patients with hip OA and 34% patients with knee OA. Prior to surgery expression of cathepsin S, IL-1 $\beta$ , TNF $\alpha$ , and COX2 genes was significantly upregulated in all examined subsets of OA patients compared with healthy controls. Patients with knee and hip OA who developed POP demonstrated significantly higher cathepsin S gene expression compared with painless subjects prior to surgery. In addition, patients with knee OA who developed POP demonstrated significantly higher expression of IL-1 $\beta$  and TNF $\alpha$  compared with painless subjects while no significant differences in the expression of proinflammatory cytokines were observed in both subsets of patients with hip OA.

**Conclusion:** Cathepsin S gene expression measured in the peripheral blood prior to surgery might serve as a prognostic biomarker of postoperative pain development in patients with knee and hip OA. Differences in prognostic value of IL-1 $\beta$  and TNF $\alpha$  gene expression measured in the peripheral blood prior to surgery might indicate that destruction of the hip and knee in OA is caused by different pathophysiological mechanisms.

# **Implementation of VATS and NIVATS in Thoracic Trauma and Emergency Thoracic Surgery**

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## **Abstract**

Thoracic trauma occurs in 20-25% of injured patients and is a cause of near 16000 deaths annually in the USA. Severe isolated thoracic trauma has in hospital mortality rate of 49,2%, of note 57,1% of death occurs in 6h, 69,9% death in first 24h. Patients with blunt mechanism of injury have very rare indications for immediate surgery, and those who have had a little chance for survival. Penetrating thoracic trauma usually have an algorithm of diagnostic tools and surgical maneuvers but in some cases stable patients could become unstable and have a cardiac arrest. The combination of surgical and anesthesiological mastership in patients with physiological insult and death give them a chance to be cured and alive. In our research we implemented VATS and NIVATS in penetrating and blunt thoracic trauma, spontaneous thoracic bleeding as a diagnostic and definitive surgical tool (not in all cases). Further research should be done to prove or deny our point of view.

# **Multidisciplinary Approach to the Challenges in the Perioperative Management of Large Merkel Cell Carcinoma**

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## **Abstract**

The essence of peri-operative care is the integrated multidisciplinary team-based approach to patients from the moment surgery is contemplated to full recovery. Managing large soft tissue masses in the back is very challenging with multiple facets requiring precision care and erudite planning. Our Case of Merkel Cell carcinoma is an excellent manifestation of such a complex scenario. A multidisciplinary approach with closed-loop communication is essential in countering the challenges with the need for tailoring management for Immunotherapy & its complications, huge mass with areas of necrosis leading to sepsis, difficulty in mask ventilation and intubation due to limited posture, very poor vascular access, the need of rapid infuser for resuscitation, cardiac output & pulse pressure variation for hemodynamic monitoring, challenges with prone position intraoperatively with complex plastic surgery reconstruction & extubation in the lateral decubitus position.

# Thoughts on External Assisted Circulation, Probable Bio-mechanism

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## Abstract

The most popularized direction of external assisted circulation (AC) to date is Enhanced External Counterpulsation (EECP), carried out by a stationary pneumomechanical apparatus. The trigger mechanism of hemodynamic shifts in EECP is the cardiac-synchronized pumping of air segment by segment into cuffs wrapped on the lower limbs, buttocks and lower abdomen and compressing under high pressure a large mass of passive muscles with squeezing and displacement of a significant portion of arterial and venous blood in the central direction starting from the end of systole to the end of diastole (about 80% of the R-R duration). With the release of air before systole, the pressure in the cuffs simultaneously drops to atmospheric.

Another direction of the external AC and heart non-invasive unloading is the L.V. Lapanashvili method of Muscular Counterpulsation (MCP), carried out by portable external Cardiac Assisted Devices (exCAD) - an original portable electro-pulse generator, synchronized by ECG in antiphase with the heart. The trigger mechanism of hemodynamic shifts of MCP is the cardiac-synchronized effect of short (about 8% of the R-R duration) burst of electrical impulses strictly in diastole in a carousel mode on one of four selected distal areas of the limbs, activating and contracting only one and the same group of muscles on every fourth beat. By the beginning of systole, the muscle has time to relax and by the next contraction, after 3 beats on the fourth, fully recover. LV systole is accompanied by the ejection of a portion of blood (SV) together with the formation of a pulse wave. Due to the significant difference in speeds between the arterial blood flow and the pulse wave, the retrograde pulse wave normally just arrives in time for the closure of the aortic valve, facilitating the throwing of blood into the coronaries and brachycephalic arteries.

The body's response depends on the level of activation of the biomechanism, which in turn is determined by the magnitude of the applied force impulse ( $p = Fxt$ ) and the possibility of hemodynamic resonance at the level of centripetal blood flows in the arterial tree, pulse waves retro propagation along the arterial wall, or only the sympathetic component of the ANS. Each of these levels will be analyzed and discussed in detail separately along with the impact on the magnitude of venous return.

# Efficacy of Fespixon Ointment in Pain Reduction and Wound Healing for Burns in Home-Based Care

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## Abstract

A controlled experimental study was conducted, involving 20 adult patients with first- or second-degree burns covering less than 10% of their body surface area, who visited an outpatient clinic at our medical center between January and July 2024. Patients were randomly assigned to either the experimental group (n=10) or the control group (n=10). The experimental group received Fespixon ointment, while the control group received a color-matched standard antibiotic ointment. Patients were instructed to perform daily self-administered dressing changes at home for seven consecutive days. Weekly follow-up visits included photographic comparisons of wound healing, with pain intensity, anxiety, and relaxation levels measured using a Visual Analog Scale (VAS).

1. The application of Fespixon ointment improved the pain threshold during dressing changes for first- and second-degree burns.
2. Patients treated with Fespixon ointment experienced faster wound healing compared to those treated with standard antibiotic ointment.
3. Patients treated with Fespixon ointment showed significantly lower anxiety levels compared to those in the standard antibiotic ointment group.

In conclusion, Fespixon ointment offers significant advantages for home treatment of first- and second-degree burns. Patients experienced less pain during dressing changes, faster healing, and reduced anxiety compared to standard antibiotic ointment. These results highlight Fespixon as a superior option for improving both physical recovery and psychological comfort in burn care.