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to improve consumers' sub-health status and generate positive social effects.

Subjects and Methods. We performed a MEDLINE search focusing on the past 10 years. Keywords used were attachment, neurobiology, and psychotherapy. We included original studies and existing reviews looking at all types of formal psychotherapy used and focusing on human research. Exclusion criteria were non-psychotherapeutic interventions and attachment based on couples only.

Results. The experimental results showed that the number of people who observed red light was greater than that of those who observed blue light, and the number of people who observed green and blue light was 21,25. The order of changing colors has little effect on the experimental results. The level of activity in brain regions varies with color, with darker red areas indicating more active brain activity, while darker blue areas indicating less active brain activity.

Conclusions. Red light makes the brain tense and excited, while blue light makes the brain calm and relaxed. Design products with colors, expressing emotions through color combinations on the screen. Faced with the psychological dilemma of anxiety, through the application of color in product design, color optimization is carried out to explore effective color application solutions that can be suitable for various psychological needs.

Effectiveness of combined herbal medicines on bipolar disorder among university students during teaching course reform

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Background. Through interviews and questionnaire surveys on emotional factors in college students' learning, it was found that there is a common prevalence of mania such as weak integrative motivation and strong anxiety, which to some extent affects learning efficiency. This study aims to observe the therapeutic effect of the combination of engineering management teaching reform and innovation in universities and traditional Chinese medicine on students' mania.

Subjects and Methods. The subjects of this study were 120 randomly selected students from a certain school and college, who were evenly divided into two groups. The experimental group received reform teaching combined with traditional Chinese medicine treatment, while the control group received traditional teaching. A questionnaire survey was conducted with a rating of five levels ranging from "very suitable for me" to "completely unsuitable for me", with a score ranging from 5 to 1. After the questionnaire was collected, SPSS was used to analyze the reliability of the data. Results. The results showed that the average value of anxiety factors in the control group exceeded 3.00. The average value of students' learning confidence is below 3.00, and 57.8% of students believe that they lack self-confidence. The average value of anxiety

factors in the experimental group is below 3.00, and 80% of students believe that they have mastered knowledge through teaching and feel relaxed and confident in the classroom.

Conclusions. This study indicates that students have manic affective disorders with weak integrative motivation and strong anxiety. Classroom teaching mode is optimized, importance is attached to the cultivation of integrated motivation, timely attention is paid to students' emotional status, students can overcome mania, and learning emotions and outcomes can be improved.

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Health education combined with educational management to improve students' bidirectional emotional disorders

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Background. The period of college students is a high incidence age for bipolar disorder. Strong fluctuations and fluctuating emotional experiences, fluctuating between manic and depressive states, can cause serious damage to the physical and mental health of college students. This study proposes specific measures and suggestions for prevention education and crisis intervention to address bipolar disorder among college students.

Subjects and Methods. 80 patients with bipolar disorder who underwent psychological treatment in a certain school hospital were selected as the research subjects and randomly divided into an observation group and a control group, with 40 patients in each group. The control group received routine education, while the observation group received health education based on the control group. SPSS analysis was conducted to compare the significant differences in emotional intelligence levels, Hamilton Depression Scale, and Young Mania Scale between two groups of patients before and after intervention.

Results. The results showed that after the intervention, the total scores on the emotional intelligence scale and emotional perception, as well as the scores of self-emotional management and others' management dimensions in the observation group were higher than those in the control group. However, there was no statistically significant difference in the scores of emotional utilization dimensions between the two groups. The Hamilton Depression Scale and Young Mania Scale scores in the observation group were lower than those in the control group (t=2.951, t=0.004; t=3.893, t=0.001).

Conclusions. Health education can effectively improve the emotional intelligence level of patients with bipolar disorder, help improve emotions, and reduce their manic and depressive levels.