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1. ADULT HEALTH

BURNED PATIENT CARE AT THE EMERGENCY SERVICE

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Introduction: The burned patient is defined as a trauma patient, who requires multidisciplinary care, since the severity of the burns go far beyond the partial or total destruction of the skin thickness, whence, can compromise several organs and, according to its severity, may lead to multiple organ failure, therefore, an early approach imposes clinical procedures and protocols based on evidence (DGS, 2012).

Objectives: Standardize the interventions of burn patients in the emergency service, in order to correctly assess and proceed to prevent complications.

Methods: We conducted an integrative literature review of 7 scientific articles, in Portuguese language, in the last 5 years, which identified a set of interventions and recommendations, according to the criteria of the CDC/HICPAC, which categorizes them based on existing scientific data, logical reasoning, applicability and economic impact thus integrating the category IA (evidence level A, recommendation grade I).

Results: The first set of treatments done to the burned patient on care, not only includes the injuries originated by the causal agent, but also the maintenance of airway permeability, fluid replacement and pain control, with the purpose to decrease the complications due to trauma. The treatment is established according to the severity of injuries from exposure, type and degree of commitment.

Conclusions: An updated knowledge, allows the identification and prevention of subtle changes that can trigger major complications, minimizing both the mortality and morbidity rates, as the long-term injuries, helping these patients to have a satisfactory life quality allowing them a social, professional and family integration.

Keywords: Burns. Quality. Nursing care.

LIFESTYLE OF HIGHER EDUCATION STUDENTS - PROMOTING HEALTHY BEHAVIORS

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Introduction: Higher education students are usually found in the age group of young adults, characterized by major changes and events that influence the adoption of lifestyles. Lifestyles purchased this stage are usually kept for life. Thus universities emerge as important means of promoting healthy lifestyles.

Objectives: Diagnose lifestyles; Prioritize areas of intervention; Implement measures to promote healthy behaviors.

Methods: For the diagnosis carried out a descriptive study (2013) of higher education students in the Autonomous Region of Madeira (n = 1,304). We used the Higher Education Lifestyle Questionnaire, validated for the Portuguese population ($\alpha = 0.810$) by Carvalho & Pestana (2008). The auto response instrument uses a Likert-type scale of 5 points and it consists of 36 items with a score ranging between 36 and 180. Highest score means healthier lifestyles. The Intervention "Invest in Your Health" includes conferences, health fair, meetings with experts, physical activities and website. We evaluated the intervention (2015) with the replication study done for diagnosis.

Results: In intervened students there was an increase of 3.2 points in total mean score (140.63 to 143.83). In prioritized fields was increased by 5.6% students always take the recommended meals and 5.1% in those who frequently and always practice demanding physical activity and decreased 11.3% in those who never or rarely control blood pressure.

Conclusions: The results corroborates the findings of other studies and the usefulness of this project. We suggest continuity to improve the results, also integrating activities directed to other areas not intervened.

Keywords: Lifestyles. Adult. Students Higher Education.

MULTI-SEPTATED PARAPNEUMONIC EFFUSION: CASE REPORT

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Introduction: Pleural effusions have different aetiologies and are quite common in people with community-acquired pneumonia. The treatment of pleural effusions can be performed with medical therapy and respiratory techniques. Sometimes more invasive approaches such as thoracic drainage, instillation of fibrinolytic agents in the pleural cavity and/or thoracic surgery are necessary. **Objectives:** To present a case report of a patient with pleural effusion that developed a multi-septated parapneumonic effusion.

Methods: Case report presentation and discussion. The study was conducted after informed consent through direct interviews, observation, physical exam and analysis of complementary exams of diagnosis and therapeutics (namely axial, sagittal and coronal images of a thoracic computed tomography scan after the placement of the chest tube drainage).

Results: 49 years-old men hospitalised in the pneumology department with community-acquired pneumonia, hypoxemic respiratory failure and left pleural effusion. The treatment was initiated by symptomatic control and administration of antibiotics to solve the underlying pathology. Respiratory exercises were performed to optimize ventilation, breathing and drainage of pleural effusion. Thoracoscopy, thoracentesis and chest tube placement was performed. Intra-pleural instillation of fibrinolytic agents was performed. The case advanced into a multi-septated parapneumonic effusion that justified thoracic surgery.

Conclusions: Pulmonary decortication or pleurectomy emerge as therapeutic options. Despite of the less invasive approaches look promising in the resolution of pleural effusions of different aetiologies, in cases of multi-septated parapneumonic effusions surgical intervention may be essential for solving the problem.

Keywords: Adult health. Case report. Pleural effusion.

2. CARDIOVASCULAR HEALTH

PHYSIOLOGICAL DYNAMICS OF HEART RATE VARIABILITY: A STATISTICAL MODELING APPROACH IN VASOVAGAL SYNCOPE

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Introduction: The transitory loss of conscience and postural tone followed by rapid recovery is defined as syncope. Recently has been given attention to a central mediated syncope accompanied by the drop of systemic pressure, a condition known as vasovagal syncope (VVS).

Objectives: The analysis of Heart Rate Variability (HRV) is one of the main strategies to study VVS during standard protocols (e.g. Tilt Test). The main objective within this work is to understand the relative power of several physiological variables such as Diastolic and Systolic Blood Pressure, (DBP) and (SBP), Systolic Volume (SV) and Total Peripheral Resistance (TPR) in Heart Rate Variability (HRV) signal.

Methods: Statistical mixed linear models were used to model the behavior of the above variables in HRV, by setting the common characteristics between the patients described by the fixed parameters, and the individual patterns of the patients described by the random part.

Results: Data with more than thousand five hundred observations from four patients with VVS were used and previously tested with classical spectral analysis for basal (LF/HF = 3.01) and tilt phases (LF/HF = 0.64), indicating a vagal predominance in the tilt period. Statistical mixed models reveal, in Model 1, a major role in DBP and a low influence from SV, in the tilt phase, concerning HRV output. In Model 2, TPR disclose a low HRV influence in the tilt phase among VVS patients.

Conclusions: HRV is influenced by a set of physiological variables, whose individual contribution can be assessed to understand the nature of heart rate fluctuations. In this work, the use of statistical mixed models put forward the importance of studying the role of DBP and SV in VVS

Keywords: Vasovagal syncope. Heart rate. Mixed models.

ADIPOCYTOKINES, LEPTIN/ADIPONECTIN RATIO AND CARDIOVASCULAR RISK FACTORS IN PORTUGUESE ADOLESCENTS: THE LABMED PHYSICAL ACTIVITY STUDY

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Introduction: Circulating leptin and adiponectin levels have been associated with impaired vascular function, insulin resistance and acute cardiovascular events. This study aimed to evaluate the associations of leptin, adiponectin and the L/A ratio with a clustering of MRF (metabolic risk factor) in 12-18 years-old adolescents.

Methods: This is a cross-sectional analysis with 529 Portuguese adolescents aged 12-18 years. Blood samples were taken to analyze total and HDL-cholesterol, triglycerides glucose, insulin, leptin and adiponectin levels. A continuous variable of clustered MRF score [sum of Z-scores of body fat percentage, systolic blood pressure, ratio total cholesterol/HDL, triglycerides, HOMA-IR and cardiorespiratory fitness*(-1)] was computed.

Results: Regression analyses showed that adiponectin was significant and negative predictor of MRF score (boys: $\beta = -0.199$; $p < 0.001$; girls: $\beta = -0.200$; $p < 0.001$); whereas leptin was a significant positive predictor of MRF score (boys: $\beta = 0.553$; $p < 0.001$; girls: $\beta = 0.399$; $p < 0.001$). The L/A ratio was also a significant positive predictor of MRF score in both sexes (boys: $\beta = 0.593$; $p < 0.001$; girls: $\beta = 0.461$; $p < 0.001$), after adjustments for age, pubertal stage, adherence to the Mediterranean Diet and socioeconomic status. In addition, adiponectin, leptin and L/A ratio were accurate to predict MRF among adolescents, but L/A ratio showed the highest area under ROC curve.

Conclusions: Leptin, adiponectin and L/A ratio are associated with the clustering of MRF in adolescents after adjustments for age, sex, pubertal stage. L/A ratio was more strongly associated with MRF score than adiponectin or leptin.

Keywords: Adipocytokines. Cardiometabolic risk. Youth.

A DIAGNOSIS JUST IN TIME! - A CASE REPORT ON CORONARY HEART DISEASE

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Introduction: Cardiovascular disease is the main cause of death in Portugal (32% of total). After cerebrovascular disease, the most

frequent cause of death in Portugal is coronary heart disease (CHD). Despite this high prevalence, evidence increasingly suggests that the atherosclerotic process can be slowed and its consequences markedly reduced by preventive measures. Secondary prevention relies on early detection of disease process and application of interventions to prevent progression of disease.

Objectives and methods: Describe a case of a 56 years old male patient with a CHD diagnosis, using as main variables - symptoms, complementary diagnostic exams and treatment.

Results: A 56 years old male patient, from a nuclear family on stage VII of Duvall life cycle, with history of dyslipidemia, went to a family medicine appointment because of retrosternal burning sensation with 2 weeks of evolution and fatigue. He denied other symptoms, including dyspepsia, epigastric pain, or vomiting. On clinical examination, blood pressure, heart and respiratory auscultation and abdominal examination were normal. He showed blood tests results with normal values of total cholesterol, HDL cholesterol and triglycerides. He kept his usual medication (pravastatin 20 mg and fenofibrate 160 mg) and an effort electrocardiogram (EE) was ordered. He returned to show the EE that was suggestive of myocardial ischemia. He was sent to a cardiology appointment (CA) on the reference hospital. He was evaluated on the CA and submitted to cardiac catheterism where 2 stents were applied. Aspirine, clopidogrel and carvedilol were prescribed.

Conclusions: Patients' complaints shouldn't be underestimated. Family doctors have a privileged task on early diagnosis and therapeutic orientation.

Keywords: Coronary artery disease. Diagnosis. Prevention.

TREATMENT OF ARTERIAL HYPERTENSION IN DIALYSIS PATIENTS

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Introduction: Renal insufficiency is characterized by a gradual deterioration of the kidneys. The first approach in hypertensive users on dialysis should be non-pharmacological (such as salt restriction, and decreased ultrafiltration), and only then pharmacotherapy should be implemented. There aren't still many studies about the effectiveness of antihypertensive drugs in this population or guidelines by which doctors can guide to standardize procedures.

Objectives: This review aims to study the effect and efficacy of antihypertensive drugs in the treatment of hypertension in renal failure, and relate the use of antihypertensives to the occurrence of hyperkalemia and intradialytic hypotension.

Results: The results of this review were divided into three tables. The first one refers to the effectiveness of some antihypertensive drugs on dialysis patients. The second one describes some procedures that can be implemented to decrease blood pressure. Finally, the third one analyzes the physician prescribing patterns, as well as the existence of drug interactions or inappropriate prescribing on dialysis patients.

Conclusions: The first therapeutic options in this population should be ACEIs or ARA because they lower blood pressure and confer cardiovascular protection. Direct renin inhibitors are also an option to be considered in lowering blood pressure, although further studies are required. Despite this, complications such as intradialytic hypotension and hyperkalemia are associated with the consumption of these drugs. Drug therapy should be complemented with other procedures such as salt restriction, reduction of dialysate sodium and short-term dialysis treatment (to reduce the ultrafiltration rate).

Keywords: Treatment. Hemodialysis. Antihypertensives.

3. CHILD AND ADOLESCENT HEALTH

PARENTING PROMOTION ON PARENTS OF A CHILD WITH CHRONIC DISEASE

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Introduction: Parenthood built after the child's birth requires constant adaptation and challenges in building positive relationships for the development of the child. Hospitalization and diagnosis of chronic illness in a child is a stressful and distressing time for the whole family, considered a critical point in the transition process of parenting. Thus, we intend to increase knowledge to promote parenting (positive) in parents of children with chronic disease.

State of art: Parenthood in terms of family structure organization implies the appearance of parental subsystem that includes a set of functions assigned to the parents to care for and educate their children, and, positive parenting, focus on the child's best interests. The new perspectives for transition to parenthood indicate as focus of attention the training of parents, parent-child interaction and positive discipline. The diagnosis of chronic disease originate change in the lives of parents, implying a reorientation of family life project, marking the beginning of a transition that tends to the transformation of parenting. The needs and parental expectations are often underestimated by health professionals. So, approach the family individually; recognize the important role of parents; adequately meet their needs for support; valuing its practical knowledge and participation in decision-making are fundamental to adjust coping strategies, that facilitate the transition/family adaptation to the new parental role and to the hospitalizations and child chronic disease.

Conclusions: Exercise parenting with a child who has special needs changes the meaning of parenthood and parental vision of themselves. The transition is not just a change but a process of incorporation of change in their lives.

Keywords: Positive parenting. Child. Chronic disease.

MOTHERS' KNOWLEDGE ABOUT BREASTFEEDING AND ITS RELATIONSHIP WITH SOCIODEMOGRAPHIC VARIABLES

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Introduction: Breastfeeding is a right of the newborn, being crucial under the nutritional and immunological point of view, particularly during their first year of life. Despite the investment in the promotion, protection and support of breastfeeding, it is recognized the need for a more targeted approach in order to be achieved the indicators recommended by WHO.

Objectives: Evaluate mother's knowledge about breastfeeding and its relationship with sociodemographic variables.

Methods: Quantitative, descriptive, analytic-correlational and cross-sectional study, applied to a non-probabilistic sample of 100 mothers of newborns and/or infants up to 1 year of life. It was used a questionnaire of socio-demographic characterization and a self-report questionnaire (Sousa, 2014).

Results: of the mothers 50% revealed good overall knowledge about breastfeeding, 4% insufficient, and 90.3% recognized being informed by nurses. Admitted the importance of the initiation of breastfeeding in the first hour of the baby's life 93% of mothers and like exclusive feeding up to 6 months 28%, while only 45% men-

tioned advantages for the baby. The knowledge on the composition of breast milk, as immune protection and identification of correct picks up signals, was named by 93% of mothers. The knowledge was higher in mothers with more education, aged between 26-36 years, married and living in rural areas, but only significant in those with more education ($p = 0.000$) and who were breastfeeding at the time ($p = 0.001$).

Conclusions: If the promotion, protection and support of breastfeeding has recognized a great investment during these years, we admit, given these results, the need to adapt the (in)training to the socio-cultural context of mothers/families.

Keywords: Breastfeeding. Knowledge. Mothers.

THE FAMILY-CENTRED CARE: SHARING WITH THE FAMILY THE NURSING CARE IN PEDIATRICS

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Introduction: Illness and hospitalization of a child/youth is a period of instability and imbalance in the family system may trigger a crisis situation. The transition resulting from the process of health and illness implies a closer look of the nurse in order to facilitate this transition and make it successful, with focus on Parenting. We plan to perform an analysis and reflection on the importance of family care and family needs.

State of the Art: The concepts of health and family are currently linked and is widely recognised the importance of the family for the growth and development of the child. It is imperative to take account the relationship between child and family, including the presence of the parents and the partnership care philosophy as a reference in Pediatrics, that allows the effective recognition that the family is a constant in the child's life. The extension of the partnership model of Anne Casey makes today imperative to family-centred care (CCF) as a new perspective of continuous improvement of the quality of nursing care.

Theoretical and practical implications: Notwithstanding the limitations and advantages of this approach, and the recognition of its importance in clinical practice, the CCF continue to be considered as an ideal to be achieved and not a practice effectively established, with all its difficulties of implementation. It's essential to change the nursing approach through appropriate training of health professionals, changing attitudes to the family, service reorganization, and an entire organizational culture dedicated to the CCF as a way of health gains.

Conclusions: Family-Centered Care is sharing with the family, on a continuing basis and in a supportive manner, the best information regarding their child's health care.

Keywords: Pediatric Nursing. Family. Family Nursing.

DEPRESSIVE SYMPTOMATOLOGY AND ALCOHOL CONSUMPTION IN ADOLESCENTS - A SCHOOL-BASED STUDY

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Introduction: Adolescence is a vulnerable period associated with an increased risk for the development of depressive symptoms. Risk behaviors like alcohol or illicit drug abuse are also very frequent

during this period. The aim of this study consisted in determining the prevalence of depressive symptoms in adolescents and assess the association between depressive symptoms and risk behaviors among adolescents.

Methods: We conducted a cross-sectional study with a school-based sample of 7,354 students (3,944 female gender), aged 11 to 20 years from twenty-six schools of the district of Viseu, Portugal. Data was collected using a self-administered questionnaire answered by the students in the classroom, with sociodemographic variables, risk behavior questions and the Beck Depression Inventory for adolescents (BDI-II) - scores ≥ 13 .

Results: The prevalence of depressive symptomatology was 23.3%, higher in females (28.2% vs 17.7%; $p < 0.001$). The prevalence of alcohol consumption was 41.5%. Alcohol consumption was higher in males (45.5% vs 37.3%; $p < 0.001$) and increased with age in both genders ($p < 0.001$). In both genders, the rate was higher between 15 and 17 years. The prevalence of illicit drug use was 6.7%; 11.2% smoking; (both higher in males $p < 0.001$). Depressive symptomatology was associated with alcohol consumption (OR = 1.44; 95%CI 1.29-1.61); smoking (OR = 1.46; 95%CI 1.25-1.72); illicit drug use (OR = 2.06; 95%CI 1.69-2.52) and with insufficient sleep (OR = 1.97; 95%CI 1.75-2.22).

Conclusions: Our findings show the high burden of depressive symptomatology and unhealthy behaviors associated with depressive symptoms in adolescents. It highlighted the need for strategies for local health promotion interventions for adolescents with depressive symptoms and negative health behaviors.

Keywords: Adolescents. Depressive symptomatology. Substance use. Alcohol.

VALIDATION STUDY OF THE SCALE "CHILD'S SATISFACTION WITH THE DIABETES NURSING CONSULTATION"

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Introduction: The implementation of quality process in hospitals has stimulated the measurement and evaluation of user satisfaction, as this is considered an indicator of quality of care. The assessment of satisfaction with diabetes nursing consultation makes possible "to listen the voice" of the children, so they can express their views, needs, perceptions and expectations related with these health care (Costa, 2011). For this, the use of validated instruments is of extreme importance.

Objectives: To validate the scale "Child's satisfaction with the diabetes nursing consultation".

Methods: Quantitative, cross-sectional and analytical study conducted in a non-probability sample of 135 children, average age of 13.45 years (SD = 2.83) who attend the diabetes consultation in six Portuguese public hospitals. An adapted version of the Users' Satisfaction Scale with the Diabetes Nursing Consultation (Chaves et al., 2012) was used and psychometric study and confirmatory factorial analysis was performed.

Results: The final factorial study presented 13 items distributed by three factors (Initial assessment, guidelines and relationship/communication) that explain 49.95% of the total variance. The global adjustment indices were configured as good ($\chi^2/df = 1.647$; CFI = 0.929; RMSEA = 0.069; RMR = 0.039; SRMR = 0.056) although the GFI = 0.899 performs in the reference threshold value. The scale showed reliability of construct appropriate with composite reliability above 0.70 and reasonable convergent validity (approximately 0.50). The global Cronbach's alpha coefficient proved good ($\alpha = 0.847$).

Conclusions: The results of the psychometric study and confirmatory factorial analysis, let us consider this scale as an appropriate tool to use in studies in this context.

Keywords: Satisfaction. Nursing consultation. Validation study.

PREVALENCE OF ALCOHOL CONSUMPTION IN ADOLESCENTS

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Introduction: Alcohol consumption in adolescents has taken on worrying proportions. Excessive alcohol consumption has negative consequences in the immediate and future health.

Objectives: To describe alcohol consumption in adolescents, to analyse the association of consumption with sociodemographic variables.

Methods: A cross-sectional analytical study. The sample consisted of 7,354 adolescents (majority of females - 53.6%) from 11 to 20 years of 2nd and 3rd cycle/Secondary Schools of Viseu district (Central Portugal). The average age was 14.96 ± 1.81 years. Data were collected through a self-responded questionnaire consisting of sociodemographic variables, and alcohol and other drugs consumption. Data analysis and processing were calculated using the Statistical Package for the Social Sciences version 23. Prevalence was expressed in proportions and compared using the chi-square test. Crude odds ratios (OR) with 95% confidence intervals (CI) were used.

Results: With regard to alcohol consumption, 41.5% of adolescents have tried alcohol. Of these, 36.9% reported consuming occasionally; 3.7% every week and 0.9% every day. Alcohol consumption was associated with male gender (OR = 1.4; 95%CI 1.3-1.5); and the age group of 18-20 years was who had a higher percentage of alcohol consumption. The prevalence of alcohol consumption increased with age (11-12 years 13.8%, 13-14 years 25.6%, 15-17 years 53.3%; 18-20 years 63.9%; p < 0.001). Alcohol consumption was not associated with the area of residence.

Conclusions: Almost half of school adolescents consume alcohol, connecting with gender and age. It is essential to plan intervention strategies at this level and promote healthy behaviours, particularly at school.

Keywords: Alcohol consumption. Adolescent. Risk factors. Gender.

PREVALENCE AND DETERMINANTS OF OVERWEIGHT AND OBESITY IN A PORTUGUESE SAMPLE OF ADOLESCENTS

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Introduction: Several studies have shown that the prevalence of overweight and obesity has significantly increased in the last years, among all ages, gender, being considered a major public health issue. The aim of this study was to determine the prevalence and determinants of overweight and obesity in adolescents of the district of Viseu, Portugal.

Methods: In a cross-sectional survey we assessed students of twenty-six schools (7th and 12th grades) from the district of Viseu. The data collection was accomplished by a self-administrated ques-

tionnaire that was answered by the adolescents in the classroom. The final sample was composed of 7,563 adolescents, being 4,117 (54.4%) of the female gender. The overweight and obesity was assessed by the body mass index (BMI), also self-reported (Kg/m²).

Results: The prevalence of overweight is 13.7%, higher in the male gender (16.0% vs 11.7%, p < 0.01). The prevalence of obesity is 3.4%, higher in the male gender (4.2% vs 2.8%, p < 0.01). The prevalence of overweight/obesity is 17.1%, higher in the male gender (20.2% vs 14.4%, p < 0.01). The northern region of the district of Viseu present higher prevalences of overweight (15.9% vs 12.9%, p < 0.05), obesity (4.5% vs 3.6%, p < 0.05) and overweight/obesity (19.1% vs 15.7%, p < 0.05). With regard to age, a significantly higher prevalence of overweight/obesity is found among younger adolescents (12 yrs = 23.0%, 13 yrs = 20.6%, 14 yrs = 20.4%, 15 yrs = 16.8%, 16 yrs = 13.7%, 17 yrs = 12.6%, 18 yrs = 12.8%, p < 0.01).

Conclusions: Compared to other regions/countries, this study shows intermediate proportions of overweight and obesity in adolescents. We found a significant geographic variability in prevalence of overweight and obesity among adolescents.

Keywords: Obesity. Overweight. Adolescents.

RISK MANAGEMENT AND SAFETY IN PEDIATRIC CARE

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Introduction: The provision of healthcare to the pediatric patient involves important risks. Goal: List some areas of the pediatric patient safety and prevention measures.

State of Art: Areas considered classic in the safety of the pediatric patient are: wrong medication, pressure ulcers, falls and infections related with healthcare. The prevention of these incidents is critical and this requires the understanding of what builds up the incident and determine its causes. The model of investigation of incidents of James Reason (study of human factors involved in error) has been progressively adopted in health care units. It covers the identification of organizational and cultural factors (administrative decisions and processes), contributive (place, task, patient, team) and problems providing healthcare (omissions, lapses and unsafe acts) and defenses and system barriers. So even if a human error (active fault) constitutes an immediate cause of an incident, it is boosted by technical and organizational context risks generator (latent failure). For the prevention of incidents and errors it is necessary to join efforts to cover the fundamental aspects: epidemiological surveillance, preparation and monitoring of compliance with good practice and training of professionals.

Theoretical and practical implications: It is considered appropriate to foster training and research in safety of pediatric patient; promote a safety culture which is open, fair and allows learning with error; raise awareness to report the error through NOTIFICA.

Conclusions: It is imperative to reformulate the paradigm of healthcare in pediatrics, highlighting areas that contribute to reducing the risk and improving child safety.

Keywords: Pediatric nursing. Risk management. Pediatric safety.

LANGUAGE DEVELOPMENT IN CHILDREN WITH UNILATERAL COCHLEAR IMPLANT VERSUS BILATERAL COCHLEAR IMPLANT

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Introduction: The cochlear implant has increasingly become an effective recommendation in cases in which the hearing aid is unable

to solve the problem. Its use and early implantation, has shown good results in access to auditory cues that will allow proper development of language by the child.

Objectives: This systematic analysis of the literature, has for objective to verify which way the development of language occurs in children with unilateral cochlear implant in compared to bilateral implantation.

Methods: The bibliographic search was made on the following databases: B-on, ScienceDirect and SciELO, with only being selected articles from the last five years.

Results: From the search made were found four articles that match the inclusion criteria established.

Conclusions: It is hoped with this systematic review to verify differences between language development in children with unilateral cochlear implants and children with bilateral cochlear implant.

Keywords: Children. Language. Cochlear implant.

THE ROLE OF CAFFEINE INTAKE IN ADOLESCENTS' HEALTH

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Introduction: Adolescence is a developmental phase characterized by several changes at the biopsychosocial level, including the architecture of sleep. The literature shows that a disorganized family environment and health behaviors (e.g. the use of caffeine) may result in daytime sleepiness, and poor sleep quality.

Objectives: The aim of this study was to examine the caffeine intake as a moderator in the relationship between excessive daytime sleepiness, family sleep behaviors, sleep quality and health behaviors in adolescents.

Methods: This quantitative study used a transversal design. A sample of 272 adolescents, aged 12-18 years of two Public school in the Northern region of Portugal were assessed on family behaviors regarding sleep (Howard Family Sleep Questionnaire; (Billings, Bangash & Berg-Cross, 2010), quality of sleep (Pittsburgh Sleep Quality Index; Buysse, Reynolds, Monk, Berman, & Kupfer, 1989), Sleepiness (Modified Epworth Sleepiness Scale for Adolescents; Billings & Berg-Cross, 2010), and health behaviors (Health Behavior Questionnaire; Pereira & Pedras, 2008).

Results: The results showed caffeine intake as a moderator in the relationship between daytime sleepiness and health behaviors ($t = 2.98$; $p = 0.003$), and in the relationship between family sleep behaviors and adolescents' health behaviors ($t = 2.88$; $p = 0.004$).

Conclusions: According to results, caffeine is an important variable in adolescents' health, particularly considering its increase spread nowadays among teenagers.

Keywords: Adolescents. Caffeine intake. Sleep.

PARENTAL KNOWLEDGE OF CHILD NUTRITION: THE INFLUENCE OF THE SOCIO-DEMOGRAPHIC CHARACTERISTICS

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Introduction: Families have a major influence on children's health, thus it is essential that they have proper food knowledge in order to provide a correct nutrition for their children. It is acknowledged that children should be helped to develop healthy eating.

Objectives: To classify parental knowledge of child nutrition and analyse the influence of sociodemographic variables.

Methods: Quantitative, cross-sectional, descriptive and correlational study conducted in a non-probability sample of 114 parents of preschool and school-aged children, who belong to a Health Centre in the northern region of Portugal. The mothers' average age was 34.40 years old ($SD = 5.777$) and the fathers' was 36.50 years old ($SD = 9.155$). A socio-demographic characterization and the "Conhecimento dos Pais sobre Alimentação Infantil (QAI)" questionnaire (Aparício, Cunha, Duarte and Pereira, 2012).

Results: Overall, 43.9% of parents had sufficient knowledge, 30.7% good and 25.4% insufficient. Even though it has no statistical significance, the results positively highlighted the mothers' knowledge. The parents' knowledge level was related to age, education, occupation and residence, indicating insufficient knowledge levels in younger parents ($\chi^2 = 25.048$, $p = 0.000$) with basic compulsory education ($\chi^2 = 10.110$, $p = 0.039$), unskilled occupation ($\chi^2 = 15.110$, $p = 0.004$) and rural residence ($AR = 2.2$).

Conclusions: The parental knowledge of child nutrition is still insufficient particularly in the most disadvantaged families. This fact justifies an investment in terms of prevention for this group that should be initiated at an early stage of child development. Promoting family empowerment and, therefore, their autonomy may be one of the strategies for the prevention of obesity.

Keywords: Childhood obesity. Feeding knowledge. Parents.

EPIDURAL ANALGESIA TO THE CONTROL OF ACUTE PAIN IN CHILDREN

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Introduction: After a surgery the presence of acute pain is common, and its relief, especially in children, is one of the main goals. Epidural analgesia has been used more often.

Objectives: To know the method of epidural analgesia, advantages and applications in paediatrics.

State of art: In pediatrics context epidural analgesia is a method used mainly in acute pain in postoperative period, enabling the use of loco regional blockages in children of all ages and in almost type of intervention (Virella, 1996).

New perspectives: the child's pain relief is very important in the postoperative period, providing epidural analgesia an effective technique in the management of acute pain in most surgeries of the thoracic region and below. This technique allows to keep under analgesia body segments by the combined use of local anaesthetics and opioids (Goncalves et al., 2007), reducing surgical stress, probability of complications associated with immobility and in length hospitalization. The pharmaceuticals association allows the use of lower each concentrations, reducing the side effects.

Theoretical/practical implications: The safe and effective administration of epidural analgesia is achieved with a team of nurses and anaesthetists, emphasizing the training, proper selection of patients, assessment and control of pain and early recognition and treatment of complications (OE, 2012). Nurses has a greater responsibility in determining the analgesic efficacy, based on straight or self-assessment of pain, detection and early intervention in complications associated with drugs and/or the technique used.

Conclusions: To the optimization of epidural analgesia is important the development of protocols that allowing to faster interventions in the pain and complications control.

Keywords: Children. Acute pain. Epidural analgesia.

SELF-PERCEPTION OF PARENTAL COMPETENCE IN PARENTS OF PRE-SCHOOL CHILDREN

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Introduction: The concept of self-perception of parental competence refers to how parents perceive their performance, beliefs and attitudes in their role as parents, the ability to address specific problems and find effective solutions.

Objectives: To evaluate the self-perception of competence in parents of preschool children and the relationship with sociodemographic variables.

Methods: Cross-sectional and observational study with 792 parents, women average age 34.15 (Dp = 5.01), men 36.1 years old (Dp = 5.34), living in Portugal. The analyse includes sociodemographic characterization and the Questionnaire d'Auto-Évaluation de la Compétence Éducative Parentale (QAECEP) (Terrisse & Trudelle, 1988) validated to the portuguese population by Aparício (2012).

Results: The validation study of QAECEP indicated good internal consistency (Cronbach's Alpha = 0.773). Self-perception of competence, effectiveness and satisfaction is high in 51.1% of parents. The older parents see themselves as most competent and effective, with significant results for mothers ($\chi^2 = 21.755$; $p = 0.010$). Parents with higher level of education perceive themselves as more satisfied, motivated and competent, but only significant for the mothers ($p = 0.000$). The high/medium familiar incomes influences significantly the perception of satisfaction, motivation and global parental competence ($p = 0.000$). Feelings of low effectiveness ($p = 0.05$) high satisfaction (AR = 2.6) and global competence ($p = 0.036$) are significant in parents of younger children.

Conclusions: Age, income and education level influences the self-perception of parental performance, so in health promotion activities is important to identify the parental feelings and increase their self-confidence in the defense of an positive parenting.

Keywords: Parenting. Child. Self-perception of competence.

EPILEPSY: INFLUENCE ON AUDITORY PROCESSING IN CHILDREN

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Epilepsy is a set of clinical manifestations that reflect a neuronal dysfunction. Taking this into account studies have shown that neurological disorders are among the risk factors for auditory processing disorders. The auditory information processing in childhood may be altered if there is a predisposing factor for the development. In this sense the present study is based on a systematic literature review and aims to know the influence that epilepsy has auditory processing in children. To this were defined keywords and conducted a search of scientific articles in electronic databases, the selection of the same was carried out through the following inclusion criteria that the studies addressed the impact that epilepsy has auditory processing in children with a account the year in which these same studies were carried out, giving privilege to the last 8 years. In addition to these criteria, the articles could not be systematic reviews and should be written in English. Four articles were selected, of which three of them are in English and one in Portuguese dated between 2008 and 2015.

Keywords: Epilepsy. Auditory processing. Children.

NURSING INTERVENTION PROGRAM IN LIFESTYLES OF ADOLESCENTS

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Introduction: The National Health Plan refers to health promotion throughout the life cycle and during adolescence, the school environment is a reference point for the acquisition and consolidation of healthy behaviors. The intervention related to health education enables to accomplish and better control of wellness.

Objectives: Diagnose the lifestyles and implement nursing interventions promoting healthy behaviors.

Methods: A perspective of action research developed a descriptive study (2012), in a middle school of Madeira Island (n = 270), utilizing a questionnaire adapted from the "Health behavior in school-aged children" from WHO ($\alpha = 0,72$). After prioritization of areas, the nursing intervention program integrated education sessions; fair and website with educational and interactive contents about physical exercise; nutrition; oral hygiene habits and knowledge of psychoactive substances. In 2014 we evaluated the effectiveness of intervention. **Results:** There was a positive variation in percentage changes for healthier behaviors specifically: realization of 5 or more daily meals (22.7%); water intake several times/day (75.4%); brushing teeth after a meal (1.6%); use of dental floss (23%); play sport outside school hours, 4 to 6xs/week (6.5%) and 2 to 3xs/week (3.6%) and decreased by 4.6% in respect of viewing TV 5 or more hours/day. There was also a significant percentage increase in knowledge about psychoactive substances (56%).

Conclusions: The results express the importance and contribution of the project to significant gains in knowledge and some healthy behaviors being necessary to prolong the intervention period to increase other behavior modification and to extend to similar populations.

Keywords: Health behaviors. Adolescents. Health promotion. Nursing intervention.

KNOWLEDGE AND PRACTICE OF NURSES' CARE FOR CHILDREN'S PAIN: RELATIONSHIP WITH PROFESSIONAL AND DEMOGRAPHIC VARIABLES

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Introduction: The lack of expertise around pain is being mentioned as the biggest cause for myths, beliefs and prejudice perpetuation that make impossible a precise evaluation and therefore, an efficient prevention and treatment.

Objectives: To analyze nurses expertise towards children's pain and identify the related demographic variables.

Methods: Quantitative, descriptive, correlational and cross-sectional study within a non-probabilistic sample composed by 46 nurses, 84,7% female (average age = 42,8 years old; SD = 9,1), that perform duties in emergency and pediatric units from two Hospitals in Portugal's central-region. A survey with sociodemographic questions and the scale of Knowledge and Care Practices Towards the Pain in Children (Batalha, 2003) was used.

Results: Nurses had in average 19,5 years of experience (SD = 8,7) and 71.2% work up to 20 years in pediatrics. The expertise was

assessed in six pain dimensions: concept, tolerance, recognition, evaluation, pharmacological care and non-pharmacological care. The overall expertise from nurses is adequate, the recognition of pain was the dimension with the most inadequate responses, 53,3% do not agree that the response to pain in the children is related to their cognitive development and 67,3% do not believe that children always tell the truth about the pain felt. Younger nurses use more non-pharmacological care ($p = 0,042$), females nurses are more sensitive to pain assessment ($p = 0,013$) and the training/education in pain care, adjust the conception of pain, tolerance, assessment and pharmacological care towards the pain ($p < 0,05$).

Conclusions: The results show a positive evolution but reveal that myths and beliefs remain and highlighted that continuous training can lead nursing teams to improve their practices.

Keywords: Pain. Knowledge. Nurses. Children.

THE SELF-CONCEPT AND SOCIAL INTERACTIONS OF STUDENTS WITH BLINDNESS

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Introduction: Self-concept and social interactions in blindness have been the subject of few studies over the years. The experience of approaching self-concept and social interactions in blindness is an attempt to clarify the building process of a social group that still lacks recognition.

Objectives: This study aims to assess how blindness affects the self-concept of children/young people, to verify how they establish their social relationships and to find out the level of acceptance by their peer group by checking the number of times the student with blindness is preferred and rejected, decoding their sociometric status and linking self-concept to popularity.

Methods: The sample consists of 6 students with blindness, aged between 14 and 18, attending the 8th, 10th and 11th years in public schools from the center of the country. Were applied 2 instruments: Piers-Harris Children's Self-Concept Scale (Portuguese version) and a sociometric test given to students in classes where students with blindness are included, as well as to the blind ones.

Results: The test sample shows a normal average for both factors of self-concept. After the different statuses have been analyzed and identified, it turns out that 4 students belong to the neglected status and two students present the rejected status.

Conclusions: Based on the results obtained, it is confirmed that students with blindness have clear and evident perception of who is popular and dismissed in their peer group, despite belonging to groups with lower visibility. Regarding the competence perceived by students with blindness, the results indicate that the level of acceptance by the peer group seems to have no influence on the different factors of self-concept.

Keywords: Blindness. Self-concept. Social interactions. Sociometry. Peer group.

4. ELDERLY HEALTH

LONELINESS AND SYMPTOMS OF DEPRESSION: A FOLLOW-UP STUDY OF FORTY FOUR ELDERLY FOR TWO YEARS

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Introduction: Depression can have serious consequences among older adults. The feeling of loneliness can constitute a pathway to

depression. The growth in the number of older people living alone in urban areas is particularly problematic because of the potential health risk that may be associated with social isolation and loneliness.

Objectives: The aim of this paper is to analyze changes occurred on the feeling of loneliness and on symptoms of depression in a group of 44 older adults in time period of two years.

Methods: This is a quantitative, longitudinal and correlational study with 44 participants living in Portalegre historic city center. The first evaluation took place in January 2013 and the second evaluation in October 2015. A questionnaire was applied to collect the data used on the analysis. Loneliness was assessed through the UCLA loneliness scale and depression by the Geriatric Depression Scale.

Results: The results have shown a increasing percent of older adults with depressive symptoms (although differences were not statistically significant), changing from 27.5%, in 2013, to 29.7% in 2015 ($p > 0.05$ by McNemar's test). The score obtained through the UCLA loneliness scale (ranging between 18, meaning the minimum loneliness feeling possible and 72, corresponding to the maximum loneliness possible) show an increase of the feeling of loneliness between 2013 ($M = 29.1$; $SD = 8.41$) and 2015 ($M = 31.3$; $SD = 10.37$). Differences in the feeling of loneliness were not statistically significant ($t(33) = -0.832$; $p = 0.412$).

Conclusions: Results of the study suggest that the situation of the elderly people leaving in Portalegre historic city center is in a process of deterioration. We recommend greater attention to the importance of developing social support projects for seniors.

Keywords: Aging. Loneliness. Symptoms of depression.

SOCIAL SUPPORT AND SYMPTOMS OF DEPRESSION AMONG THE ELDERLY POPULATION

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Introduction: In the matter of depression among the elderly, it is frequently referred that social relations, supportive network and the quality of familiar and friendship relations are important preventive factors.

Objectives: The aim of this paper is to identify how depressive symptoms among the elderly Portuguese populations vary depending on the quality of social relations of the context in which they are inserted.

Methods: It was used the shorter version of the Center for Epidemiologic Studies - Depression Scale (CES-D8), using data from the elderly Portuguese samples of the sixth round of the European Social Survey ($N = 647$). The CES-D8 is a scale aimed to evaluate the frequency of depressive symptoms experienced during the week preceding interview and consists of eight items. The final score of the CES-D8 ranges from 0 (meaning no symptoms of depression) to 24 (meaning the maximum symptoms of depression possible).

Results: The average value of the score obtained in CES-D8 was relatively low ($M = 7.66$; $SD = 4.69$). The CES-D8 score was correlated (using the spearman's rank correlation coefficient) with three dimensions of the social context: i) Number of people living regularly as a member of the household ($\rho = -0,186$; $p = 0,005$); ii) Extension of the help and support received from people close to the elderly (measured through a scale of 7 points) ($\rho = -0,234$; $p = 0,000$); iii) Number of people he/she can discuss intimate and personal matters ($\rho = -0,256$; $p = 0,000$).

Conclusions: The quality of intimacy relations have shown a stronger association with depression symptoms when compared with the density of the social support network. More attention should be given to the importance of intimacy and emotional relationships as predictors of depressive symptoms among the elderly.

Keywords: Symptoms of depression. Elderly. Social support.

CHARACTERIZATION OF NUTRITIONAL RISK AND FOOD INTAKE IN INSTITUTIONALIZED ELDERLY WITH DEMENTIA

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Introduction: Dementia is a neurological disorder characterized by a deficit in cognition including a decline in memory. With advancing age, the elderly are more susceptible to developing the disease and, consequently, its nutritional state is easily affected, causing malnutrition.

Objectives: Evaluate the nutritional risk and food intake in institutionalized elderly with dementia pathology.

Methods: The study is descriptive cross-sectional. The convenience sample was composed of forty-eight elderly patients with dementia pathology diagnosed. The collection of anthropometric data was performed (weight, knee, arm circumference, leg circumference) and applied MNA[®] questionnaire to assess nutritional risk. The intake assessment was performed for three days by record food intake.

Results: The sample was composed of thirty-nine women and nine men, with mean age of 82,73 ± 7,45 years. The average score MNA[®] was 15,97 ± 3.5 points and the mean BMI was 23,41 ± 4.80 kg/m². 47,9% had “no particular etiology dementia”. 35,4% had an MNA[®] score < 17 points and BMI < 22 kg/m² (malnutrition). There was a strong correlation between a sound intake and malnutrition (p < 0.05).

Conclusions: The results suggest that a greater care among the elderly with dementia pathology is necessary, emphasizing the importance of power is an act that should always be accompanied by caregiver.

Keywords: Dementia. Elderly. Nutritional risk. Food intake.

PREVALENCE OF FUNCTIONAL DYSPEPSIA IN A COMMUNITY SAMPLE OF PORTUGUESE ADULTS

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Introduction: Dyspepsia is a digestive syndrome defined as a persistent or recurrent pain or discomfort, localized in the upper abdomen, which may or may not be related to meal contents. Its prevalence in the general population is considered high and associated with other systemic diseases.

Objectives: The aim of this study was to estimate the prevalence of functional dyspepsia in a community sample of adults Portuguese.

Methods: A cross-sectional study was conducted in 166 Portuguese subjects (56.6% female) aged 19-92 years. The majority of the sample (60.8%) was married. A self-administered questionnaire was used to collect information on sociodemographic factors, housing and living conditions and food consumption. The self-reported form for adults of the Rome III Diagnostic Questionnaire was applied in order to assess functional dyspepsia.

Results: The prevalence of functional dyspepsia was 40.5%. Gastric symptoms in the last 3 months were also analyzed: 32.1% referred heartburn at least once a month, 27.8% difficulty in finishing a meal and 39.4% abdominal pain. Functional dyspepsia was found to be

associated with the professional situation (unemployed, OR = 0.9, 0.83-0.97), however not associated with age (> 50 years, OR = 1.21, 95%CI 0.84-1.74) and scholarship level (< 9th grade, OR = 1.05, 95%CI 0.81-1.37). No association was found between the presence of *H. pylori* and gender and health risk habits such as alcohol consumption and smoking.

Conclusions: The prevalence of functional dyspepsia is considered high in this particular community sample of Portuguese adults in the central region of Portugal. This may be associated with socio-professional aspects, mainly related with physiological changes caused by stress related with specific professional situations.

Keywords: Functional dyspepsia. Prevalence. Adults. Socio-economic aspects.

ELDERLY PEOPLE AND MEDICATION ADHERENCE

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Introduction: The aging population and consequent increase in chronic diseases contribute to the high consumption of drugs by the elderly. This increase in the number of medications associated with vulnerabilities and aging own weaknesses makes the management of the medication regimen of the elderly a difficult task (Palma & Pereira, 2012). Several studies have been conducted on this issue at national level and in other countries, however, in Portugal, the existence of global data on non-adherence to medication regimen is unknown (Delgado & Lima, 2001).

Objectives: Describe factors influencing medication adherence in elderly resident in a parish of RAM.

Methods: In a perspective of research-action, we developed a descriptive, quantitative and transversal study (2014), with random and accidental sample in a parish Madeira Island (n = 493); by questionnaire “Measure Adherence to Treatment- MAT” validated for the Portuguese population ($\alpha = 0.74$) by Delgado and Lima (2001).

Results: Mean age 70 years ($\sigma \pm 7.1$); 68% female; 40% consume 5 or more different drugs/day; with a mean of adherence of 5.4 (6). The main factors that influence adherence are the problems of memory (40%); In the subscales of MAT was found 23.5% non-adherence; 13.5% nonadherence by excess; 18% nonadherence by déficit and 14.1% other causes; In the subscale of non-adherence the values observed was: 33% failure to take the medication; 30.5% the neglect with hours of taking; 16.8% abandonment because they feel better and 15.8% by they feel worse.

Conclusions: The results corroborates the findings of other studies and express the priorities for action in this context. In partnership, specific objectives were outlined and designed nursing interventions to enhance patient adherence to medication prescriptions.

Keywords: Adherence to medication regimen. Elderly. Nursing intervention.

HYDRONEPHROSIS CAUSED BY A MALIGNANT BLADDER NEOPLASM: CASE REPORT

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Introduction: The hydronephrosis is a kidney swelling caused by the accumulation of urine. This happens when the flow of urine

is stopped by structural abnormalities, twists at the level of the ureters, kidney stones and/or compression of the ureter by fibrous bands, abnormal vascular net or by a tumor.

Objectives: To present a case of a patient with hydronephrosis caused by a malignant bladder neoplasm in the suprapubic region.

Methods: Discussion and presentation of a case study. The study was conducted after informed consent through direct interviews, observation and analysis of diagnostic tests (blood tests, urine tests and urethral cystoscopy CT Scan).

Results: An 80 year-old woman admitted to the Surgical Specialties with suprapubic pain, episodes of macroscopic hematuria and bilateral renal colic. She had bilateral hydronephrosis secondary to malignant bladder neoplasm. Bilateral nephrostomies were placed in order to drain urine and resolve the bilateral hydronephrosis. To resolve the underlying causes (malignant bladder neoplasm) a radical cystectomy (complete removal of the bladder) should be performed.

Conclusions: The general state of the user, age, autonomy and comorbidities influenced the surgical approach. In this case the urine was shunted into closed intestinal loop whose top was externalized through the abdominal wall, allowing urine output to a collector bag.

Keywords: Case report. Hydronephrosis. Bladder neoplasm.

PERCEPTION OF QUALITY OF LIFE OF INSTITUTIONALIZED ELDERLY IN UNITS OF INTEGRATED CONTINUOUS CARE LONG TERM

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Introduction: With the increase in average life expectancy, there is a greater propensity for loss of independence, to increase physical dependence and the appearance of chronic diseases. The highest levels of dependency are still associated with users admitted to Long Continuous Care Unit Duration (UCCILD), which is in line with the fact that these units are designed to receive these individuals.

Objectives: This study aims to assess the various aspects related to the perception of individuals of Quality of Life over 65 years with chronic disease, inpatient situation in UCCILD.

Methods: That's a quantitative study, exploratory and descriptive. The sample is composed of 83 individuals over 65 years with chronic disease, inpatient situation in UCCILD. Data were obtained through EASYcare instrument.

Results: The results indicate that the dimensions with higher dependency levels are mobility, self-care and mental health and well being. Comparing the theoretical magnitude of each dimension in mean values, it appears that the dimension is the "mobility" which stands out as the most critical dimension. The mean values ($X = 24.2$, $SD = 12.91$) are very close to the maximum score ($max = 37$) taken for this dimension.

Conclusions: The users hospitalized in UCCILD face highly disabling chronic conditions, it was possible to verify high levels of dependency. In fact, it appears that chronic diseases have an impact on the ability of individuals to maintain an independent life; there is a direct correlation between co-morbidity and functional capacity.

Keywords: Aging. Chronic disease. Continuous care.

5. FAMILY HEALTH

INFORMATION NEEDS OF FAMILY CAREGIVERS OF DEPENDENT INDIVIDUALS

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The increase in the number of dependent individuals means that more and more families find themselves in the situation of caregivers, with all the consequences that performing this role entails. Based on this reality, we considered it to be completely relevant to systematize knowledge in this area. This study aimed to identify the information needs of the family caregiver-dependent individuals in the available scientific literature, having performed an integrative review of the literature. The main results and conclusions indicate that the information needs of family caregivers can be grouped into three main themes: 1) caregiver knowledge and skills, 2) potential resources for the caregiver and 3) caregiver coping strategies and well-being. The comprehensive nature of the integrative review as the chosen method allowed us to get a good understanding of the information needs of family caregivers of dependent individuals. The relevance of this study to clinical practice is that, although it is still necessary to expand and enhance the scope of research in this area, we consider this information essential for all health professionals seeking to provide effective support to family caregivers, as well as to serve as support for the development of intervention projects and health services.

Keywords: Health literacy. Family caregivers. Dependent.

CYBERBULLYING: IN DEFENSE OF A PREVENTIVE PERSPECTIVE

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Introduction: The Cyberbullying involves the use of information and communication technologies to humiliate and to attack purposely other and/or others, always with hostile intentions.

Objectives: To realize if the children knows what is the Cyberbullying; if they suffer of Cyberbullying and what they do in a situation like this; to understand if the parents do contact the school when they notice that their children are victims of Cyberbullying and to understand what are the methods often used in these situations.

Methods: This exploratory study is a descriptive analysis with a sample of 50 inquiries (52% female and 48% male) ranging from 10 to 13 years old of the interior region of Portugal.

Results: The results of this research indicates that, 74% of the cross-examined ones knows what is the Cyberbullying; 34% of the parents already talked about this subject, at home, with their children. We can still check that, 63.6% of the cross-examined ones that interact in the social networks attended already to insults situations.

Conclusions: This subject is still very recent and needs a deeper prevention with educative agents (parents and teachers) to assure the normal and healthy development of their children. With these results there's a long way to go, that claims a social-educative practice.

Keywords: Cyberbullying. Social networks. Prevention.

BROTHERS OF CHILDREN IN ONCOLOGICAL TREATMENT-IMPACTS SHOWN: A LITERATURE REVIEW

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Introduction and objectives: Literature about cancer has been increasing in the last years. In cases of childhood cancer these evidences are even greater. However, when a child gets sick, the impact of the diagnosis in family is of extreme suffering, because of the fear of pain, mutilation and uncertainty about the future risk of death. At the moment that a family is mobilized to support (monitoring and treatment) the child with cancer, there is a member that sometimes may be overlooked: the brother. This does not occur in a premeditated way; after all, everyone is struggling to take care of one who is sick. The aim of the present work was verify what are the illness impact factors treatment in children with cancer in the life of his brother who has not the disease. It was expected that the process of illness and treatment of cancer in children may have an emotional and behavioral impact on the healthy brother, due to changes in routine and family structure occurring during this process. The methodology used was a Brazilian literature review.

Conclusions: The results highlighted that healthy brothers suffer both positive and negative impact. Moreover, the present research concluded that the process of illness and treatment of cancer in children may impact in a biopsychosocial way the healthy brother. Also, the gap of research regarding the impacts of the oncological brother's treatment in the healthy brother is still great. New perspectives/guidelines: Therefore, there is a need to further explore these features and population with the perspective of psychology to improve the treatment, not only to child with cancer, but to the family who suffer with all changes and impacts of this treatment.

Keywords: Cancer. Paediatric Oncology. Brothers.

COMMUNICATION STRATEGIES WITH FAMILY PATIENT CRITICAL IN THE CONTEXT OF INTENSIVE CARE

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Introduction: Communication with the family of the hospitalized patient in the context of intensive care is crucial to the satisfaction of the family, for the reduction of symptoms of anxiety, stress and depression, and allows the creation a partnership care.

Objectives: Percept "What communication strategies that the nurse can use with the family of the patient hospitalized in critical UCI?"

Methods: Conducting a systematic search of the literature The research was done on the basis of scientific data available in the Nurses Order of the site reserved by the Members access using the search engine EBSCO host - Research Databases. It has also developed research in Central Pubmed with Mesh descriptors ("communication", "patients families" and "intensive care units").

Results: Therapeutic communication with the patient's family admitted to the ICU is an essential ability to practice care in Nursing. Effective communication strategies with the family of the hospitalized patient in the ICU include the development of verbal communication techniques and non-verbal. Promoting a philosophy of care centered on the patient, conducting formal meetings with doctors, nurses and other professionals of the multidisciplinary team, the existence of the physical space where it promotes a soothing environment, open to the expression of feelings and the placing of doubts.

Conclusions: Communication with the family fits well in the skills of nurses and is a key pillar of its daily practice. This article has

implications for the practice of nursing excellence as demonstrated the importance of nurse communication - family of the patient admitted to the ICU, and describes the most appropriate communication strategies accordingly.

Keywords: Communication. Family. Critical patient. Intensive Care Unit.

LANGUAGE DISORDERS IN PEOPLE WITH ALZHEIMER'S DISEASE: SYSTEMATIC LITERATURE REVIEW

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Introduction: Disorders of language may appear early in Alzheimer's disease (AD) and are becoming more frequent as the disease progresses. The frequency and profile of linguistic changes found both in regard to understanding how oral and written production seems to depend on the severity of dementia.

Objectives: The objective of this study was to procedure a systematic review of studies that analyzed the disorders the most common language in the person with AD.

Methods: We conducted a search in: B-on, Scopus, Medline, Web of Science, in the period between 2009 and 2013, in Portuguese and English using the following keywords: Disorders of language; Language; Communication; Alzheimer's disease according to the DECS descriptors.

Results: There were found seven studies that met inclusion criteria adopted for the present work. These studies identified the following disorders of language: Difficulty in the chain of ideas; Difficulty in the nomination process; Decreased verbal fluency; stereotypical and limited to routine contexts syntax; comprehension difficulties; Difficulties of expression; Repetitions and limited vocabulary; Aphasia, in situations of severe cognitive impairment.

Conclusions: The analyzed studies corroborate the information available in the literature, confirming the existence of significant changes in the language, cut across all stages of AD and which worsen with the evolution of the same.

Keywords: Disorders of language. Communication. Alzheimer's disease.

FAMILY INFLUENCE ON THE PSYCHOLOGICAL, SOCIAL AND FAMILY OVERLOAD THE INFORMAL CAREGIVER: SYSTEMATIC LITERATURE REVIEW

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Introduction: As part family member of life of informal caregivers, whether they look for the dependent person or for social support that surrounds it, it is imperative to clarify that the relationship between family caregivers and the psychological, social and felt resulting family the burden of care.

Objectives: The aim of this work was to study the consequences inherent in the act of caring for the Portuguese informal caregivers and identify the influence that the family may have in this process, through a systematic review of the literature.

Methods: A literature search in the following databases up-developed B-On, Medline, Pubmed, RCAAP, DSpace, Ria, Digital Repository of the University of Coimbra, RepositóriUL in the period between 2008 and 2013 using the following keywords: Caregivers. Family Health. Quality of life. Cost of Illness.

Results: There were positive and negative correlations between the different types of overhead, especially the consequences of

the study (psychological, social and family). The existence of a secondary caregiver has a positive impact on the physical well-being, psychological and social informal caregiver. As mentioned family as the greatest support of caregiver. The support of health and social institutions will be relevant to manage the most appropriate and humane way the burden of informal caregivers.

Conclusions: The influence of the family in psychological consequences, social and family overload the informal caregiver is found in the first instance, mostly positive. However this entity, with greater emphasis on the spouse, has the most important role in the informal support network of family caregivers.

Keywords: Caregivers. Family Health. Quality of life.

SKIN-TO-SKIN CONTACT WITH THE FATHER: THE BENEFITS IN PARENTS/NEWBORN BONDING

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Introduction: It is essential for the newborn, in the first moments of his life, to establish close contact with their parents. The first contact is normally done with the mother, but it's also desirable to perform contact with his father, particularly when, for some reason, the newborn is away from the mother.

Objectives: Clarify about benefits that come from skin-to-skin contact; Elucidating parents, particularly the father figure on the skin-to-skin contact.

Methods: Literature review about skin-to-skin contact with the father, in the scope of the maternal and obstetric health.

Results: The skin-to-skin contact has been shown to be extremely important with regard to the adaptation of the newborn to extrauterine life. We present the following advantages: appease the newborn; sleep better; rapid metabolic adaptation; It helps to maintain body temperature ; cardio-respiratory stabilization; facilitates breastfeeding; favors linking; encourages parental with autonomy care; prevents infection and stimulates the newborn to explore the external environment. For parents promotes the bonding and the sense of confidence and satisfaction with the baby.

Conclusions: The WHO recommends skin-to-skin contact with their parents soon after birth and continuing until after 3 months of life. So, during obstetric practice it's important deepen knowledge and integrate projects that promote good care practices with families.

Keywords: Skin-to-skin with father. Newborn. Bonding.

6. HEALTH AND LIFE QUALITY

VESTIBULAR REHABILITATION WITH COMPUTERIZED DYNAMIC POSTUROGRAPHY IN PARKINSON'S DISEASE

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Introduction: Parkinson's disease is a chronic progressive degenerative disease of the nervous system, which causes additional difficulties in the execution of movements, implying physical and social handicaps of the individuals. Clinical manifestations are motor character, essentially, and for this can be done vestibular rehabilitation to try to improve postural instability. Some exercises

performed in computerized dynamic posturography are a possibility to use in vestibular rehabilitation, since this causes changes in the balance and informs about the individual's centre of gravity, and can fix it when it is diverted.

Objectives: To determine if Parkinson's patients improve body balance through vestibular rehabilitation with computerized dynamic posturography.

Methods: A literature review was structured with scientific papers from some electronic databases, such as the B-on, PubMed, ScienceDirect and on ResearchGate network. Given the inclusion criteria were selected four articles related to the influence of computerized dynamic posturography used for vestibular rehabilitation in Parkinson's patients.

Results: Based on the analysis of the articles, it was clear that vestibular rehabilitation through balance training in computerized dynamic posturography with or without new techniques associated is an effective method to improve the balance of Parkinson's patients, and persists one year after the end of the training done.

Conclusions: The improvement of the balance in Parkinson's patients through vestibular rehabilitation seems to provide a better quality of life and a lower risk of falls, since it allows acquire an improvement in the body stability.

Keywords: Parkinson's disease. Vestibular rehabilitation. Computerized dynamic posturography.

THE PERCEPTION OF QUALITY OF LIFE IN PEOPLE WITH MULTIPLE SCLEROSIS: A STUDY ON THE LOCAL HEALTH UNIT OF ALTO MINHO

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Introduction: Multiple sclerosis (MS) is a chronic disease that affects the fibers of the central nervous system and may lead to severe neurological disability (Portuguese Society of Multiple Sclerosis, 2014). In turn, Quality of Life is understood as the individual perception about their position in life, in the context of culture and value systems in which they live and in relation to their goals, expectations, standards and concerns (World Health Organization Quality of Life Assessment Group, 1994).

Objectives: This study aims to assess the QoL of people with MS, analyze their sociodemographic and clinical profile and the relationship between these variables and QoL.

Methods: It is a quantitative investigation and the data collection protocol consists of a sociodemographic form and the Medical Outcomes Study Questionnaire Short-Form 36 (SF-36) (MOS SF-36; Ferreira, 2000).

Results: In this work are involved 67 persons with MS of both genders (82% females) with a mean age \pm standard deviation (SD) of 42 \pm 11.7 years (between 20 and 71 years). The results show that the participants obtained higher scores of QoL is the Mental Health dimension (M = 58.96) and lowest in Vitality dimension (M = 42.07) of the MOS SF-36v2. People who reported fatigue and loss of balance had lower QoL levels, registering significant statistically differences in all dimensions of QoL, except for Physical Pain and General Health.

Conclusions: Considered globally the study results may be useful for a better understanding of people with MS accompanied in UL-SAM, EPE and consequently contribute to the quality improvement of health practices. In fact, as a result of this work some improvement measures of quality of health/nursing care have been already implemented.

Keywords: Multiple sclerosis. Quality of life. Health. Person with multiple sclerosis.

QUALITY OF LIFE IN CEREBRAL PALSY: THE IMPORTANCE OF SOCIAL SUPPORT

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Introduction: Quality of Life (QOL) is a multidimensional and subjective concept that refers to one's individual perception of wellbeing across various domains of life. Cerebral palsy (CP), as condition that affects significantly motor and functional abilities, may limit activity and participation and, thus, the QOL of children and adults.

Objectives: Our main aim was to assess perceptions of QOL of adults (and young adults) with CP, concerning relationship between QL dimensions and motor impairment, gender, occupation or household).

Methods: In a quantitative investigation, 53 participants with CP (20 male; 16-55 yrs) were evaluated with WHOQOL-Bref (World Health Organization Quality of Life). All participants' functionality was classified according to GMFSC (Gross Motor Function Classification System). The relationship between the variables was calculated through a Spearman correlation test.

Results: Participants with higher qualifications, married or in union, living with their family, who have a job or study showed significantly higher scores, especially in the psychological and social relationships domains of QOL. A negative significant correlation was found between motor difficulty (GMFCS IV and V) and scores in these domains.

Conclusions: Results, despite the limited number of respondents, allowed us to identify the specific areas where there is need for intervention in order to enhance the QOL of this specific population. It is emphasized in particular the importance of developing social and professional skills, as well as an intervention in the definition of public policies and evaluation of services, and the creation of innovative programs to a social and professional level.

Keywords: Quality of life. Cerebral palsy. Social support. Adults and young adults.

WITHDRAWN ABSTRACT

7. HEALTH AND MINORITIES

WITHDRAWN ABSTRACT

WITHDRAWN ABSTRACT

WITHDRAWN ABSTRACT

TRANSCULTURAL NURSING ACCORDING TO LEININGER: THE CULTURALLY COMPETENT NURSE

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Introduction: With the constant evolution of society and migration one can find, increasingly, clients from different parts of world with their own set of values, beliefs, norms and styles of life, requiring from the nurse, knowledge, behaviours and attitudes towards providing care adequate to each person's individuality.

Objectives: To understand the relationship between care and culture and assume the care as the essence of nursing. State of the art: Leininger, author of the Culture Care Diversity and Universality Theory, considers transcultural nursing a branch of nursing discipline with specific knowledge and action-decision methods. The author argues that care is a fundamental activity of the human being and therefore of society and that culture has an important role in human responses to health/disease. New perspectives: Leininger's

Theory of Nursing: Cultural Care Diversity and Universality, applied to the provision of nursing care, is reflected in the importance of providing culturally competent care to clients in order to meet their specific needs. The nurse must possess a variety of skills which are the foundations for the care and knowledge, and are a reference for planning an appropriate nursing process. Theoretical and practical implications: The daily practice should be developed on a constant basis for reflection with a view to continuous improvement of the quality of care.

Conclusion: The nurse who is to be culturally competent must understand and respect others in a cross-cultural perspective, in a context where value judgments on the client of nursing care must not exist.

Keywords: Transcultural Nursing. Nurse. Culture.

THE APPLICATION OF ANDREWS & BOYLE TRANSCULTURAL NURSING ASSESSMENT GUIDE

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Introduction: We are witnessing a growing globalization and individuality of the person with own unique needs and expectations. People with different nationalities, cultures, beliefs, life experiences appear every day in Health Services requiring the nurse to be able to provide culturally competent care. In this sense we intend to analyse and reflect on the applicability of Andrews & Boyle transcultural nursing assessment guide to professional practice.

State of the Art: The Andrews & Boyle transcultural nursing assessment guide aims to evaluate the individual and his family, groups and communities in various particular categories with all the socio-economic, politics and environment surroundings and allows the nurse an active role in the acquisition of cultural competence. It is essential to know the cultures that appear more often.

New perspectives: In this guide the proposal is to include the family in care as is advocated for nursing care in the quality standards of the nurse in Paediatrics. Theoretical and practical implications: For the purposes of this guide the nurse should carry out a proper assessment of the individual and a self-assessment in all the culture, values, attitudes, beliefs and practices related to health. The verbal/nonverbal communication facilitates understanding and taking care of the person according to their culture and develops skills/competencies that avoid life threatening situations.

Conclusions: In an institution is essential that the nurse is holder of culturally congruent care skills to provide welfare to the child/parent, increasing satisfaction and move towards the excellence of care. This guide facilitates the achievement of results with significant gains to nursing care.

Keywords: Transcultural nursing. Paediatric nursing. Culture.

KNOWLEDGE AND INFLUENCE OF THE CAMPAIGNS OF THE MINISTRY OF HEALTH IN PROMOTING THE DEAF OF BRAZIL COMMUNITY HEALTH

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Introduction: In Brazil, the promotion, protection and recovery of health, with the integrated realization of care actions and preventive activities are the responsibility of the Unified Health System (SUS), provided that it meets the specific characteristics of the population, adapting to the principle of equity.

Methods: Qualitative study of exploratory and descriptive character that used to collect data, semi-structured interviews on health and with a cut on the influence of the campaigns of the Ministry of Health and its influence in promoting the health of the deaf community with 09 individuals deaf fluent in Brazilian Sign Language in the age group 18-25 years.

Results: The campaigns which have less text and more pictures and images were the most raised by deaf, since the language is gesture-visual, so were remarkable campaigns in their educational content present images.

Conclusions: Whereas sign language was recognized and legitimized in law, the deaf community daily faced with the need and the lack of information in their mother tongue, it is concluded that the Ministry of Health campaigns minimally reaches the deaf community and user of language signals when making through the use of few images and more written texts. Consequently an approach is necessary in order to meet the specific characteristics of the population, thereby ensuring equity of access to information on health.

Keywords: Health promotion. Deafness. Communication barriers.

8. HEALTH EDUCATION AND TEACHER TRAINING

NURSING STUDENTS' SKILLS DEVELOPMENT THROUGH THE PARTICIPATION IN A MENTORSHIP PROGRAM: A PRELIMINARY CASE STUDY

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Introduction: Mentorship is being increasingly recognized as an important way to promote success in academic settings. The Mentorship program at the Polytechnic Institute of Portalegre (IPP) aims to provide social support amongst the newcomers students.

Objectives: The aim of this paper is to evaluate how the participation of students in the IPP mentorship program, as mentors, can promote the development of competencies.

Methods: This is a case study centered on a group of 21 nursing students enrolled on the program, as mentors, during the academic year of 2015/2016. It was used a questionnaire to collect the data used on the analysis.

Results: The skills considered in the questionnaire are analogous to some of the skills referred in the General Care Nurse Profile defined by the Ordem dos Enfermeiros (the competent authority of nursing graduates who practice in Portugal) and comprehend the capacity of: 1) accepting his/hers responsibility for his/hers actions and professional judgments; 2) contributing to a multidisciplinary and effective team work, maintaining collaborative relationships; 3) establishing therapeutic relationships with the client and/or caregivers, through the use of appropriate communication and interpersonal skills. So, three skills were analyzed: responsibility, team work and interpersonal communication. The results show that interpersonal communication (measured on a Likert scale of 4 values, where 1 means no contribution to skill development and 4 a strong contribution) is the most developed skill through the program ($M = 3.33$; $SD = 0.48$) followed by team work ($M = 3.28$; $SD = 0.46$) and responsibility ($M = 3.22$; $SD = 0.42$).

Conclusions: Participation of nursing students in mentorship programs can constitute an important complementary mean of skills development.

Keywords: Nursing education. Mentorship. Skills.

THE RELEVANCE OF SEXUAL EDUCATION IN PRIMARY SCHOOL

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Introduction: Sexual Education in schools is of mandatory character (Law No. 60/2009, of August 6) and is intended to promote psychological, social and physical health. It should be spent a minimum of six hours per year in the 1st Cycle of Basic Education (CEB). Nevertheless, not all teachers approach to this subject in their teaching practice, for lack of training, fear in approaching this issue, or other reasons.

Objectives: Ascertain the degree of students' prior knowledge about sexuality; analyze the progress of students' knowledge about sexuality, after the intervention sessions; identify the main difficulties and facilities in Sexual Education approach in 1st CEB.

Methods: A qualitative practitioner research was carried out, addressing three thematic blocks: hygiene habits; differences between male and female body; and gender issues. For data collection, we used field notes, as well as a questionnaire. This was applied to a class of 20 students, aged 7 and 8, in the 2nd year of schooling of the 1st CEB in a school of Viseu (Portugal).

Results: Comparing the data obtained in the pre-test and post-test, we found an expressive change in students' prior knowledge in the various blocks covered, with more emphasis on recognizing the differences between male and female body. Students actively participated in learning and demonstrated interest to know more. The lack of time and the scarcity of information and suggestions for activities in school textbooks were the main difficulties encountered in the approach to the subject.

Conclusions: Sexual Education is a key area of Health Education that should be addressed from the earliest years of schooling in a systematic, intentional and natural way, as it promotes essential learning for the overall development of the student.

Keywords: Sexual education. Primary school. Teaching.

LITERACY FOR HEALTH AND THE IMPACT OF THE CONTINUOUS TRAINING OF TEACHERS

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Introduction: The City do Sul, SC Brazil, since 1991, develops, through the Dentistry Department, the continuous training of Health Education for elementary school teachers, that aims to develop health literacy in schools, defined as learner's awareness, an active person developing their understanding capabilities, management and investment in favour of health promotion.

Objectives: Present a report of the perspective about health literacy experience development in teachers training and in Health Education process, encountered on Pilot Projects with students.

Methods: Through pilot projects in schools, health professionals and education apply methods of teaching and learning about the concept of health expanded, by means of health literacy to produce material for reflection and training with teachers.

Results: The socialization of pilot projects in the training provided an opportunity space action-reflection-action, the approach of Health Promotion concepts with health literacy. Improving the understanding of literacy definition expands the path of possibilities that comes to a labor Health Education, when added to the Health Promotion allows educators, both in schools and in the middle of

health, elaborate sequences of activities that promote the expansion of health literacy.

Conclusions: The incorporation of health information into practical changes depends on the school and the quality of education, that lead literacy in the population. It is considered that the teacher is a literacy agent for health and articulator between the interests of students and flexibility with the community to act on the problem situations and the context of his school.

Keywords: Health literacy. Health education. Health promotion. Continuous training.

9. OCCUPATIONAL HEALTH

THE BENEFITS OF ACUPUNCTURE IN ONCOLOGIC PATIENT - TWO CASE STUDIES

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Introduction: Acupuncture is referred in several studies as helpful in monitoring the cancer patient. This article presents a study of two cases of non-metastatic cancer where acupuncture was used for palliative treatment in the course of chemotherapy and radiotherapy treatments of their patients.

Objectives: To determine how acupuncture can improve the analytical markers of cancer patients, as well as reduce pain and improve their quality of life.

Methods: A 55 year old male patient, with gastric cancer and a 42 year old female patient, who had lung cancer, were followed. Acupuncture treatments continued over 3 months. The male patient began acupunctural therapy after 3 sessions of chemotherapy and the female patient had already received chemotherapy and was in the second session of radiotherapy. Blood count was used to evaluate the variation of analytical markers, numeric scale (NS) to assess pain and WHOQOL-BREF tool to assess the quality of life.

Results: There was a progressive improvement of the clinical condition, especially in pain and quality of life in general, as well as improvements in their analytical values, in particular in haemoglobin and leukocytes. These improvements were evident in a shorter time interval after the intervention of acupuncture.

Conclusions: This study suggests that acupuncture can be an effective option for adjuvant treatment in oncology.

Keywords: Acupuncture. Cancer. Oncology.

SUBJECTIVE BURDEN AMONG FORMAL CAREGIVERS TO THE ELDERLY

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Introduction: Several studies have shown that the experience of caregiving can be perceived as a chronic stress for family and friends who provide care for elderly. There is, however, a lack of studies about burden in formal caregiving contexts.

Objectives: The aim of this study is to identify the impact of elderly care on the burden of professional caregivers in two nursing homes.

Methods: This is a quantitative, descriptive and correlational study with 52 participants of two nursing homes from Ponte de Sor municipality. An adapted version of the Zarit Caregiver Burden Interview (ZBI) was used to assess the level of formal caregiver burden. The scale presented a good reliability through Cronbach's alpha ($\alpha = 0.754$).

Results: The average score of the adapted ZBI was 2.31 (in scale ranging between 0, meaning the minimum burden possible, and 4, meaning the maximum burden possible). No statistically significant differences ($t(50) = 1.401$; $p = 0.167$) were found between man ($M = 2.15$) and woman ($M = 2.34$). Also, no statistically significant correlations were found between the adapted ZBI and age of the caregiver (Pearson's $r = -0.102$; $p = 0.475$), number of sons/daughters Pearson's $r = 0.111$; $p = 0.433$) and the number of years of professional experience Pearson's $r = 0.141$; $p = 0.319$).

Conclusions: The level of subjective burden is relatively high among formal care givers working in nursing homes. No predictive variables related to personal characteristics of the formal caregiver were found which indicates that the nature of the work with elderly people can be an independent variable in relation to burden level. Future studies are needed in order to identify possible relations between subjective burden and the specific characteristics of formal care.

Keywords: Elderly. Formal caregivers. Burden.

NURSING HOMES AND OCCUPATIONAL EXPOSURE TO BIOLOGICAL AGENTS

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Introduction: Biological agents are microorganisms that may be present in the workplace and may constitute a risk to the health of workers. The main source of biological agents are small particles carried by air, aerosols, which are composed of microorganisms, toxins or fragments of microorganisms. In the legislation there are no limit values for exposure to biological agents, it is not possible to make a dose/effect relationship of the values of exposure. It is pertinent to develop studies on this subject in nursing homes, because these institutions are provided health care to the elderly. Therefore the general objective of this study is to see if there is exposure to biological agents in nursing homes.

Methods: For this collections of air and environmental surfaces (hands of workers) were made in two homes. Being made subsequently laboratory analysis of samples taken for identification of bacteria and fungi.

Results: The results revealed that there is exposure to biological agents in the homes. The most of bacteria isolated are Gram positive. The genera identified were Staphylococcus, Cladosporium, Rhodotorula, Penicillium, Aspergillus, Rhizopus, Absidia. The absence of limits established by law, makes it impossible to evaluate the severity of occupational exposure to biological agents in the homes studied.

Conclusions: It is important this measures be taken to correct handwashing and spaces, as well as protective measures for workers in order to minimize the risk of exposure.

Keywords: Occupational exposure. Biological agents. Elderly.

DETERMINANTS OF MUSCULOSKELETAL DISEASES IN THE PERSONAL CARE WORKERS IN HOMES FOR THE AGED.

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Introduction: The rehabilitation specialist nurse is a professional with the skills and knowledge which allow him, after diagnosis to implement and monitor the results of risk reduction programs of work-related musculoskeletal disorders (WMSDs). The care workers in personal residences support the elderly by evaluating and adjusting the necessary care, thus promoting the safest and most effective practices. Thus, the present study identifies the determinants of WMSDs in care workers and their impact on health.

Methods: We have developed a quantitative, transversal, descriptive study, of a correlational type using a non-probabilistic sample of convenience that consisted of 120 personal care workers. The data was obtained using a survey in health and work.

Results: We show that, in the majority of the cases, these care workers have health deficits related with physical mobility and pain. These are consequence of constraints such as physical and biomechanical, organizational and psychosocial as well as individual constraints. The health problems identified by these workers as a result of their work conditions and characteristics were: back pain (90.8%), muscle and joint pain (82.5%), varices (64.2%), headaches (49.2%) and anxiety or irritability (47.5%).

Conclusions: These results stress the need to develop new strategies in the prevention of WMSDs in care workers. The rehabilitation specialist nurse intervention is crucial to implement health promotion programs, stress management and psychosocial risks and vocational training.

Keywords: Musculoskeletal diseases. Occupational health. Homes for the aged.

10. OTHERS

PERIOPERATIVE HYPOTHERMIA AND SURGICAL WOUND INFECTION: A SYSTEMATIC LITERATURE REVIEW

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Introduction: Unintentional hypothermia is a common issue on the perioperative context, and surgical wound infection on post-surgery.

Objectives: To analyse the most recent scientific evidence on the relationship between perioperative hypothermia and surgical wound infection.

Methods: A systematic literature review of 6 scientific articles was conducted using a critical analysis.

Results: Two articles discuss the heating intervention on a perioperative scene. Although reducing complications related to hypothermia, this heating intervention does not result in diminishing surgical wound infection. The remaining studies reveal an agreement, by mentioning that there is no relation between hypothermia in perioperative care and surgical site infection. Some studies mention other more predictive factors that lead to infection. One study states that hypothermia may be a protection mechanism.

Conclusions: The newest scientific evidence suggests that hypothermia values do not correspond to predictive values for surgical spot infection. Therefore, these findings do not meet the safe surgery directives of 2009 by the WHO concerning the maintenance of normothermia during the whole duration of the surgery, one of ten objectives that aim to reduce surgical spot infection incidence on post-surgery.

Keywords: Surgical wound Infection. Hypothermia. Perioperative care.

PALLIATIVE CARE IN PEDIATRICS: AN ETHICAL REFLECTION

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Introduction: Currently, the increasing scientific knowledge and technological advances make possible a higher survival rate in children with chronic diseases and/or threatening life. This raises the need for a focused response to adequate control of symptoms and the child's and family quality of life, making it imperative that the curative and palliative medicine coexist. Faced with this problem, we outline to reflect over the importance of pediatric palliative care in the care of children with terminal illness. As a method we use the literature review using databases like SciELO and B-On.

State of art: The Pediatric Palliative Care (PPC) are active care, total and whole body, mind and spirit of the child including family support. These should be started from diagnosis and monitor the progress of the disease, whether the end is the cure or death of the child, focusing on humanized and holistic approach. The objectives of the PPC focus on promoting comfort and improved quality of life, promoting the adjustment of the child and family to the changes imposed by the disease, allowing a dignified death with no or minimum possible suffering, extending support for the process family mourning. The performance in PPC should be developed by a multidisciplinary team, not being able to be minimized to a protocol that can be applied to all cases. With a view to respect for human dignity, we must consider the principles of autonomy, non-maleficence, beneficence and justice in the development of our critical thinking to each specific case.

Conclusions: We can conclude that the child's approach to terminal illness should be individual and integrated, considering the best interests of the child, based on the values and beliefs of each family.

Keywords: Palliative care. Ethics. Pediatrics.

THE PARENTAL DECISION IN UNCONVENTIONAL TREATMENT

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Introduction: In his professional practice, the nurse is faced with the parents' refusal to with some therapeutic attitudes related to conventional medicine, preferring non-conventional therapies. We have seen an increase in demand for Complementary and Alternative Medicine worldwide. It becomes relevant to clarify and reflect on the basis of ethical principles (autonomy, non-maleficence and

beneficence) on the attitude of health professionals regarding parental decision in choosing care and treatment to provide to their child.

State of the Art: The Convention on the Rights of the Child (1989), reiterated the “best interests of the child” with it the right to “freely express their opinion on issues that concern them and to have that opinion taken into account”, according to their age and maturity. Faced with a treatment refusal, which endangers the life or the child’s quality of life, the health professional must report to the Juvenile Court, taking this decision, a lesser name. In common situations and respect for the principle of autonomy, it is for parents and children (depending on your judgment) the decision on which the treatment of choice.

Theoretical and practical implications: In choosing treatments, the health professional should provide adequate information for a free and informed decision, the prevailing interests of the child, without disrespecting parental function.

Conclusions: The health professional attitude should be based on ethical principles and emphasize the relationship of trust between professional and parent/child, to promote health/well-being of children and parental satisfaction. If they decide for an unconventional therapy alert to seek accredited and regulated professional practices.

Keywords: Alternative medicine. Conventional. Child. Ethics.

PERCEPTION OF ORAL HEALTH BEHAVIOURS AMONG A SAMPLE OF PORTUGUESE ADOLESCENTS

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Introduction: The promotion of oral health is essential for the improvement of the knowledge, attitudes and oral health behaviours.

Objectives: The aim of this study was to characterize the habits, knowledge and oral health attitudes among a sample of Portuguese adolescents.

Methods: A cross-sectional study was designed with a final sample of 223 students aged 15-18 years old of a public school of Viseu, Portugal. The data collection was performed through a self-administered questionnaire which included the “*Habits, knowledge and oral health attitudes of adolescents questionnaire*”, presenting five dimensions: fear of dental appointment, oral hygiene and esthetic concerns, oral health concerns, prevention of dental problems and general and oral health assessment. An intra-oral observation was also accomplished in order to determine the decayed, missing and filled permanent teeth index (DMFT index).

Results: The adolescents revealed positive habits, knowledge and oral health attitudes, verifying a prevalence higher than 70% in all dimensions assessed except for fear of dental appointment (no fear of dental appointment with 44.8%). The DMFT index was 1.35 ± 1.96 , with 67.3% of adolescents with a low number of dental caries (1-3 dental caries) and only 8.0% with a high number of dental caries (> 6 dental caries). The female adolescents and those who frequently visited a dentist presented better habits, knowledge and oral health attitudes ($p = 0.03$).

Conclusions: Adolescents have demonstrated a positive improvement of adequate habits, knowledge and oral health attitudes, however, it is crucial to develop better and more efficient future approaches for the prevention of oral diseases.

Keywords: Oral health. Adolescents. Dental caries. Prevention.

ORAL HEALTH BEHAVIOURS AND NUTRITIONAL HABITS ASSOCIATED WITH PHYSICAL ACTIVITY

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Introduction: Dental medicine associated with sports has become an important field in development and responsible for the prevention and treatment of oral diseases.

Objectives: This study aims to analyze the oral health behaviours and nutritional habits associated with physical activity among sport athletes (SA) and students of the Master’s degree in Dental Medicine (MDDM) of the Portuguese Catholic University in Viseu, Portugal.

Methods: A cross-sectional study was designed with a sample of 225 participants (137 SA and 88 MDDM students). Data collection was accomplished by application of a questionnaire that integrated the *Orthodontic Aesthetic Subjective Impact Scale (OASIS)* and the *International and Physical Activity Questionnaire - Short Version (IPAQ)*. An intra-oral observation was made to determine the decayed, missing and filled permanent teeth index (DMFT index).

Results: It was noted that the DMFT index is higher among SA (1.8) than students of MDDM (0.6). Also, the average gingival recession is higher in MDDM students (3.0) than in SA (2.4). We verified that 96.6% of MDDM students and 91.2% SA consider that the oral/dental problems have influence in sports performance but only 48.9% of MDDM students and 44.5% SA consider that the dental appointment may influence positively the sporting activity. MDDM students have a higher perception of their oral health status and behaviours in comparison with PA ($p < 0.001$).

Conclusions: Despite the recognition of the influence of oral problems in sports performance, information on prevention of oro-facial trauma and oral diseases is limited among professionals and sports groups. MDDM students have better oral health habits, however the SA have healthier eating habits.

Keywords: Physical activity. Oral health. Nutritional habits.

CULTURAL COMPETENCE - THE PURNELL MODEL

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Introduction: Currently, nurses are faced in their daily practice with increasing cultural diversity resulting from immigration phenomena that imposes the need to adapt and acquire skills to provide individualized care, holistic and culturally sensitive. This study aims to understand the importance of providing culturally sensitive nursing care.

State of the Art: The Purnell Model is considered a complex and holographic theory because it includes a model and an organizing structure that is applicable for all care providers in various disciplines and in various contexts. This is not a conceptual structure, but rather a great theory. Aspects of this macro interactional model include metaparadigm concepts of global society, community, family, and individual health, very much in line with the nursing metaparadigmas, fostering a global and holistic perspective.

New perspectives: The Purnell Model can be used in clinical practice, academic research, and at the administration and health services management level or for analyzing organizational culture.

Theoretical and practical implications: The nurse assumes the role of a cultural mediator able to find appropriate tactics to a more sensitive care to requests from their clients, recognizing that their differences must be preserved in order to maintain well-being and to reorder care through an empathetic and trusting therapeutic relationship.

Conclusions: The Purnell Model of Cultural Competence proves to be a useful and effective organizing framework in nursing care since it reinforces and systematizes a holistic, comprehensive and integrated approach.

Keywords: Nurses. Cultural competence. Theory.

ADDITIVE BEHAVIORS THROUGHOUT THE LIFE CYCLE: PREVENTION STRATEGIES

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Introduction: The psychoactive substances use has been assumed as a focus of major interest for the significant impact on the lives of people and societies. The association between Mental Health and substance use is well documented in the literature. With this article we intend to realize the implications of the psychoactive substances consumption in Mental Health, and explore preventive approaches of that kind of behavior.

State of the Art: The psychoactive substances consumption originates and reflects very different phenomena according to the dynamics that is generated from the crossing of aspects such as substance, individual, social support networks, or social, economic and political framework.

New perspectives: Preventive intervention aims to provide individuals and/or groups specific information and skills necessary to deal with the risk associated with substance use and other risky behaviors. The prevention and promotion of Mental Health should include assessment of protective factors/positive indicators in addition to the risk factors and indicators of mental illness.

Theoretical and practical implications: The guidelines focus on citizen intervention, and underlying both the mainstreaming of issues throughout the life cycle, whether the intervention contexts, whether the operation of the intervention according to the criteria of rationality and sustainability, taking into account the differentiation of powers and duties, as well as technical and human resources.

Conclusions: The preventive approach should be balanced according to the needs of social context, domain, level of risk, and individual characteristics, requiring a strategy covering all life cycle stages and all contexts.

Keywords: Substance-related disorders. Health promotion.

AIR QUALITY IN THE CITIES OF AVEIRO, LISBON, PORTIMÃO AND OPORTO

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The air quality over the past decades has been the subject of study and legislative action against the growth of industrial activity and

population, which has contributed to the degradation of this. Since the consequences of this degradation cause effects on human health and ecosystems is necessary to implement measures to control air quality. A national network of air quality monitoring applied to the entire Portuguese territory allows us to analyze the concentrations of air pollutants emitted by various emission sources in Portugal. This study aims to analyze the evolution of the air quality in the cities of Aveiro, Lisbon, Portimão and Porto in the period 2005-2011. Data collection was conducted via web "QualAR" database online on air quality of the Portuguese Environment Agency. The statistical processing of the acquired data was performed using the SPSS software version 19.0 Statistic. The pollutants studied were PM10, NO2, CO, O3, and C6H6 and the results show that concentrations of PM10 and NO2 exceeded their limits protection of human health as defined by national legislation. Overall there has been a gradual decline in the concentration of pollutants from 2005 to 2011 and there is still that the station is Lisbon, which has higher annual concentrations of pollutants.

Keywords: Air quality. Air pollution.

INDOOR AIR QUALITY IN SPORTS HALLS

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Introduction: Indoor Air Quality (IAQ) is increasingly seen as a widespread environmental problem. Over the years, sport and leisure/recreation facilities have become a refuge for the release of some of the everyday stress.

Objectives: This study aims to evaluate IAQ in sports halls during sports activities.

Methods: Physicochemical parameters [Temperature (T°), Relative Humidity (RH), Carbon Dioxide (CO2), Carbon Monoxide (CO), Particulate Matter (PM10, PM2.5) and Ozone] were measured throughout the duration of the sporting activities and the microbiological parameters [Fungi and Bacteria] at the beginning the middle and the end of those activities. The study sample consisted of a sport hall in Porto and two sports halls in Lisbon.

Results: The mean occupancy of sports hall was 68.2 ± 41.5, 33.20 ± 16.62 and 12.60 ± 9.11 people in sports hall 1, 2 and 3, respectively. In this study, the mean values were 6872,2 ± 7531,4 CFU/m³ for bacteria and 1649,1 ± 1371,2 CFU/m³ for fungi, a temperature of 22,1 ± 1,99 °C, 49,9 ± 7,36% Relative Humidity, 857,3 ± 676,62 mg/m³ of CO2, 0,40 ± 0,31 mg/m³ of PM10, 0,14 ± 0,17 mg/m³ of PM2.5 and CO of 0,13 ± 0,38 mg/m³ and 0,00 ± 0,00 mg/m³ of ozone. The sports hall 3 presented the lowest IAQ. The parameters that exceeded the limit value were bacteria, fungi, PM10 and PM2.5.

Keywords: Indoor air quality. Sports halls. Artistic gymnast.

MIXED METHODS RESEARCH IN NURSING

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Introduction: It is agreed that in applied fields such as health, integration of qualitative and quantitative approaches, which translates into the use of mixed research methods, it is increasingly common due the degree of complexity of the phenomena under

study, allowing researchers to expand understanding about (Grove, Burns & Gray, 2013).

Objectives: Describe mixed methods, answer the questions when, why and how to use this approach and identify their own limitations.

Methods: Integrative Literature Review in books, and electronic search in Google Scholar and EBSCOhost platform.

Results: Mixed methods defined as the third methodological paradigm (Johnson & Onwuegbuzie, 2004) is a theoretical and practical knowledge approach, focused on the collection, analysis and mixing both qualitative and quantitative data in a single study or series of studies. This methodology becomes crucial when we need to consider more complex problems, in which a single approach becomes insufficient to understand. Triangulation and complementarity are examples of the various reasons for the choice of this methodology (Doyle, Brady & Byrne, 2009). The way to combine these approaches, reflecting the different study designs, is varied and depends on factors such as the timing for data collection, weighting, integration and theorizing (Creswell, 2009). The limitations mentioned relate to the longevity of the studies, which makes it the most expensive research, and the need for more teams to field the two approaches (Johnson & Onwuegbuzie, 2004).

Conclusions: The use of mixed methods in nursing research is relevant to the complexity of the problems under study, resulting in a deeper understanding of the phenomena.

Keywords: Mixed methods research. Nursing.

CONSUMERISM, MEDIA AND HEALTH: CHALLENGES AND CLUES FROM A CONSUMER BEHAVIOUR PERSPECTIVE TO A SUSTAINABLE FUTURE

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Introduction: Consumerism has become a Public Health Issue. The essence of a consumer culture is the continual expansion of wants and needs in an attempt to express identity and achieve happiness. The constant bombardment of commercials raises generations to believe they need products in order to be beautiful, successful and happy, therefore media plays has a central role. The aim of this paper is to review relations between consumerism, media and health and to point clues to a sustainable future.

State of the Art: Insecurity- both financial and emotional- lies at the heart of consumeristic cravings. Research shows that people who place a high value on wealth, status and stuff are more depressed, anxious, less sociable, have lower well-being and psychological health than those who do not. People with consumeristic values have shown to be more narcissistic, have poor self-control and more dissatisfied with life. Compulsive buying, over-consumption, eating disorders and body dissatisfaction are rising and compared to previous generations today's youngsters have less happiness, greater risk of depression and assorted social pathology. On the other side, consumerism is not just a personal problem: It has become environmental.

Implications and New Perspectives: Consumer behavior research is beginning to focus on consumer well-being: Frugality values (opposite of consumerist values), Savouring practices, Slow movement and 'Less is more' movement, Zen Philosophy (Mindful consumption, Sila), Buddhist Psychology, Minimalism and Lean Philosophy are approaches that might contribute to steering humankind to a sustainable future.

Conclusions: Consumerist values are having impacts on health of human beings and so, research into alternative life-styles and its promotion is crucial.

Keywords: Consumerism. Mental health. Consumer behavior.

NURSES IN THE PRESENCE OF DYSTHANASIA PRACTICES: THE RIGHT TO CONSCIENTIOUS OBJECTION!

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Introduction: When facing a terminal patient with a worsening in his clinical status, one needs to know which procedures to follow, in order not to perpetrate dysthanasia, considered to be ethically reprovable, once it goes against the dignity of the person in a terminal phase.

Objectives: Argue whether, in a possible dysthanasia situation, the nurse can plead conscientious objection, for considering this practice to be ethically incorrect.

Methods: Participating observation and reflexive analysis, based on a case study of a terminal patient, admitted with terminal metastatic lung cancer. After placing a nasogastric tube, it is prescribed intravenous alimentation. Having difficult venous access, the patient is reluctant and uncomfortable with the procedure, considering it abusive. Before this situation, the nurse discusses other options with the doctor, with no success.

Results: The inevitability of death haunts medicine, which proposes itself healing and aims to extend life at all costs, using the most recent artificial means, becoming difficult to establish boundaries, and thus giving rise to highly impacting ethical dilemmas. Dysthanasia is considered a bad medical practice. In the face of a competent terminal patient, his will must be respected, meeting the respect for human dignity and it is today universally considered that the right to refuse treatment is the concrete expression of the inviolability of the personal physical integrity. The nurse, in his legitimate right and assuming his duty, can refuse to perform certain procedures, acting before his moral and professional consciousness. **Conclusions:** As long as the patient is competent, his will must be respected. Therefore conscientious objection is granted to nurses, in the respect for his will and dignity.

Keywords: Human dignity. Conscience objection. Dysthanasia.

ARE OUR USERS REALLY ANTICOAGULATED?

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Introduction: Atrial fibrillation and prothrombotic effect of mechanical valves are risk factors for stroke that may be controlled. Warfarin is the most widely used drug in this prevention, however their therapeutic range is not easy to achieve. It's called labile INR to difficulty in keeping the INR within the therapeutic range. If less than 60% of INR measurements are inside this range, the patient is at risk of suffering a stroke.

Objectives: To determine if the INR values of patients receiving warfarin are within the therapeutic range.

Methods: Observational, retrospective and descriptive study. Study period: June 2016. Population: individuals with the diagnosis of atrial fibrillation or valvular prosthesis treated with warfarin belonging to 8 medical files from a family health unit (USF); Variables: demographic, treatment, INR values (last year), history of complications. It was considered therapeutic range Suitable: between 2 and 3 in atrial fibrillation and between 2.5 and 3.5 in valvular prosthesis, in at least 60% of the measurements. Data source: clinical process; Data Analysis: Excel®2011.

Results: Of the 15,490 users of the USF, 160 were treated with warfarin. Of these, 66.96% had atrial fibrillation and 15.65% valvular prosthesis. They had a mean age of 71.86 years (± 13.1) and they

were majority males (53.12%). It was found that 38.57% of patients had labile INR. There were no reported complications associated with levels of INR.

Conclusions: The family doctor is, the key element to initiate, coordinate and provide a long-term monitoring in the prevention of cerebrovascular disease. Patients with labile INR should be assessed more tightly and are candidates for treatment with novel oral anti-coagulants, in cases where these are indicated.

Keywords: Warfarin. Secondary prevention. INR control.

EFFECTS OF NOISE IN INTENSIVE CARE UNITS

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Introduction: Intensive Care Units have high noise levels leading to poor quality sleep, potentiating a slower recovery, low immune response and decreased cognitive function. Noise is also recognized as a source of stress and disease to healthcare professionals, making work difficult, increasing the risk of error and compromising the safety of the cared person. In this sense, it is questioned: What level of noise at the ICU? How to reduce noise and environmental negative stimuli?

Objectives: To assess the level of noise to which patients and employees are exposed in the ICU. Implement recommendations to decrease noise.

Methods: Evaluations of the noise level in several shifts and in different locations of the unit through applications (Sound meter version 1.6 and sound meter version 1.1.2).

Results: Average noise level over 24 hours was 65 dB, with a maximum peak of 103 dB. Dialogue between two people 70 dB; ventilator alarm 70 dB; monitor alarm to 50 cm 73 dB; opening boxes 84 dB; shift change 75 dB. Noise levels well above the recommended values by the WHO (4 0dB) to essentially intellectual activities that require great concentration.

Conclusions: Emerge as recommendations to decrease the noise: privilege adjustment of monitor alarms and ventilator according to clinical situation, privilege opening the packages outside the rooms, get closer to people to speak, avoid increasing the TV sound without the patient asking it and avoid personal conversations next to the patient.

Keywords: Comfort. Noise. Nurse interventions.

EATING HABITS OF THE CHILDREN THAT ATTENDED THE "HEALTHY EATING WORKSHOP" - 2015

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Introduction: The healthy eating project in Portalegre County Schools, arises from a challenge proposed by the city to the Polytechnic Institute (IPP) to improve the eating habits of children and young people of the county. The workshop is one of the activities developed by the project.

Objectives: Produce and disseminate knowledge on food education of children, based on the experience provided by the workshop.

Methods: We conducted a qualitative descriptive study. The data collection protocol includes: informed consent for participation in the study, socio-demographic variables and the report in two columns, one for Sunday, other for Monday and 7 lines to fill the food ingested on a total of six meals. The responses were subjected to

content analysis. We used NVivo program to create themes based in the food wheel.

Results: Participated in the study 21 children from two kinder gardens of the county. It was found that on Sundays they eaten more candy than on Mondays. Foods that were referred as the most ingested over meals belonged mostly to groups of milk and dairy products, meat, fish and eggs, horticultural and fruit.

Conclusions: The results converge with the advanced by the Portuguese Association of Nutritionists when encouraging the consumption of leguminous plants, this group also was the least mentioned on food eaten by children.

Keywords: Healthy eating. Food wheel. Child.

HOME BIRTH: THE PERCEPTIONS OF NURSE MIDWIVES IN PORTUGAL

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Introduction: In Portugal, the home birth (HB) practice has been discussed today. The advantages and limitations of this practice, have been discussed not only by health professionals but also by the society at large. The perception of the different health professionals is crucial to promote HB.

Objectives: To identify the nurses' midwives (NM) perception in order to the benefits and difficulties of carrying out the HB in Portugal.

Methods: qualitative, exploratory and descriptive study. The sample is no probabilistic. Data were collected by semi-structured interview to 53 NM, audio recorded, and was made Bardin' content analysis. It was assured anonymity and confidentiality of data.

Results: 14 NM disagree with HB; 2 were totally disagree and 37 agreed with HB. Reasons to disagree: risks associated to the NM practice and lack of security for mothers and children is held in hospitals. HB benefits: the labor performed family environment, to avoided aggressive hospital practices for women and child - violence obstetric. HB fears: lack of support system to the NM practice and in the emergency transfer system; poorly monitored pregnancy and lack of communication between prenatal care in the community to the hospital.

Conclusions: Most NM states that their availability and competence to carry out HB provided with security. Also recognize the right of women to this birth option. However, point non-promoters HB aspects: lack of health policies to support safely to its implementation, the lack of specific training, the lack of networking in the pregnant assistance and the lack of coordination of care that allows pregnant transfer in case of emergency birth. These are the priority areas for NM to continue investigate and promote the HB.

Keywords: Perceptions. Nurses' midwives. Home birth.

ARTIFICIAL NUTRITION AT THE END-OF-LIFE

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Introduction: Due to the challenge of understanding the role of nurses in the nutrition of end-of-life patients, we made a literature review and presented it to a number of nurses, who were volun-

tarily presented in a public-private hospital from the continental territory of Portugal.

Objectives: How nurses understand their role in withholding nutrition from palliative patients?

Methods: We distribute a mixed survey, with the appropriate informed consent and data processing authorization, after showing the presentation “Artificial Nutrition at the end-of-life” to 31 nurses who were voluntarily presented.

Results: From the 31 surveys we obtained 18 answers; we analyse them using descriptive statistical analysis and content analysis. In the first question, we obtain 94 to 100% of success in 5 points. In the second question, an open one, we categorize 3 groups of answers: team work, patient/family proximity and decisive paper.

Conclusions: We conclude that nurses understand the importance of their intervention with the patient/family feeding process, but do not always perform in the same way they defend. The decision-making process influences their actions, particularly due to the effective absence of multidisciplinary work, the lack of training in this area and the insecurity of facing their autonomy in this area, that leads to a delay in the decision taken near this binomial patient/family. Therefore, the training is an essential tool to overcome the difficulties and to show the important role of nurses with patients that have specific needs because of their life context.

Keywords: Artificial nutrition. End-of-life. Suspension.

INVERSE ASSOCIATION BETWEEN CIRCULATING ADIPONECTIN LEVELS AND CARDIORESPIRATORY FITNESS IN NON-OVERWEIGHT AND OVERWEIGHT PORTUGUESE ADOLESCENTS: THE LABMED PHYSICAL ACTIVITY STUDY

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Introduction: Recent studies showed that adiponectin levels are inversely associated with fitness. However, to date, there is a lack of knowledge regarding the relationship between cardiorespiratory fitness (CRF) and serum adiponectin levels in adolescents with different weight status. We aimed to examine the independent associations between CRF and serum adiponectin levels in adolescents, controlling for several potential confounders.

Methods and results: This is a cross-sectional analysis of 529 (267 girls) Portuguese adolescents aged 12-18 years. CRF was assessed by 20 meters shuttle run test. We measured fasting glucose, insulin, HDL-cholesterol, C-reactive protein and adiponectin. Linear regression analysis showed a significant inverse association between adiponectin and CRF in non-overweight participants ($B = -0.359$; $p < 0.042$), after controlling the analysis for age, sex, pubertal stage, socioeconomic status, adherence to the Mediterranean diet, body fat percentage, HOMA-IR, HDL-cholesterol, C-reactive protein). Analysis of covariance showed a significant difference between the highest CRF Healthy zone (above healthy zone) and the Under and the Healthy CRF zones in non-overweight adolescents ($p < 0.05$) ($F(2, 339) = 3.156$, $p < 0.001$).

Conclusions: Adiponectin circulating levels are inversely associated with CRF in non-overweight, but not in overweight adolescents. In non-overweight adolescents, those with highest levels of CRF (above healthy zone) presented lower levels of adiponectin compared to those in Under and Healthy CRF zones.

Keywords: Inflammatory biomarkers. Adiposity. Youth.

THE EXPECTATIONS OF PREGNANT WOMEN TO THE PREPARATION FOR CHILDBIRTH

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Introduction: Preparation for childbirth is a useful intervention in the preparation of the woman/couple to the decision making and to an active participation in labour. To plan effective interventions for childbirth education, midwives need to know which are the expectations of pregnant women for these sessions.

Objectives: To analyse expectations of pregnant women regarding preparation for childbirth.

Methods: An exploratory and descriptive study was conducted, with a convenience sample. Inclusion criteria were women with 28 weeks' gestation or more, aged 20 years or older and able to give informed consent. Data collection was carried out through interviews, in an outpatient obstetric ward in the northern region of Portugal, between January 2011 and July 2012. We used the technique of content analysis of Bardin to analyse data. Ethics approval and informed consent were obtained.

Results: The sample comprised 224 pregnant women, aged between 20 and 41 years, mean 31.3 years ($SD = 4.4$). Most of the women attended higher education and were married or cohabiting. Concerning labour, the majority of participants were primiparous women. After analysing the statements, we identified three categories and seven sub-categories related with knowledge: labour and parenting; with capacity: managing emotions, coping strategies and self-control; and with self-efficacy to deal with labour: self-confidence and sharing experience with peer.

Conclusions: Pregnant women expected the preparation for childbirth enable them to acquire knowledge and skills to deal emotionally and physically with labour, helping them build confidence to overcome the childbirth and allowing them to share experiences with the peer group.

Keywords: Pregnant women. Childbirth education. Midwives.

EDUCATIONAL INTERVENTION PROJECT “R.E.D. BULL(YING)”

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Introduction: Bullying is a form of school violence with high prevalence, that shouldn't be a “normal” occurrence or a event that young people should experience during the transition between childhood and adolescent. In order to reduce the prevalence of bullying in the school community, we elaborated the Project “R.E.D. BULL(ying)”, with **Objectives:** Evaluate the knowledge level about bullying, and increase the level of level about bullying, before and after the Project, and increase the level of literacy about the subject in the school community.

Methods: Our target population consisted in a total of 203 students from 5th to 9th grade and 13 teachers of school. It's a cross-sectional study of research-action, with the application of a diagnostic questionnaire, before and after, we conducted the educational sessions.

Results: After the educational sessions, 93.1% of students identified what to do in a bullying situation, and 62.6% of students responded that in an assault situation, called an adult; 95.1% said they knew what was bullying, 56.8% associated the concept to physical ag-

gression and 92.6% mentioned to know the types of bullying, and physical bullying (71.9%) and verbal bullying (69.5%) were the most mentioned types. Meanwhile, the teachers: 76.9% considered that the school environment was pleasant, 84.6% characterized the relationship between the students as “adequate” and 77% said they didn’t experience any bullying situation.

Conclusions: We found an overall improvement to the level of bullying related knowledge after the educational intervention. So, we verified that the integrated intervention in the school health teams, allows greater attention to the detection, signalling and routing situations of violence.

Keywords: Bullying. Factors. Adolescents. School.

THE INFLUENCE OF PHYSICAL EXERCISE IN THE SELF-CONCEPT OF CHILDREN WITH CEREBRAL PALSY

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Introduction: Cerebral palsy is a syndrome that results from a brain injury that affects the brain, which is still in development, leading to changes in the movement and posture (Alves, Cadete & Figueiredo, 2004). Physical activity helps people with disabilities to become active contributing to social integration and enhancing their strengths (Ferreira, 1993). Aidar, Carneiro, Silva Reis, Garrido & Vieira (2006) found that water activities contribute to motor gains and social functions.

Objective: To evaluate the influence of a motor intervention program, in the aquatic environment, in the self-concept of children with cerebral palsy.

Methods: The sample consisted of 2 children with cerebral palsy - spastic diplegia, one girl with nine years of age and another boy with 11 years of age. The two children were subjected to a motor intervention program in the aquatic environment. The intervention took place over eight weeks, with two weekly sessions of 45 minutes each. An evaluation was performed before and after the intervention program through the Self-Perception Profile for Children Susan Harter (1986).

Results: It was found that the girl maintained the same score in the scholastic competence, social acceptance and behavioral aspects, and the discrepancy between the actual scores and what the girl would like it to be decreased. The scores on the athletic ability and physical increased slightly. The boy dropped the discrepancy between the different areas. The athletic competence was the domain that showed the most progress.

Conclusion: The results showed that a motor intervention program, in the aquatic environment, allowed for a greater stimulation of the child, causing him/her to achieve better performance levels, thus improving himself/herself.

Keywords: Physical activity. Self-concept and cerebral palsy.

MISCARRIAGE: WOMEN’S PERCEPTIONS OF NURSING CARE

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Introduction: Considered a stressful occurrence, involuntary pregnancy loss can also be emotionally devastating for both a woman and couple alike. The reactions appear to be unique, personal and independent of the gestational period, and may involve a wide

range of physical and emotional disorders. Women who experience such loss should be subject to careful attention by nurses.

Objectives: To evaluate women’s perceptions of nursing care during a miscarriage event.

Methods: We conducted a qualitative, exploratory and descriptive study, in Porto’s metropolitan area, via 74 telephone interviews and 18 in-person interviews to understand women’s perceptions and satisfaction with care being provided to them. We applied the Bardin’s technique for data analysis.

Results: Support, Affection, Availability, Monitoring/Presence, Professionalism, Pain Control, and Information emerged as categories.

Conclusions: Despite the satisfaction with care being provided by nurses, some aspects were considered less positive, such as the lack of information available regarding miscarriage. This information should be provided in a clear and precise manner. The willingness to offer support shown by nurses was not reliable, depending largely on their personality. Women also mentioned how they valued a nurse’s presence and care throughout such a painful event. When asked about pain control, their responses focused on drug administration, as support for non-pharmacological methods is non-existent. We believe that because their hospital stay is usually of short duration and directed towards treating an acute clinical event, a woman’s circumstances and psychological suffering may be wrongly undervalued, as well as their return home after hospital discharge.

Keywords: Pregnancy. Miscarriage. Grief. Nursing care.

CHARACTERIZATION OF THE ANALGESIC DRUGS USED IN THE HIP AND KNEE OSTEOARTHRITIS IN A FAMILY HEALTH UNIT

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Introduction: Nonsteroidal anti-inflammatory drugs (NSAID) are one of the most used drugs in the control of rheumatological pain. However, studies indicate that NSAID may be associated with an increased of cardiovascular risk and their use should be avoided in large doses or for long periods. There are other medical and surgical options, which must be taken into account in cases of chronic pain.

Objectives: Characterize the analgesic medication used in the pain derived from the hip/knee osteoarthritis.

Methods: Observational study that targeted the Family Health Unit users with hip or knee osteoarthritis. Included those with a medical appointment in 2015 and excluded the ones with polyarthralgia or acute traumatic pathology. Variables studied: age, sex, number of appointments, pain medication, stroke, MI, DM, HTA, depressive disorder, peptic ulcer. Data processing: SPSS Statistics 17.0[®].

Results: We included 102 individuals with 71.4 ± 10.6 years. Twenty one were treated with simple analgesics, 42 with NSAID, 28 with weak opioids and 5 with strong opioids. Of the NSAID users, 52.4% took them in a regular way; 19.1% had attempted the use of weak opioids. Three patients had replaced NSAID with other analgesics. There was an association between the depressive disorder and the use of strong opioids (p = 0.040), as well as between the number of appointments and the use of weak opioids (p = 0.007).

Conclusions: A quarter of the patients take NSAID regularly. Given their cardiovascular adverse effects, it would be important to try other therapeutic options. Patient should be also educated about pain management. Note that 20.6% of the patients didn’t have any medication registered, leading us to question whether these patients have been taking pain medication without medical advice.

Keywords: Analgesic. NSAID. Osteoarthritis.

CHOCOLATE AND HDL CHOLESTEROL: A SWEET RELATION

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Introduction: Cardiovascular disease (CVD) is the first cause of dead in developed countries. A healthy diet and lifestyle modifications are the first step in the prevention of CVD. There is some evidence from clinical studies that cocoa may increase HDL-cholesterol concentrations.

Objectives: The aim of this paper is to discuss a case of a possible relation between chocolate and HDL-cholesterol.

Methods: We collected the clinical history direct from the patient and the clinical information from the clinical process.

Results: This case is about a woman, 79 years old, Caucasian, retired. She has personal history of osteoarthritis, dyslipidemia. She has an active life and swims since many years. In Dec/2014 in a routine visit, she announced that she decided to stop eating chocolate (about 200 g p.day) due to her high cholesterol levels. Her routine exams were requested including the lipid profile. Her usual lipid profile is as follow: total-C 247 mg/dL, LDL-C 130 mg/dL, triglyceride levels (TG) 78 mg/dL and HDL-C 94 mg/dL. This time the results were as follow: total-C 193 mg/dL, LDL-C 111 mg/dL, TG 70 mg/dL, and HDL-C 68 mg/dL. One year later, she began to eat chocolate again. Her lipid profile was at that time: total-C 249 mg/dL, LDL-C 137 mg/dL, TG 75 mg/dL and HDL-C 97 mg/dL.

Conclusions: This case demonstrates a large variation of values depending on whether the patient consumes chocolate or not, since nothing else changed in the patient's life. Despite the increase of LDL-C and total-C, HDL-C values had a higher increase. This variation might be a consequence of chocolate consumption, as shown in many studies.

Keywords: Chocolate consumption. HDL cholesterol.

CONSUMPTION CHARACTERIZATION OF PSYCHIATRIC DRUGS BY RESIDENT POPULATION IN DISTRICTS OF GUARDA AND VISEU

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Introduction: Between 2000 and 2012, in Portugal, there was a considerable increase in psychiatric drugs use in all subgroups, with 171% in antipsychotics (APs), indicated for the acute treatment and long-term schizophrenia and other related disorders.

Objectives: Characterize the pattern of use of psychiatric drugs in the districts of Guarda and Viseu.

Methods: A survey was applied in 2016, between January and April, to resident adults in the districts of Guarda (n = 174) and Viseu (n = 415).

Results: A total of 390 (66.2%) respondents, especially the female and urban residents, reported knowledge about psychiatric drugs. Psychiatric drugs use was mentioned by 222 respondents (37.7%, 95%CI: 33.8-41.6%) mostly females, but with a total mean age of 53.6. The subgroup with the highest consumption (51.6%, n = 111) included anxiolytics, sedatives and hypnotics. The consumption of APs was reported by 58 (9.8%) respondents, who mostly consumed quetiapine (39.7%, n = 23). The major-

ity of respondents had been taking an antipsychotic for over 10 years and the most frequent adverse reaction reported is nausea.

Conclusions: The majority of respondents claims to know what psychiatric drugs are and more than one third of the sample uses them. Moreover, APs have a significant representation. As the excessive consumption of psychiatric drugs is a public health problem, it is imperative to adopt measures to reduce their impact on morbidity and the quality of life of these patients, including modifying negative attitudes amongst the general public, delays in seeking treatment and help in continuing with care programs once they have started, relapse prevention and reducing direct and indirect costs of health for both the patients and their families.

Keywords: Mental health. Psychiatric drugs. Antipsychotics.

SMOKING PREVALENCE IN PRIMARY CARE PATIENTS

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Introduction: Tobacco use is the first preventable cause of disease and premature death. Thus, according to the PNPCT each ACeS and each functional unit, must have epidemiological knowledge about tobacco use geographically.

Objectives: To determine the prevalence of smoking, aged over 14 years in the population covered by each primary health care unit with smoking habits of record.

Methods: An exploratory study, descriptive, cross-sectional, quantitative, in a sample of 2045 users, aged, or higher, to 14 years, with family physician and registration of smoking. Data were obtained through computer records and medical meetings and nursing minutes.

Results: Of the 6,884 users registered in primary health care unit, 53.6% are female and 46.4% male. Of the total registered users only 2,045 (29.7%) have records of smoking habits and of these, 1887 have smoking history of zero (92.27%), and 158 (7.73%) present is recorded as smoking or ex-smokers. Users with the greatest number of records belong to the age group of 65-74 years, followed by the 75-84 years.

Conclusions: The results show that the smoking habits of records (29.7%) are lower than recommended by the indicator PAI, the NTCP (45%). Thus, it is important to raise awareness among health professionals of the importance of records (through internal training) and monitor tobacco consumption, geographically, their consequences and develop education initiatives for health.

Keywords: Tobacco. Health habits. Records. Indicators.

INFORMED CONSENT AND THE INFORMATION PERCEIVED IN CANCER PATIENTS

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Introduction: The way people with cancer access to the health information and the impact this has on decision-making is a matter of central interest in this group.

Objectives: The aim of this work is to promote a critical reflection on personal, professional and sociological values; identify the

ethical principles to decision making; analyze professional person-patient relationship that is configured from the vulnerability and range of settings; characterize the decision making and quantify the information provided to users.

Methods: Quantitative, exploratory study conducted with a sample of 40 people with cancer. The instruments that were used: questionnaire Easy-Care, and QLQ - INFO25.

Results: The results indicate deficits in the appropriate information to the needs of patients and highlight the need to expand information in the fields; self-management of the disease; the use of certain services (physical therapy, psychology) and the influence of the disease/treatment in the social and family environment.

Conclusions: Care in order to quality of life are provided by professionals who strive to maintain the dignity of the sick person and their caregivers; They work with the strengths and limitations of the same to them to return the control and management of their own situation; maintain fairness as the ethics of access and location of resources; demonstrate respect for the patient and their caregivers/family; defend the expressed wishes of their patients, caregivers/families and communities; undertake to work for the excellence of care and support; They are accountable to patients, caregivers/families and communities.

Keywords: Cancer. Information. Informed consent. Health communication.

ERRORS IN PREPARATION AND MEDICATION MANAGEMENT IN NURSING PROFESSIONALS

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Introduction: The preparation and administration of medications is one of the most common and relevant functions of nurses, demanding great responsibility. Incorrect administration of medication, currently constitutes a serious problem in health services, and is considered one of the main adverse effects suffered by hospitalized patients.

Objectives: Identify the major errors in the preparation and administration of medication by nurses in hospitals and know what factors lead to the error occurred in the preparation and administration of medication.

Methods: A systematic review of the literature. Defined as inclusion criteria: original scientific papers, complete, published in the period 2011 to May 2016, the SciELO and LILACS databases, performed in a hospital environment, addressing errors in preparation and administration of medication by nurses and in Portuguese language. After application of the inclusion criteria obtained a sample of 7 articles.

Results: The main errors identified in the preparation and administration of medication were wrong dose 71.4%, wrong time 71.4%, 57.2% dilution inadequate, incorrect selection of the patient 42.8% and 42.8% via inadequate. The factors that were most commonly reported by the nursing staff, as the cause of the error was the lack of human appeal 57.2%, inappropriate locations for the preparation of medication 57.2%, the presence of noise and low brightness in preparation location 57.2%, professionals untrained 42.8%, fatigue and stress 42.8% and inattention 42.8%.

Conclusions: The literature shows a high error rate in the preparation and administration of medication for various reasons, making it important that preventive measures of this occurrence are implemented.

Keywords: Nursing. Medication errors.

EPIDEMIOLOGICAL CHARACTERIZATION OF AMPUTATED DIABETIC PATIENTES: INTEGRATIVE LITERATURE REVIEW

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Introduction: Amputations are increasingly frequent in people with Diabetes, which is becoming an important public health issue, in Portugal and in the world.

Objectives: Characterize the clinical profile of diabetic patients with lower-extremity major amputations and identify their incidence and prevalence rates.

Methods: An Integrative Literature Review was performed using MESH and DeCS terms, where 867 articles published in several databases between 1996 and 2015 were consulted. These were submitted to a process of evaluation and selection, resulting in a final 7 article sample, which was analysed with detail. The results were systemized, discussed and crossed.

Results: The diabetic patients being studied had an average age between 53.8 and 75.7 years old. The incidence rate of amputation oscillated between 1.3% and 51.5%. Only Izumi et al (2006) presented data about reamputation's incidence, namely an ipsilateral rate of 13.3% and a contralateral rate of 53.3%. The amputation's prevalence rate of 8.5%, found only by Ferguson et al (2013), reveals a predominance of Hispanic and male patients.

Conclusions: Epidemiologically, major amputation's incidence has been decreasing in diabetic patients, mainly in developed countries and regions with specialized diabetic foot care. Simultaneously, it has been verified that diabetic patients who had an amputation have a higher mortality and that features like the Hispanic race, the male gender and a longer period of time with the Diabetes' diagnosis leads to an higher risk of amputation. It is estimated still that the occurrence of comorbidities like chronic arterial failure, necrosis, neuropathies, foot infections and ulcers, and the presence of other diseases as hypertension and obesity also increase that risk.

Keywords: Amputation. Diabetes. Incidence. Prevalence. Morbidity.

HOW ACUTE IS ACUTE ENOUGH? THE BEGINNING OF A CONTINUOUS QUALITY IMPROVEMENT CYCLE

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Introduction: Primary care units in Portugal offer a variety of consultations in order to satisfy the populations' health needs. Among those, acute care consultations are offered every day, either by the patients' own family physician or by other available doctor. The main goal of this strategy is to allow acute health issues to be resolved in a timely manner, while decreasing the use of hospital Emergency Rooms.

Objectives: The main goal of this study is to analyze how acute care consultations are being consumed in a primary care unit, and how adequate is that consumption according to the motives presented by the patients.

Methods: A retrospective analysis of the clinical registries was conducted between 13th June and 21st June 2016. The adequateness was analyzed according to the criteria defined by the primary care unit for acute care consultations: (1) health issues that could harm

the patient in the short term (2) new symptoms (3) exacerbation of chronic disease.

Results: in the selected period of time, 220 acute care consultations were made. 65% of the patients were females and the mean age was 43 years old. According to the aforementioned criteria, 36% of the consultations were considered to have an inadequate motive, while 62% were considered adequate. 2% were not classifiable by the criteria.

Conclusions: THESE results stress the need for a better definition of who is eligible to have an acute care consultation. In order to do that, we believe the implementation of a quick screening of the symptoms, made by a health professional, could be very important. Only this way we could give access to appropriate care to the patients who really need them.

Keywords: Primary Care. Acute Care Consultations.

PERFORMANCE ALGORITHM IN ABNORMAL UTERINE BLEEDING

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Introduction: Abnormal uterine bleeding (AUB) are responsible for about 1/3 of the appointments in Primary Health Care (PHC) and Gynaecology. We have to taking into account the high frequency of this medical condition.

Objectives: Systemize the AUB approach and propose a performance algorithm in PHC.

Methods: Classical review in June 2016 based on literature textbooks, medical journals and scientific databases (PubMed, UpToDate) of review articles in English and Portuguese. It was selected bibliography published in the last five years, using the MeSH terms "uterine" and "bleeding".

Results: Faced with a AUB is important to take into consideration the woman's age, clarifying whether we have a puberty, reproductive age or peri and post menopause AUB. Regardless of the woman's age, medical history and physical examination are essential in the pathology approach, allowing to identify suggestive symptoms and signs and predisposing factors. We classify AUB into two major groups: dysfunctional bleeding or organic cause bleeding, with imaging and laboratory exams contributing for the differential diagnosis. The initial therapeutic approach is mainly medical, but it is essential to recognize warning signs and clinical findings in need of guidance to Secondary Health Care. The AUB in postmenopausal age always needs guidance and referral for further study in hospital.

Conclusions: The study and approach to AUB should be systematized in PHC. The family doctor should recognize the importance of the problem and know how to adjust their orientation.

Keywords: Abnormal uterine bleeding. Primary health care.

APPROACH TO PELVIC ORGAN PROLAPSE IN PRIMARY CARE

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Introduction: Pelvic organ prolapse is defined as the herniation of pelvic organs from their normal position, caused by a defect in a specific segment of the vagina: anterior, posterior or api-

cal. It affects 32-40% of women throughout their lives, being the Caucasian race the most affected. Symptoms may vary, but they always cause a significant loss in life quality. Because of that, the family physician must be aware of symptoms that suggest this diagnosis.

Objectives: Review the physiopathology, recommendations in terms of diagnostic criteria and conservative therapeutics in pelvic organ prolapse.

Methods: Research in online database PubMed with the Mesh Terms "pelvic organ prolapse", in the review category. Five articles were selected.

Results: The real prevalence of pelvic organ prolapse differs if symptoms or gynecological observation are used; the latter diagnoses more cases. Its physiopathology is complex and multifactorial, being influenced by genetic, neurologic, histologic, obstetric, hormonal status, biometrical and occupational parameters. Conservative treatment should include lifestyle and occupational modifications. Also, physical therapy exercises (commonly referred as Kegel) can slow the progression of the defect. The use of pessaries can be helpful in both controlling symptoms and serving as a bridge therapy to surgical treatment.

Conclusions: A complete anamnesis and gynecological examination are mandatory for a correct diagnosis, preferably using validated tools such as POP-Q. Conservative treatment is accessible in primary care and can relieve symptoms effectively. It is a safe, cheap and minimally invasive strategy that provides an improvement in quality of life.

Keywords: Pelvic organ prolapse. Primary Care.

THE TICK-BORNE DISEASES AND PROPHYLAXIS: A COMPARATIVE ANALYSIS OF APPLIED STUDENT RESEARCH RESULTS

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Introduction: Tick-borne diseases is a topicality both in Latvia and Poland, therefore an inter-state research was conducted, to compare medical and non-medical student knowledge in tick-borne diseases and prophylaxis, widening the understanding, necessary solutions, and actualizing the issue in study process.

Objectives: To determine medical and non-medical student understanding of tick-borne diseases, prophylaxis and actions in case of tick bite.

Methods: Two respondent groups were selected for the study: medical university students (n = 700) and non-medical university students of Latvia (n = 300).

Results: Medical students have broader theoretical knowledge on tick-borne diseases, prophylaxis and actions in case of tick bite. Results, displaying applied daily prophylactic measures, remain similar in both focus groups: 50% of respondents always perform body inspection after being in the nature. 55% of surveyed students in both focus groups seldom apply defensive agents, while 1/5 of medical students and 1/3 of non-medical students never apply repellents. There are no significant differences among student mistakes, when removing a tick. 55% of medical and 75% of non-medical students have experienced a tick bite, indicating relatively high illness risk.

Conclusions: Taking into account the large number of tick-bite cases, it's necessary to draw attention to education of society, actualizing the tick-borne disease detection and the importance of preventative measures. Although medical students have broader theoretical knowledge, they poorly apply the know-how in practice. To improve the situation, it is necessary to reconsider the learning methods and approaches.

Keywords: Lyme disease. Prophylaxis. Students.

STUDY OF OSTEOPOROSIS IN PORTUGUESE WOMEN AGED MORE THAN 50 YEARS: ANALYSIS OF RISK FACTORS AND ADHERENCE TO THERAPEUTIC

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Introduction: Osteoporosis is a disease characterized by low bone mass, increased bone fragility and risk of fracture. In Portugal, about five hundred thousand people suffer from osteoporosis, most of them women. The criteria for initiating pharmacological treatment is based on the bone mineral density test and the assessment of risk factors. Due to the asymptomatic condition of the pathology, patients don't adhere correctly to the pharmacological treatment thus being in a higher risk of fracture and comorbidities.

Objectives: The aim of this study was to identify variables associated with osteoporosis and to evaluate the adherence to the osteoporosis treatment.

Methods: In this study, the bone mineral density test was performed on 107 women aged over 50 years, by quantitative ultrasound of the calcaneus. Several other data, such as age and indicators of lifestyle habits, were collected by questionnaire, in order to study potential associations. The therapy compliance was also analyzed.

Results: The bone mineral density test demonstrated that 43.9% of the participants had normal bone density, 37.4% had osteopenia and 18.7% had osteoporosis. Increased age ($p = 0.000$) and menopause ($p = 0.013$) were correlated with T-score. The diagnosis of osteoporosis and the family history of osteoporosis were statistically correlated ($p = 0.020$). Body mass index ($p = 0.380$), current smoking (0.456), consumption of milk and dairy products ($p = 0.201$) and consumption of food rich in vitamin D ($p = 0.274$), were not statistically correlated with T-score. Patients taking bisphosphonates, with older age and with treatments longer than 6 months presented poor adherence to medication.

Conclusions: Age, menopause and family history of osteoporosis were risk factors for the disease.

Keywords: Osteoporosis. Risk factors. Treatment. Compliance.

ANTIOXIDANT AND CYTOTOXIC ACTIVITY OF DANDELION (TARAXACUM OFFICINALE) ETHANOLIC EXTRACT

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Introduction: Dandelion (*Taraxacum officinale*) is a plant known for its medicinal properties, such as antioxidant and anticancer ac-

tivity. Increasing interest and research on medicinal plants have revealed its potential for treating different diseases, including cancer.

Objectives: This study aims to evaluate the antioxidant capacity and cytotoxic properties of *T. officinale* ethanolic extract against human hepatocarcinoma (HepG2).

Methods: Antioxidant activity of the extract was determined by the superoxide scavenging assay and Fe²⁺ chelating activity. Cells were treated with plant extracts for 24 and 48 hours and cell viability determined by 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyl tetrazolium bromide (MTT) assay, and the concentration of extract that inhibited 50% cell growth of the cells was calculated.

Results: For antioxidant capacity of the crude extract, IC₅₀ values were IC₅₀ = 53.9 ± 10.33 ug/ml (Fe²⁺ chelating activity) and IC₅₀ = 2.0 ± 0.3 ug/ml (superoxide scavenging assay). Cytotoxic activity in HepG2 cells after 24h and 48h of incubation showed a cell viability greater than 70% in all studied concentrations.

Conclusions: Results suggest that *T. officinale* has antioxidant and cytoprotective activities, which seems to be related with the phenolic components of the extract. However, further studies are needed to elucidate the main compounds responsible for these potential cytoprotective and antioxidant effects.

Keywords: Antioxidant activity. Cytotoxicity. Dandelion.

CANNABIS SATIVA L. AND INFLAMMATORY BOWEL DISEASE

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Introduction: Inflammatory bowel disease (IBD) involves Crohn's disease and Ulcerative Colitis. Due to the increase of newly diagnosed cases and side effects related to conventional drugs, the search for alternative therapies are crucial. Cannabis sativa L. has been used since ancient times for the treatment of intestinal disorders. Recently, studies have been conducted with Cannabis sativa L. for the treatment of IBD.

Objectives: This review aims to identify the anti-inflammatory and immunomodulatory activity of Cannabis sativa L. in IBD, in order to develop alternative therapies for this condition.

Methods: The search was carried out using PubMed and Elsevier updated to December 2015. The search terms were 'IBD', 'inflammatory bowel disease', 'cannabis', 'marijuana', 'crohn' and 'ulcerative colitis'. The references were chosen according to its relevance to the theme. Human studies with natural compounds from the extract of Cannabis were included.

Results: The plant shows high capacity in reducing the symptoms of IBD and improving the quality of life. Cannabis sativa L. was able to induce remission in many patients. The endocannabinoid compounds such as cannabidiol, cannabinol and Δ⁹-tetrahydrocannabinol (agonists of the receptors CB1 and CB2) decreases inflammation by altering the recruitment of pro-inflammatory cytokines. The activity of the plant in the central nervous system also decreases symptoms associated with pathology, such as lack of appetite, nausea and abdominal pain.

Conclusions: Cannabis sativa L. seems to be a promising plant with strong evidences in improving symptoms associated with the disease. It is expected that, in the future, this plant might be widely used in patients with IBD.

Keywords: Inflammatory bowel disease. Cannabis sativa L.

CHROMIUM SUPPLEMENTATION AS AN ALTERNATIVE THERAPY TO DIABETES MELLITUS - SYSTEMATIC REVIEW

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Introduction: Chromium is an essential mineral that interferes in the metabolism of carbohydrates, through an increase in insulin sensitivity. Chromium supplementation has been identified as an alternative for conventional therapy, to the control of diabetes mellitus.

Objectives: This systematic review aims to study the effect of chromium supplementation in fasting plasma glucose and in glycated hemoglobin; and the secondary objective is to verify the safety of taking this supplements.

Methods: Clinical trials were identified through PubMed and ScienceDirect, published from 2006. Studies were included if conducted in humans, older than 18 years of age, diagnosed with diabetes mellitus, with chromium monotherapy and reporting one of these variables: fasting plasma glucose or glycated hemoglobin. All the included studies were previously evaluated through CONSORT (Consolidated Standards of Reporting Trials) quality scale.

Results: A total of 8 clinical trials were included, with 317 participants who received 200 to 1,000 µg/day of chromium supplementation for eight to 24 weeks. Of the eight studies, five demonstrated the effect of chromium on fasting plasma glucose, showing a significant decrease (from 19.81 to 93.97 mg/dl). In glycated hemoglobin, there was a significant decrease (from 0.4% to 2.65% in 4 studies). Adverse effects were reported in three studies, such as constipation, flatulence, dry mouth, nausea, stomach problems, skin rash and decrease in appetite.

Conclusions: Even though the results are promising, there is no consensus, since three studies consider that chromium has weak antidiabetic power. It is premature to recommend chromium supplementation as a therapeutic alternative for the control of diabetes mellitus.

Keywords: Chromium. Diabetes mellitus. FPG.

PLANT SPECIES AS A MEDICINAL RESOURCE IN MANGUALDE (VISEU, PORTUGAL)

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Introduction: Ethnopharmacological studies are important for documenting ancestral knowledge and obtaining new phytotherapeutic agents.

Objectives: In order to preserve the traditional knowledge this study aims to identify and collect the medicinal plants used in Mangualde, located in Viseu (Portugal).

Methods: Data were collected using semi-structured interviews carried out with 15 informants, from January 2016 to February 2016. Plants were listed along with their popular name, traditional use, part used and method of preparation. Quantitative

ethnobotanical indices, namely, Use Value (UV), Fidelity Level (FL) and the Informant Consensus Factor (ICF) were also determined.

Results: A total of 33 species belonging to 31 genera and 20 different families were collected. The most represented family is Lamiaceae (25%). Leaves are the most frequently part of the plant used (59%) while infusion is the major form of preparation (80%). Plants cited were used for 26 various medicinal purposes. The largest number of taxa is used to treat digestive disorders (33.6%). According to UV the most important plant is *Melissa officinalis* (0.73). The ICF ranged from 0.50 to 1.00 and values obtained reflect the high agreement between the use of plants in the treatment of diseases of the musculoskeletal system and connective tissue, undefined pains or illnesses, and endocrine, nutritional and metabolic diseases. According to FL, 29 plant species resulted in fidelity levels of 100%.

Conclusions: Plants with high UV, ICF and FL values are good candidates to further phytochemical investigation. A comparison of the results with the literature showed that most of the traditional indications are supported by the available scientific literature data, with the exception of *Mentha aquatica*.

Keywords: Ethnopharmacology. Traditional medicine. Mangualde.

ANTICANCER ACTIVITY OF AVELOZ (EUPHORBIA TIRUCALLI L.)

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Introduction: *Euphorbia tirucalli* L., popularly known as aveloz, is widely used in popular medicine in the treatment of cancers, ulcers, inflammations and warts. The plant produces a toxic latex with corrosive effects on the skin and mucous membranes. Furthermore, high dilutions of this latex have been used in the treatment of tumors, although the mechanisms involved in this antitumoral activity are not yet known.

Objectives: This review aims to discuss the potential anticancer activity of *E. tirucalli* with the identification of the main compounds and mechanisms involved in its biological activity.

Methods: The search was carried out using PubMed and Elsevier updated to December 2015. The search terms were 'Phytotherapy', 'Euphorbia tirucalli', 'Aveloz' and 'Cancer'. The references were chosen on the basis of their relevance to the text. In vitro and in vivo studies were included.

Results: Species of the genus *Euphorbia* present bioactive components such as essential oils (eugenol), aldehydes, latex, tiglane-type diterpenes (phorbol esters) and ingenane (ingenol esters), and tiglane-type diterpenoids (formaldehyde). *E. tirucalli* contains a large quantity of terpenes and sterols among its constituents. According to some studies euphol (tetracyclic triterpene alcohol isolated from the latex of *E. tirucalli*) suppresses breast cancer growth by modulating cyclin D1, p21, and p27 expression. It also induces apoptosis in gastric cancer cells and has been implicated in the altered expression of genes involved in the inflammatory and tumorigenic processes of larynx cancer.

Conclusions: The data indicates the involvement of *E. tirucalli* latex in some cancers; however further studies are needed in order to use the plant in the future as a innovative therapy for cancer.

Keywords: *Euphorbia tirucalli*. Cancer. Aveloz.

11. SAFETY AND QUALITY IN HEALTH

STRESS FACTORS OF FIRST-AID WORK IN PRE-HOSPITAL EMERGENCY SETTINGS

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Introduction: In Portugal pre-hospital emergency the first response is typically assured by firefighters as ambulance crew members, trained with basic first-aid and basic life support and capable of basic emergency assistance.

Objectives: The aim of this research is to identify the main stressful factors that affect this non-differentiated ambulance crew members in pre-hospital emergency settings.

Methods: Quantitative, descriptive and correlational study with 110 participants, using a survey to identify frequent stress factors.

Results: Results have shown that the most stressful factors were: 1st) Presence of family members at the scene ($M = 2.63 \pm 0.99$); 2nd) Fear of being criticized by differentiated emergency support technicians ($M = 2.63 \pm 1.04$); 3rd) Afraid of making mistakes in the execution of a procedure on a victim ($M = 2.63 \pm 1.08$); 4th) Feeling that the work is evaluated by differentiated emergency support staff ($M = 2.57 \pm 0.94$); 5th) Different opinions among members of the firefighters emergency team ($M = 2.55 \pm 0.99$); 6th) Fear of being held responsible for incorrect execution of a procedure on a victim ($M = 2.40 \pm 0.99$); 7th) Presence of differentiated emergency support staff at the scene ($M = 2.16 \pm 1.03$). Spearman's correlation coefficients (ρ) were used to assess relationships between stress factors and the level of self-assurance felt by the ambulance crew members to assist efficiently a victim. Results show that self-assurance has a positive correlation with the fear of being held responsible ($\rho = 0.352$, $p < 0.05$) and a negative correlation with the presence of differentiated emergency staff ($\rho = -0.216$, $p < 0.05$).

Conclusions: Several stress factors derived from the configuration of the emergencies settings were identified. Future research should focus on firefighters emotional burden.

Keywords: Emergency. First-aid. Firefighters. Stress.

EFFECTIVENESS OF PROGRAMS TO PREVENT VIOLENCE TO HEALTH PROFESSIONALS IN THE EMERGENCY DEPARTMENT: A SYSTEMATIC REVIEW

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Introduction: Violence against healthcare professionals is a problem in the emergency departments worldwide. Growing research found that it has negative effects on these professionals such as stress, job satisfaction, competent care, etc. Educational prevention programs seems to reduce the risk of workplace violence, but few emergency departments have them.

Objectives: To determine the effectiveness of programs to prevent violence to health professionals in the emergency department, and to determine the prevalence of those episodes of violence.

Methods: We performed a systematic review following the principles proposed by the Cochrane Handbook. We systematically searched PubMed MEDLINE, Embase and EBSCO from 2006 to 20 June of 2016

(with monthly updates). Two reviewers independently selected articles, collected data from studies, and carried out a hand search of the references of the included studies. For access quality of the studies we used the scale from Centre for Evidence Based Medicine of Faculty of Medicine Lisbon, and the primary outcomes were risk assessment, workplace violence prevention and control.

Results: Preliminary results showed that the workplace violence in the emergency department is well-known and measured in incidence, occurrence, amount and type. The better prevention is to involve individual workers, law-enforcement officials, and health care organizations, to determine vulnerabilities and elaborate preventive programs.

Conclusions: Prevent workplace violence in the emergency department relies in a combination of multiple ideas, standardized interventions that sustain the development of appropriate programs suitable to each context.

Keywords: Violence. Emergency. Nursing. Risk assessment.

HOW TO AVOID THERAPEUTIC ERROR?

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Introduction: Error evaluation is fundamental to have in account the practices of each individual on a team, but also the vulnerability that resides in the structure of the system.

Objectives: To make health professionals aware and identify potential situations of error exists.

Methods: Literature review.

Results: Nurses are responsible for more preventable adverse effects, as they represent a large percentage of human resources. According Fragata and Martins (2004) "Increasingly, the quality is defined by the meeting between the service and the expectation of users, not in quality over an abstract standard but the management of desirable meeting between the level of services and content of generated expectations. "Hence I stress the importance of communication and documentation of the error to benefit the client, family, professionals involved and softening the effects that may arise. To Reason (1990) error often include underlying factors to the management system and organizational culture of quality and safety, while in some organizations the human actions with adverse consequences are attributable only to the individual's behavior. According to the model of accidents and errors, they may occur during any phase of pharmacotherapy (being the illegible handwriting, in preparation for erroneously labeled therapy and the administration for not following the politics of "six right"). The drugs denominated Lasa may have the same phonetics, identical name or appearance that can induce error. **Conclusions:** The primary objective of improving quality goes through the provision of excellence health care, while minimizing the occurrence of errors. The safety of the user is one of the pillars of quality care in health and responsibility of the individuals involved (Ballard, 2003).

Keywords: Therapeutic error. 6 Certainty. Quality care.

COMPETENCIES DEVELOPMENT OF NURSE MANAGERS

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Introduction: The changing profile of nursing profeschanging profile of nursing professionals have been configured historically as a function of dynamic labour market in health, which in turn is influenced

in the economic, social and cultural context. The growing competitiveness of organizations requires a search of health professionals every time with more qualified and enabled professionals. The need to increase assistance, management, research and teaching skills, is gradually incorporated in the professional competencies.

Objectives: To analyse competencies expressed by nurse managers. To identify areas of learning need in management.

Methods: This is a descriptive study of qualitative approach, analyzed 20 interviews with nurse managers. We followed the methodological orientations recognized by Bardin (2009).

Results: From the interviews analysis, the following main categories emerged: professional practices; management of human resources, skills development in nursing; material and equipment resources; formation and development of nursing practice and the improvement of the quality. The findings lend support to the body of knowledge that recognizes the wide range of financial, operational, clinical, and human resource responsibilities of the nurse manager.

Conclusions: The results enhance that today is demanded the nurse manager have a combination of knowledge, attitudes and behaviours that are fluid in its tonic in different types of organizations. We need to construct a plan of professional development for the nurse managers, which is adjusted in competencies and takes technical, ethical-politics, communicative and the development of the citizenship dimensions in consideration.

Keywords: Competences. Nurse manager. Management learning.

STUDY OF CORRELATES OF SOCIAL SUPPORT IN COMMUNITY-DWELLERS OLDER ADULTS

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Introduction: Social support has been widely studied as a major determinant resource of health and well-being, particularly important in older age and in Portugal. In a cross-sectional study that compared social support in older people in seven European countries, Portugal showed the lowest score. Evidence shows that social support is related with socio-demographic and psychosocial variables, therefore there is a need to study more deeply these correlates.

Objectives: The objective of this study is to explore the association between perceived social support and socio-demographic variables as age, gender and level of education as well as with self-rated health (SRH), adherence to medication and negative and positive affect.

Methods: This cross-sectional study used a non-probabilistic sample of community-dwellers older adults, aged between 65 and 99 years old (M = 75.8; DP = 7.28), 201 were male and 327 were female. The instruments used were: a Demographic and Clinical Questionnaire, and the Portuguese versions of the Reported Adherence to Medication Scale (RAM) and the Instrumental-Expressive Social-Support Scale (IESSS), and Positive and Negative Affect Schedule (PANAS).

Results: Younger age, being male, married or with a partner, higher level of education, a positive self-rated health, higher level of positive affect and lower levels of negative affect were positively associated with higher perceived social support. Medication adherence was also found to be positively associated with the different dimensions of social support.

Conclusions: The results of this study can assist health professionals to develop interventions aimed to promote social support in those older adults which seem to be more vulnerable to a lower social support, and therefore more prone to health and mental problems.

Keywords: Social support. Older adults. Correlates.

THE QUALITY AND SAFETY OF COMMERCIALLY AVAILABLE HERBAL DIETARY SUPPLEMENTS WITH MILK THISTLE (SILYBUM MARIANUM)

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Introduction: The use of dietary supplements in Portugal is increasing; however, these products are not subject to intervention from the National Authority of Medicines and Health Products (INFARMED), and can reach the market without proper information, as well as without adequate quality and safety. Milk thistle (*Silybum marianum*) has hepatoprotective and antioxidant activity and is commonly used in herbal dietary supplements for liver diseases.

Objectives: The aim of this study was to evaluate the quality and quantity of information available to consumers on dietary supplements, with milk thistle.

Methods: A descriptive study was conducted, with the collection of dietary supplements with milk thistle from 29 pharmacies of Oporto (Portugal). Products were scored using a standardized data extraction form. The contents of each product were analysed for the presence of legal labeling requirements and compared against standard milk thistle information references. A qualitative assessment of posted drug interactions, contraindications, and adverse reaction warnings was also performed.

Results: A total of 25 products were evaluated in February 2016. In respect to legal requirements, 88% of the dietary supplements fulfilled all the requirements; however, omissions, errors, and potential false claims were detected in the supplements. *Cynara scolymus* and *Taraxacum officinale* were the main plants present in supplements with milk thistle.

Conclusions: Adequate use of dietary supplements is safe and might have benefits. However, in some cases, information present in the products is not enough to protect consumers. By providing reliable information to consumers, the herbal industry can promote safe dietary supplement use.

Keywords: Dietary supplements. Quality. *Silybum marianum*.