



Atención Primaria

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PARALLEL SESSIONS: ORAL COMMUNICATIONS

2nd World Congress of Health Research

Viseu – Portugal, 7-8 October 2014

1. CHILD AND ADOLESCENT HEALTH

FACTORS AFFECTING THE BMI IN ADOLESCENTS ATTENDING THE 2ND AND 3RD CYCLES IN PORTUGUESE SCHOOLS FROM VISEU

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Introduction: Many studies show that the prevalence of overweight and obesity among children is rapidly increasing and developing into a major public health problem worldwide.

Objectives: To assess the Body Mass Index (BMI) in school children from 2nd and 3rd cycles in Viseu schools and identify the sociodemographic, behavioural and educational factors that are related to the BMI.

Methods: This is a quantitative descriptive and explanatory study with a convenience sample of 742 students attending schools of the 2nd and 3rd cycles in Viseu. The study was carried out by means of a questionnaire, which was produced for this study and previously submitted to the approval of the competent authority (DGE) for application in school context.

Results: It was found that some sociodemographic factors were associated with BMI, namely age, school year, practicing high competition sport, being federate in a sport or vegetarian diet. Regarding the educational factors associated with BMI these included only the seminars given at school by specialist in nutrition. Furthermore, a significant relation between BMI and SF was found, where SF represents the school sources of knowledge. Finally among the behavioural factors associated to BMI stood: learning in classes, playing in the open air, reading books and use of internet.

Conclusions: The results reinforce the need of adolescents to practice a healthy lifestyle and the role of family and school in providing the right information to help making right food choices.

Finally in the sample at study the incidence of overweight and obesity was not at all preoccupying, thus indicating that the efforts to provide a good education both at home and at school are adequate and must be carried on.

Keywords: Body mass index. School children. Food education.

QUALITY OF LIFE OF CHILDREN AND YOUNG PEOPLE WITH DIABETES MELLITUS TYPE I

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Introduction: Diabetes Mellitus type I (DMT1) has become apparent in children/young people, a current and worrisome problem due to increasing incidence and prevalence. In addition to its consequences, it interferes with the quality of life (QOL), representing a public health issue.

Objectives: Characterize the QOL of children/young people with DMT1; identify factors influencing children/young people with DMT1 QOL; check DMT1 impact in the QOL of children/young people.

Methods: Systematic review of full text studies, published from January 2006 to June 2014 that included the QOL of children/young people with DMT1, children/young people with DMT1 with no other pathology and their parents, consulting CINAHL, MEDLINE, MediciLatina, Academic Search Complete, Psychology and Behavioral Sciences Collection and Scholar Google, using “quality of life”, “child”, “diabetes”. Studies of children/young people with DMT1 and other chronic illness were excluded. 546 articles have been identified, 11 selected and seven used.

Results: Parents perceive less QOL and greater impact in the life of children/young people than them. Children/young people QOL improve with the insulin pump and severe hypoglycemic crisis and ketoacidosis decrease. Gender and age group influence children/young people QOL. Severe hypoglycemic crisis are related to the parents' fear of hypoglycemia, affecting their and their children's QOL. Young people using complementary and alternative Medicine have better QOL than those using stress relief activities. Children with DMT1 have impaired school performance.

Conclusions: Children with DMTI have less QOL than before the illness. Nurses shall intervene at a social, physical and emotional level with children/young people and their families to help promoting their QOL.

Keywords: Quality of life. Child. Young people. Diabetes. Chronic illness.

BREASTFEEDING CHILDREN WITH CLEFT LIP AND/OR PALATE

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Introduction: Cleft lip and/or palate occur between the 4th and 9th gestation week. It may affect, totally or partially, the lip, alveolar ridge and anterior and/or posterior palate. Breastfeeding, with its known, proven and unquestionable benefits, is possible with these children.

Objectives: Knowing the breastfeeding reality for children with cleft lip and/or palate and their mothers, identifying breastfeeding promoting strategies developed by nurses, knowing if the cleft type interferes with the duration and type of breastfeeding and identifying difficulties felt by the mothers.

Methods: Systematic review of full text studies, published from January 2000 to April 2014, that included how it is to breastfeed these children, breastfed children with cleft lip and/or palate but with no other malformation and/or pathologies, mothers of children with cleft lip and/or palate that have breastfed; consulting CINAHL, MEDLINE, MedicLatina and Psychology and Behavioral Sciences Collection, Scholar Google, using “Cleft lip”, “Cleft palate”, “Child*”, “Breastfeeding”, “Mother”, “Experience”. 679 articles have been identified, 13 selected and eight used.

Results: Children with cleft palate have more difficulty during breastfeed. The exclusive and total maternal breastfeeding occurred mostly on children with pre-incisive foramen cleft. The biggest difficulties were: sucking, swallowing, choking and nasal reflux. Insufficient sucking was the main cause for natural breastfeed substitution. The lack of knowledge of the health professionals regarding these babies’ feeding caused the mothers not to breastfeed. They’ve shown concerns for the baby breathing, swallowing difficulties, colic, nasal reflux and choking.

Conclusions: The breastfeeding of these children should be promoted by nurses.

Keywords: Breastfeeding. Child. Cleft lip. Cleft palate.

HEALTHY FOOD PRACTICAL IN CHILDREN WITH INTELLECTUAL DISABILITIES

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Introduction: Obesity is considered by the World Health Organization an epidemic of the XXI century, associated to feeding practices with scientific evidence. In Portugal, scarce studies about dietary habits among the population with special needs.

Objectives: This work aims to develop children with intellectual disabilities positive attitudes towards healthy food and encourage acceptance of a healthy and varied diet as a way to promote health.

Methods: The study was developed with six institutionalized students, in the 3rd cycle of basic education, with intellectual disabilities and took place in daily school life of a school district

of Portalegre (Portugal). We adopted the methodology of action research. It was featured the eating habits of the students and evaluated anthropometric measurements. The analysis of information allowed us to elaborate and implement an empowerment program, depending on the specificity of each subject. It was developed a new cycle of observation that allowed us to assess the immediate impact of didactic empowerment sequence.

Results: The results point to a favorable change in feeding behavior in the period immediately due to the implementation of the empowerment program.

Conclusions: Environmental factors, in middle school, seem to constitute as high facilitators of change of eating habits. We consider appropriate to implement continuous didactic sequences aimed at empowerment of children with intellectual disabilities to healthy eating practices.

Keywords: Empowerment. Health. Special needs. Alimentation.

LIFESTYLES: PROPELLANTS FACTORS OF OBESITY IN ADOLESCENTS

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Introduction: Although a large collection of results that can identify the causes of obesity is available, it is not an easy task to characterize its etiology. Outstanding among the factors related to overweight and obesity the changes in eating patterns and physical activity, occurred in several societies. About 95% of obesity cases in childhood and adolescence involve exogenous obesity, that is, dependent on environmental factors.

Objectives: To analyze lifestyles and eating factors in school adolescents from the town of Bragança.

Methods and techniques: Observational, descriptive and cross-sectional study with a sample of 281 school adolescents from the town of Bragança, using a questionnaire.

Results: It was found that 63.7% of the young people play sports. Walking is an activity played by 5, 7% of the young people. Most of the teens do few daily meals, have a consumption of products rich in fat (chips) and carbohydrates making meals preferably at home or at the canteen. Family is who, in the opinion of adolescents, more influences their diet (59.40%), while the influence of health professionals nurses and physicians is not significant.

Conclusions: The way as each teenager deals with his capital of health a long life with individual options and defined by DGS as lifestyle is a main question on onset of individual and collective health.

Keywords: Adolescents. Lifestyles. Eating habits. Eating.

PREVALENCE OF OVERWEIGHT IN ADOLESCENTS IN THE 3RD CYCLE

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Introduction: Obesity is a pediatric disease that in the past decade has increased considerably its prevalence. In Portugal 30% of children and adolescents are overweight and it is therefore essential to promote healthy lifestyles, with the practice of a balanced diet, and regular physical activity.

Objectives: To identify the prevalence of overweight and obesity among adolescents 3rd cycle schools in the city of Castelo Branco and implement its referral to the nursing obesity consultation.

Methods: An exploratory descriptive study with a quantitative approach. The sample of schools are students of 3rd cycle Castelo Branco during the triennium 2011-2014. Growth curves (BMI) used were resolved by the WHO.

Results: Of the total number of students (2683), 2071 were evaluated, aged 12 to 15 years. It was found that 17.4% of adolescents are overweight and 7.6% are obese. 135 adolescents are being followed in the nursing obesity consultation.

Conclusions: It was found that over the 3 years the prevalence of obesity is 25%. It is urgent to facilitate partnerships with the school community to promote synergies in a dynamic of mutual gains through health programs for a better quality of life for students.

Keywords: Adolescence. Overweight. Obesity.

PROJECT HEALTHY EATING IN THE SCHOOLS OF PORTALEGRE COUNTRY

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Introduction: Since 2009, several organizations within IPP: Centro Interdisciplinar de Investigação e Inovação do IPP (C31), Escola Superior de Saúde de Portalegre, Escola Superior de Educação de Portalegre, Escola Superior Tecnologia e Gestão de Portalegre, Escola Superior Agrária de Elvas e Serviço de Ação Social, have been developing an intervention to implement healthier eating habits for children and teenagers attending schools in Portalegre County and promote change in eating behaviours among children and their families.

Objectives: To diagnose the nutritional problems and evaluate the intervention on the children and teenagers eating habits.

Methods: 2500 children and teenagers, between three and 17 years of age, from Escolas José Régio e do Bonfim were the sample of this study. The intervention was conducted in three levels of action: in the classroom, by reinforcing health promotion and healthy eating into their curricula; in the school, by defining strategies in conjunction with the school community to promote healthy food choice and, in the community, by raising awareness of parents, teachers and partners on healthy eating habits, emphasizing their responsibility and the need for an active role.

Results: There was an increase of consumption of fruit (3.5%) and vegetables (13.4%) and decrease of the amount of high-energy food on their diet: refrigerants (9.3%); cakes (12.4%); snacks (7.7%). Simultaneously to diet changes, overweight and obesity rates diminished by 0.5% for girls and 0.6% for boys.

Conclusions: Teaching the community about healthy eating habits was effective. Similar initiatives should be considered to promote healthy eating habits of children and teenagers.

Keywords: Healthy eating. Nutrition education. Obesity. Healthy lifestyles.

PAINFUL NIPPLES: CONSTRAINTS AND IMPLICATIONS ON EXCLUSIVE BREASTFEEDING

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Introduction: The benefits of breastfeeding are multiple and already well recognized both in the short and long term and the exclusive practice of breastfeeding until the sixth month of life is recommended by OMS and UNICEF.

Objectives: This study aims to analyse the conditions in the appearance of painful nipples among mothers at the beginning of lactation and its implication in exclusive breastfeeding.

Methods: This is a quantitative, transversal and descriptive-correlational study. A non-probabilistic sample was appointed, by convenience, of 160 pairs of mothers/children. Data collection was performed in two stages. In the maternity ward from 24 to 36 hours following childbirth by means of a self administered questionnaire and the application of the Breastfeeding Observation Form, a UNICEF protocol. Also 15 days after delivery by means of a follow-up questionnaire.

Results: The study revealed a high incidence of painful nipples in maternity (79.40%). The results suggest that the condition which proved highly significant in its appearance was the breastfeeding technique ($p = 0.000$). Other conditions (preparation for childbirth, introduction of teats, conducts in prevention and types of nipple) did not prove to be significant ($p > 0.05$). The appearance of pain in nipples did not bear significant implications for exclusive breastfeeding during hospitalization ($p = 0.150$), however, it was reflected after 15 days, with a very significant connection ($p = 0.002$).

Conclusions: The results of the research allow us to reflect on the importance of the correct breastfeeding technique (namely body posture and the handling of the baby to the breast) in the prevention of pain in the nipples and consequently the promotion of exclusive breastfeeding.

Keywords: Pain in nipples. Exclusive breastfeeding.

PAIN IN CHILDREN: ATTITUDES AND NURSING INTERVENTIONS

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Introduction: Pain in children either as a disease or as a symptom is one of the main families' worries, and not only for ethical reasons, but also for clinical and economic ones, its control is a priority. Pain is, as defined by the Portuguese Association for the Study of Pain (2013), "an unpleasant multidimensional experience. Pain involves not only a sensorial experience but also an emotional one. Due to its complexity, subjectivity and difficulty in assessing and managing pain in pediatrics, this subject should be a reason for reflection and discussion in teams that play their nursing practice with children.

Method and techniques: Descriptive study with an intentional sample constituted by twelve pediatric nurses, using a questionnaire for data collection.

Results: The present study revealed that all nurses in pediatrics assess pain in hospitalized children using children's verbal communication, children's behavior, physiological signs, scales and global observation of children. Results also suggest that 66,7% of nurses express difficulties in the assessment of pain in hospitalized children. To what nursing interventions concerns, we concluded that nurses use both pharmacological and non-pharmacological measures.

Conclusions: nurses recognize the evidence that pain assessment is the first step towards its effective control, and, in caring process children in their integrality, discomfort and pain experienced by children must be considered, aiming a better quality of life of these users.

Keywords: Children. Pain. Nursing. Interventions.

2. EDUCATION POLICIES ON SEXUALITY AND SEX EDUCATION

BEHAVIORAL INTERVENTIONS FOR PREVENTION OF SEXUALLY TRANSMITTED INFECTIONS IN UNIVERSITY STUDENTS OVER 36 MONTHS

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Attributable to sexual risk behaviors, STI, as HIV/AIDS, are a major cause of morbidity in youth. The objective of this work is to evaluate the effectiveness of an educational intervention program to reduce sexual risk behaviors. In this prospective cohort study, a random sample consisted of 1303 students from universities of Portugal's Região Centro, from 18 to 24 years old (18.71 ± 1.20). In the baseline, 69.38% had sexual activity. The average number of sexual partners over lifetime was 2.26 ± 2.49 and 1.31 ± 1.30 in the last 12 months. 72.8% used a condom with a steady partner in the last sexual intercourse, 82.2% with casual partners. 10.2% had some STD in their lifetime. 10.7% had been tested for HIV. 21.6% had sex under the influence of alcohol or other drugs. The study included eight hours of group intervention sessions, with pre-and post-test, and follow-ups at 6 and 36 months. The control group, not intervened, was assessed at baseline and at 36 months. The retention rate exceeded 80%. We used a combination of the AIDS Risk Reduction and the Information Motivation Behavioral Skills models. The major outcomes logistic regression analysis revealed that the intervention group is more likely to use a condom during the last sexual intercourse with a steady partner (ORa = 4.61 males, CI 95% [1.31-16.20], $p = 0.0017$; female ORa = 2.20 CI 95% [1.35-3.58], $p = 0.002$). Viewing the HIV test throughout life, changes were statistically significant (ORa = 7.59, CI 95% [3.33-17.35], $p < 0.001$) in males, and ORa = 3.86, CI 95% [2.51-5.95], $p < 0.001$ in females. Sex with a casual partner in the past 12 months was statistically significant in females (OR = 2.26, CI 95% [1.17-4.37], $p = 0.015$). The results seem to indicate the usefulness of a group intervention of short duration to reduce risk for HIV.

Keywords: Sexual behaviours. HIV. Cohort studies. Youth.

THE IMPACT OF CARING IN THE INTIMACY

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Introduction: Intimacy is sharing experiences and emotions generating reciprocity in partnership in order to promote wellness. The student is confronted with people that need care providence however, simultaneously, should respect factors of individual matter (prudency or complexes), cultural, social and moral, taking conscience that each person is unique, what makes complex the intimacy question.

Objectives: Knowing the school context contributes and teaching/ learning dimensions (clinical learning; group relationships; subjects and scientific/pedagogical resources), as conditions that promote scientific knowledge at the development and construction of the identity and intimacy of nursing students.

Methods: Descriptive-Correlational study, developed in a non-probabilistic intentional and accidental sample, with 131 students of

the 4th grade, from 2 Nursing Schools. The data collect focused in the Inventário de Avaliação dos Contributos do Currículo e Contexto Escolar para o Desenvolvimento e Capacitação dos Estudantes de Enfermagem na Área da Sexualidade, (Rodrigues, Antunes, Loureiro, 2003).

Results: The most part of the inquires said that the clinical teaching had gave them experience to know how to care and invest in the patients and as a way of health and well-being, considering that, at the intimacy development, the relation with other peoples takes a primordial role, giving importance to the clinical learning in intimacy contexts, allowing them to face the patient's body without constraints.

Conclusions: Predominates a model of teaching less relational, without the opening to the diversity of sexual education, mainly at intimacy, it does not promotes personal and interpersonal relationship skills.

Keywords: Intimacy. School context. Nursing students.

WHERE TEENAGERS MAKE LOVE? THE OPINION OF PORTUGUESE NURSES IN PRIMARY HEALTH CARE

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Introduction: The underground, unconfort and anxiety of enviroment where first sexual relation happens, increases urgency and no planification of the moment, and these things can retire the safety, calm and fullness required for the moment. (Andrade,1996; De Luca, 2011). The best would be that any teenager have his first sexual relation with someone affective involved and he or she have sexual conflicts solved and teenagers should have a responsible attitude about anticonceptual methods and STD's. (Andrade, 1996; Miguel, 1997; Brás, 2008). Some studies say that only 21% of boys and 5% of girls have sexual relations at home, the majority have on the beach or in the car and bedroom (Sampaio, 2006; De Luca, 2011).

Objectives: To know the opinion of nurses from primary health care about the place where teenagers have sexual relations.

Methods: This is a quantitative descriptive and explanatory cross-correlated study in a sample of 1735 nurses from Portuguese 226 health centers.

Results: Nurses said that most popular places are: car (42.8%), bedroom (17.8%), beach (18.1%), and field (15.1%). Nurses from Subregion of Health: Faro, Oporto, Setubal, Lisbon, Viana do Castelo, Madeira Island, Viseu and Leiria reported most frequently the beach and the bedroom. Nurses from Lisbon and Algarve Health Region choose bedroom and beach. Nurses from Alentejo, Açores Island, North and Middle Country Health Reagion choose car and field.

Conclusions: The chi-square test suggests statistically significant relationship between the opinion of nurses and the region and subregion health where they work ($P < 0.001$).

Keywords: Nursing. Love. Adolescence. Sexuality. Health.

SEX EDUCATION IN SCHOOLS: WHAT TEENAGERS REALLY KNOW?

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Introduction: In the current framework of guidance considers the obligation to address sexual education in schools in Portugal (Law No. 60/2009 of 6 August, Order No. 196-A / 2010 of 9 April).

Objectives: To identify students knowledge in relation to new legislation and basics of sex education.

Methods: Cross-sectional study with a sample with 530 students from secondary schools of a northern region of Portugal. The assessment protocol includes sociodemographic questionnaire (Correia 2004) and it was applied from October to December of 2011. Data analysis was performed using SPSS. The informed consent was obtain from schools.

Results: The proportion of students who know the current law on sex education in schools is 37.4%, the proportion of female students who know this law is greater than that of males (41.3% vs 32.2%). Exist a statistical significant association between this knowledge and sex ($p = 0.037$), continuing the girls the most informed group. About 30% of students in this sample doesn't identify basic concepts of sexual and reproductive health and family planning neither sexually transmitted infections. In relation to knowledge about contraception also found a statistical significant association with sex ($p < 0.000$), with a higher proportion of knowledge for the female group who also knows more than a contraceptive method (78.7% vs 55.7%).

Conclusions: The weak information of adolescents knowledge about sex education and gender differences still seem to persist in spite of the existence of sex education in schools from Portugal. Maybe sex education should be a subject in a curriculum from a school, being responsible for this subject a teacher that must be specialized in the area of sexuality.

Keywords: Teenagers. Sex education. Knowledge.

3. SEXUAL AND REPRODUCTIVE HEALTH

SANITARY SURVEILLANCE OF MALE CONDOMS NATURAL LATEX SOLD IN THE CITY OF RIO DE JANEIRO, BRAZIL

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Objectives: The increased importance of condom use as a tool to protect men and women against sexually transmitted diseases and HIV infection has raised awareness among health authorities regarding the quality of condoms. One of the main tests for the quality control of male condoms is the insufflation test, which assesses resistance by determining bursting volume and pressure.

Methods: We evaluated 20 brands of male condoms, domestic and imported, from eight manufacturers that are marketed in the city of Rio de Janeiro, Brazil. The condoms were tested 200 units per brand.

Results: All brands met the criteria established in Brazilian National Health Oversight Agency Resolution no. RDC 62/2008, which allow up to eight nonconforming units. However, nonconforming units were identified in 12 of the brands tested.

Conclusions: From a perspective view of Sanitary Surveillance, not as a unit has serious implications for public health.

Keywords: Male condoms. Public health. Sexually transmitted diseases.

VALIDATION OF THE PORTUGUESE VERSION OF MATERNAL POSTPARTUM QUALITY OF LIFE QUESTIONNAIRE - MAPP-QOL

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Introduction: The quality of life has been widely used as a standard measure of health outcomes in different types of research. The postpartum period is a time of remarkable physical, emotional, and social changes, which impact in quality of life.

Objectives: To validate the Portuguese version of maternal postpartum quality of life Questionnaire in first-time mothers.

Methods: The methodology for the validation of MAPP-QOL was developed in four steps: translation, back translation, comparing the two versions and evidence of the validity of the new version. The MAPP-QOL is a self-administered, paper-and-pencil tool that measure mothers' perceptions of QOL during the early postpartum period Likert type scale consisting of 40 items with five dimensions: psychological/baby; socioeconomic; relational/spouse-partner; relational/family-friends; and health & functioning. The non-probabilistic sample was constituted with 278 first-time mothers (inclusion criteria: vaginal delivery, unique new-born term, low risk pregnancy, partner co-habitation).

Results: We point out results that show validity and reliability of the Portuguese version of the MAPP-QOL as a very suitable tool for assessing the quality of life of postpartum women. The psychometric characteristics of the Portuguese version of the scale is comparable to those reported originally by Hill et al. (2006). The reliability of results is reflected by high levels of internal consistency of the MAPP-QOL and the total dimensions, and very good stability in time between the first and second application.

Conclusions: Pertinent results emerge from the validation study that identify real needs and allocation of services to this reproductive health care specific group of postpartum women with implications in their quality of life.

Keywords: Quality of life. Postpartum. Women health.

STUDY OF FACTORS DETERMINING CONDOM USED IN COLLEGE STUDENTS

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Introduction: The use of condoms has been advocated as a means of preventing the transmission of the HIV and other sexually transmitted infections (STIs) for sexually active youths. Behavioural interventions may contribute to reducing the incidence of STIs in three ways, promoting consistent use of condoms, reducing the sexual risk behavior and promote protective behaviors.

Objectives: The aim of this study was to identify factors that may influence condom use (gender, used a condom at 1st sexual intercourse, knowledge, attitude, health beliefs, social support, self-efficacy condom use, sexual risk behavior), to a sample of college students.

Methods: A cross-sectional and correlational study was conducted on a sample 1964 college students, with the mean age of 21 years (20.7 ± 2.3), 77% had sexual intercourse. Data was collected through a self-questionnaire protocol, applied in the classroom. Data were summarized using descriptive and inferential statistics.

Results: Only 40, 5% of students sexually active were consistent condom users. Most participants had a median Knowledge (22.9 ± 5.9 in a 45 score) and a positive attitude (161.8 ± 18.6 in a 196 score) about sexual and reproductive health. Attitudes ($p \# < 0.000$), health beliefs ($p \leq 0.000$), social support ($p = 0.002$), self-efficacy condom use ($p = 0.008$), and sexual risk behaviors including alcohol ($p \leq 0.000$), drugs ($p = 0.002$) and casual partners ($p = 0.008$), were significant factors determining intentions to use condoms. When tested the significant variables in the logistic regression, all variables remained in the model except self-efficacy condom use.

Conclusions: To promote sexual and reproductive health, should give emphasis on changing attitudes, health beliefs, social support and risk behaviors.

Keywords: College students. Condom use. Sexual behaviors.

POSTPARTUM WOMEN SATISFACTION REGARDING NURSING CARE

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Introduction: In Portugal Nursing has specific skills in providing care to pregnant / parturient / postpartum woman. The provision of such care based on practices that aim to approximate the scientific theory of care practice, offering safe and quality care by promoting your satisfaction. The aim of this study is analyze the satisfaction of postpartum women and the importance attached to the nurse work.

Methods: A cross-sectional study with a sample of 150 women interned in the Obstetrics service of a Health Unit of Portugal. Data collection was carried out by researchers in the period February-March 2013. Inclusion criteria: hospitalized postpartum women in the service, the reason being the birth hospitalization. Data were collected through a questionnaire and analyzed using SPSS. Assent was obtained from the Ethics Committee.

Results: Regarding the overall satisfaction of women in a study regarding the care received by nurses, most are satisfied. In the opinion of puerperal functions that best characterize the nursing care include: health promotion (73%), with the technical skills mentioned by 4% of postpartum women. However the level of demand and technical and scientific competence of nurses is considered very high by most women (67%). The importance of the work of nurses for the proper functioning of the inpatient service is advocated by 85% of postpartum women, verifying statistical significant association between satisfaction of postpartum women and the importance attributed to the work of nurses for the proper functioning of the service ($p = 0001$).

Conclusions: The results indicate that the nursing care provided satisfy postpartum women. However this satisfaction is mostly based on empathy of nurses although the mothers have notion of their technical abilities.

Keywords: Postpartum women. Satisfaction. Care. Nurse of role.

SURVEILLANCE OF REPRODUCTIVE HEALTH: EXPERIENCES OF YOUNG GIRLS

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Introduction: Women have assumed greater autonomy in their sexuality, a consequence of reproductive control through family planning and prescription of the pill.

Objectives: Understand meanings assigned by young girls to surveillance of their reproductive health.

Methods: Phenomenological study resorting to semi structured interviews, to 23 girls, from 15 to 24 years of age, customers of the Youth Sexuality Supporting Bureau, of the Portuguese Youth Institute (IPJ), between February and March 2007, and use of the Max Van Manen phenomenology approach.

Results: The theme "Monitoring of reproductive health" emerged in the categories: reasons that led the young girls to an appointment and constraints experienced in the medical consultation. The participants in this study are young students, some of them living uprooted from their social and family environment so it is natural to express the accessibility associated with not being the target of comments on their the Health Centre as favorable in the IPJ. Other reasons stand out as information/clarification of doubts; wishing to start contraception; thinking that the doctor is a gynecologist; feeling more at ease; to be able to do health surveillance. Lack of

training/information on sexuality; feeling uncomfortable; fear of breach of confidentiality associated with the fear of comments was revealed as constraints experienced during medical consultations.

Conclusions: The fear of the breach of confidentiality and privacy, by the young girls, reveal the need there still is to invest in conditions and quality of consultations available to young people. On the other hand, there is the need to clarify the importance and training of the family physician and nurse for the care on reproductive subject, far beyond the gynecologist.

Keywords: Youth. Sexuality. Surveillance. Health.

VULNERABILITY TO SEXUALLY TRANSMITTED INFECTIONS AMONG THE AMAZON WOMEN QUILOMBOLAS PARAENSE

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Introduction: Investigations in Brazil, focusing on Afro-descendants are rare, making it extremely Further studies with this audience.

Objectives: to know the vulnerability to sexually transmitted infections among women Maroons Amazon Pará.

Methods: Cross-sectional study population, descriptive and analytical basis, conducted research of women from households ten remaining Quilombo communities of Santarém, Pará State in the period from October 19 to December 17, 2012.

Results: About Breastfeeding, 93.49% (201) of women Maroons were breastfed. Of these, 88.06% (177) were breastfed for more than 6 months. A percentage 76.28% (164) were exclusively breastfed by their mothers. A small 11.57% (25) installment, but important, revealed having undergone blood transfusion, even some of them occurred before 1993, the year in which the research for HTLV was instituted in blood centers in Brazil. Regarding the use of drugs, 33.33 (72) admitted to having consumed or consume illicit drugs. Regarding sexual behavior, 56.01% (121) of the women had only one partner for life. Regarding the first sexual intercourse, 82.41% (184) said they had started by the age of 18 years. The total of these women, more than half 50.47% (108) never used condoms during sex. The factors evaluated in the behavioral profile were breastfeeding, blood transfusion, drug use and sexual behavior.

Conclusions: Although most women claim not present risk behaviors described in the survey, there are women who are still vulnerable to HTLV, making necessary health education.

Keywords: Vulnerabilities. Women's health. Sexually transmitted infection.

4. FAMILY HEALTH

RESILIENCE OF FAMILIES WITH HANDICAPPED CHILDREN

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Realizing the fact that despite having a disabled child and for families that constitute a painful experience, they are able to respond positively to adversity that arise and offer risk to its homeostasis, demonstrating resilient families are afforded the preparation of this study whose objectives were: to determine the levels of resilience of families with disabled children, to analyze factors that may interfere with the levels of resilience of families with disabled children and check if there are differences

between the levels of resilience of families with disabled children and families with children with serious health problems or conical. The method used in the study was a quantitative and descriptive-correlational and not experimental type. Data were collected from an accidental non-probabilistic sample of parents/families of children with disabilities or serious or chronic diseases, which constitute the two groups of households (with and without disabilities) in our sample, followed by consulting a Department of Pediatrics totaling one hundred and eighty-six. The data collection instrument used was a questionnaire. Based on the data we found that these families mostly have average levels of resilience, with no record of low levels of resilience. The family resilience is not related to family characteristics, the characteristics of the disability, family and social support available, relating only to one of the dimensions that integrates family functioning, family satisfaction. Comparing the resilience levels of the two groups of families, we found no significant difference.

Keywords: Resilience. Family. Family resilience. Disability.

ADOPTIVE PARENTS PARENTAL CONCERNS

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Knowing the families in its multiple aspects is an intrinsic task of nursing care. It is essential listen to parents and define the changes to be implemented from what is felt by them as a complaint or restlessness. The concern for their children manifests itself usually through a complaint or concerns about the child. Adoptive parenthood is a different way to access parenting and being a mother or adoptive father brings other challenges and some more specific problems. This study aims to identify the parental concerns of adoptive parents and to identify which characteristics of these parents and adoption process can be associated with it. A descriptive cross-sectional study was developed. Data were collected from a snowball sample comprised of 18 adoptive families: 2 single adoptions and 16 joint adoptions or per couple, through a questionnaire that was sent by e-mail, which the Parental Concerns Scale (Algarvio and Leal, 2004), was part of. Based on the data found that the greatest concern of these parents are situated at the level of school problems and family concern, expressed on the concern if the child has what's need in school and if the teacher understands the child. These concerns are observed with parents aged between 35 and 39 years old, who had adopted children who are currently in school age and without special needs. It is allied to these features that the adoption has been motivated by the desire to increase family integrated into a life project.

Keywords: Adoption. Adoptive parents. Parental concerns.

PREVENTION PROGRAMS AND GENDER EFFECTIVENESS: A STUDY OF STRENGTHENING FAMILIES PROGRAM

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Introduction: Worldwide, WHO researchers (Degenhardt, et al, 2008) report that men are more likely than women to use cocaine, cannabis, tobacco, and alcohol. The use of prescription

drugs is more prevalent among females. Because our culture place different expectations on girls than boys, gender has been a protective factor for substance abuse among females. However, this gender gap began narrowing in adolescents in the mid-1990's. Speculations concerning reasons for increased use in girls include: Girls substance use appear to be more influenced by their family (CSAP, 2000; Kumpfer, et. al., 2008), the breakdown of families, changing social roles and the media (Kumpfer & Magalhães, in press). An analysis of all evidence-based substance abuse prevention programs worldwide found that few programs conducted gender analyses.

Methods: A gender analysis for the Strengthening Families Program (SFP) which is one of the most effective prevention programs. An archival SFP 6-11 Years database (n = 1,700) was analysed using statistical analyses employing 2 x 2 ANOVAs compared the 21 outcomes for girls versus boys (including pre- and post-test means, SDs, mean changes, F-values, p-values and Cohen's d effect sizes).

Results: Statistically significant positive results were found for 19 of 21 outcomes. Effect sizes were somewhat larger for girls than for boys such as, for improvements in Parental Involvement (d. = 0.52 vs 0.37); and Positive Parenting (d. = 0.63 vs 0.54).

Conclusions: The results suggest that SFP was equally effective for girls as for boys and on some outcomes even more effective for girls. Since the research base is very limited, it does point in the direction of the necessity of a gender-attentive approach.

Keywords: Gender. Strengthening families program. Prevention program.

POSITIVE ASPECTS OF CARING AND SOCIAL SUPPORT IN INFORMAL CAREGIVERS OF PERSONS WITH DEMENTIA

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Introduction: Dementia is characterized by the loss of cognitive functions that hinder the ability of life in community (Fernández, 2010) and leads to dependence in ADLs (Gratão et al, 2010). Emerges the figure of the informal caregiver, who is a pillar in the life of the dependent person (Sánchez e González, 2010). According to Miller and Powell Lawton (1997 cited by Semiatin and Connor, 2012), the great focus given to negative aspects of caring obscure the existence of positive aspects. Inserted in the Erasmus program, a stage was developed at the Asociación de Familiares de Enfermos de Alzheimer y otras Demências de Galicia (AFAGA).

Objectives: To know the most valued positive aspects of caring, as well as caregivers' perception about the received social support.

Methods: Correlational study with a questionnaire including caring positive aspects and perceived social support scales to 86 carers of people with dementia.

Results: Caregivers had an average of 55.99 ± 11.43 years of age, were mostly female, married and children of the cared person. The most valued positive aspects were: to feel good about oneself; greater appreciation of life; greater sense of utility. It was found that the higher the perception of family support, the higher the perception of friends' support (p = 0.013) of other supports (p < 0.001) and global social support (p < 0.001). It was still concluded that as caring positive aspects perception increases, increases the perception of friends support (p = 0.011), other supports (p = 0.014) and the perceived global of social support (p = 0.004).

Conclusions: Data allow us to conclude on the importance of social support in the perception of positive aspects of caring.

Keywords: Dementia. Caring positive aspects. Social support.

THE PROCESS OF DECISION-MAKING IN FAMILIES WITH FAMILIAL AMYLOID POLYNEUROPATHY (FAP)

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Introduction: This research explores and describes a genetic disease's impact on the family.

Objectives: To understand the process of decision-making in families with genetic disease; to develop the theoretical model of experience of decision-making in families with FAP.

Methods: A qualitative study, using symbolic interactionism as theoretical reference and Grounded Theory as methodological option.

Leading questions: How do families with FAP perceive the illness experience? Which decisions are made during development of the disease? What changes in family members as decisions are made? What do family decisions result in? Data collection was conducted through interviews applied to 19 families, totaling 43 members interviewed. Each family defined who the participants of the interview were. The study took place between February 2010 and September 2013.

Results: The theoretical model -"Basing the family's decision-making process in the co-construction of the self"- emerged from the comparative analysis of results. This model explains concepts and their respective properties, in a dynamic process that reflects the decision-making of families with FAP over time and development of the disease. Conditions, strategies, consequences and contexts of experience are highlighted, providing understanding of the interaction and meanings that families internalize in the illness cycle interface.

Conclusions: Experiencing illness does not simply reflect the biomedical disease process, it combines values and expectations, both individual and collective. This study's worth is giving the scientific community these families' perspective on decision-making taken place during the PAF genetic disease process.

Keywords: Family. Decision-making. Family amyloid polyneuropathy. Genetics. Nursing.

BURDEN AND AWARENESS OF INFORMAL CAREGIVERS SOCIAL SUPPORT IN AVEIRO, PORTUGAL

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Introduction: The social support networks have proved an important variable to measuring life quality. Studies on this topic indicate that people who are part of a social network that provides support when they experiences painful events, feel less intensely stressful situations. The social support networks correlate with a lower incidence of physical and mental illnesses. In cases of families with disabled family members, networks of social support may contribute to improving the well-being of caregivers.

Objectives: 1) Analyse the relations between burden and the benefits of social support in informal caregivers. 2) Verify amongst male and female caregivers which them perceive social support best.

Methods: The survey was conducted between the months February to April 2013. Quantitative study, with sample of the 30 informal caregivers. We used a sociodemographic questionnaire, questionnaire overload informal caregivers (QASCI) and scales of social provisions (EPS).

Results: About the relationship of overload and social support, the results reveal no significant gender difference within the intimate and casual support respectively ($r = -0.064$; $r = 0.132$).

The dimensions of social support in intimate and casual support the results also point to a negligible difference between the sexes. The intimate support (male $M = 46.57$; women $M = 48.45$). Casual support (male $M = 23.71$; women $M = 24.48$).

Conclusions: The need for future studies to explore specific dimensions including congruence and how these depend on the relationship between social support and overhead.

Keywords: Overload. Informal carer. Social support.

INFORMAL CAREGIVERS OF DEPENDENT OLD PEOPLE: DIFFICULTIES AND SELF-EFFICACY

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Introduction: Taking care of elderly at home is not an easy task and involves physical, psychological, social and economic consequences for which the informal caregiver is not often ready, and in an attempt to fulfill his role, he compromises his well-being and his household.

Objectives: To assess the difficulties faced by informal caregivers in the municipality of Mirandela and the level of self-efficacy for the performance of his role as caregiver.

Material and methods: Descriptive, analytical and cross-sectional study, applying a questionnaire to a non-probabilistic sample of 50 informal caregivers which included the Barthel and Lawton & Brody indexes to assess dependency of the elderly and the Carers' Assessment of Difficulties Index (CADI) (Nolan, Grant, & Keady, 1998, Brito, 2002) and an adaptation of "The Revised Scale for Caregiving Self-Efficacy" developed by Mata (2012).

Results: Among caregivers prevailed the married women, daughters of dependent elderly with low education and with an average age of 57.04 years? We also conclude that caregivers showed average scores higher than the theoretical average in the global Index of difficulties and in every factor. Regarding self-efficacy, it was concluded that caregivers showed to have average levels in the global of scale and its dimensions, except in self-efficacy to obtain respite with the social network of friends where the evidenced levels were low. There was also a negative linear relationship between self-efficacy and difficulties, revealing that the higher the level of self-efficacy the lower are the perceived caregiver's difficulties ($\beta = -0.438$).

Conclusions: Results lead us to the need of more health, social and educational support both to informal caregivers and the cared person.

Keywords: Informal caregiver. Difficulties. Self-efficacy.

THE SOCIAL SUPPORT NETWORK IN HEALTH SELF-CARE, THE USERS WHO USE THE HEALTH SYSTEM BAIXADA SANTISTA SP- BRASIL

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Introduction: The Social Support Network corresponds to an interpersonal context that can be understood as the sum of all the relationships that a person perceives as significant or differentiated, that involve people with who maintains regular interactions.

Methods: The goal was to understand the meaning of the Social Support Network (self) care of patients who attend the variety of services and procedures of Metropolitan Health System Santos (Santos, SP - Brazil), with reference to the therapeutic itinerary.

With 102 user's (men and women) of public and private health systems, over the age of 17 years (in good health at the time of collection). Through audio-taped interviews with open and closed questions, in the Public Health Service Units of the municipality, in public places and through the internet. The qualitative data analysis considered the categories of Social Support Network, therapeutic itineraries and self-care program inserted into the Sphinx Brazil. For quantitative analysis of the data clusters SPSS software was used.

Results: Social Support is a reciprocal process - generates positive effects for both those who receive as to who provides the support. Research has shown that men and women receive more instrumental support, followed by emotional support. The first function of women in SSN is (56.5%) solidarity and men (40%) autonomy. In general, the structure of the SSN (weak) does not provide adequate support and may increase the vulnerability and to promote the appearance of physical and emotional diseases. However, the situation that the more active RAS is the "disease". This is when one of the people who comprise the network has some malaise or falls ill, 'almost always' someone is mobilizing to help her.

Conclusions: The SSN can expand people's autonomy.

Keywords: Social Support Network. Care/self care health.

5. MENTAL HEALTH

THE PERSON ON CHRONIC HAEMODIALYSIS TREATMENT: INFLUENCE OF "SELF-ACTUALIZATION" IN ACCEPTING DISEASE

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Introduction: This study of the emotional state of the haemodialysis (HD) patients, evaluates the success, or not, to feel acceptance and value, becoming fulfilled itself, although the incapacity, dependency and uselessness feelings that the illness causes.

Objectives: To assess the relationship between the emotional state related as acceptance and the level of self-actualization that the haemodialysis patients.

Methods: This is a quantitative descriptive and explanatory cross-correlated study of 150 adults' haemodialysis patients. We selected two scales to assess the phenomena in question: "Acceptance of Illness Scale, Felton's, 1984, and the "Self-Actualization Scale", Guerra, 1992. The statistical tests had been based on the application of the coefficient of Pearson's correlation, analysis of variance ANOVA, T test and Levene's test.

Results: The majority of the sample is constituted by men (62%) and the average of ages is about 52.7 years old. We found a moderate positive correlation ($r = 0.40$) and statistical significant ($p < 0,001$) between the changeable self-actualization and the changeable acceptance of the illness, allows us to infer that an increase in the self-actualization levels permits the increase of the acceptance and vice-versa.

Conclusions: From all the results we can infer, with significant statistics that how much bigger it will be the self-actualization biggest will be the acceptance of the illness. The person on haemodialysis treatment, it is collated with limitations in its daily life but it must react searching a direction for life, a reason that makes it move and not adopt a state of passive resignation. The health professionals can help it in this process of development of its potentials, necessary and positive to its accomplishment as person.

Keywords: Acceptance. Self-actualization. Illness. HD.

EVALUATION OF ACCEPTANCE OF CHRONIC DISEASE: A NEED OF HEALTH PROFESSIONALS

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Introduction: Acceptance means recognizing and understanding the limitations and losses caused by the disease, being instrumental in the adaptation of the individual to the disease.

Objectives: In this study we analyze the acceptance of the disease, translated by some type of disability in individuals with chronic disease.

Methods: This is a quantitative descriptive and explanatory study in 210 patients on hemodialysis and 53 diabetic patients, in Portugal. The acceptance was evaluated using the Acceptance of Illness Scale (AIS), (Felton, 1984), with only eight items and which directly focuses on the extent of acceptance of the disease, and analyzed their reliability. **Results:** The AIS is a scale to measure reliably the acceptance of the disease because it has good internal consistency (Cronbach's $\alpha = 0.794$). In descriptive statistics obtained for the behavior of the two samples, we find that the minimum and maximum values observed (10-40) are within the expected range (8-40). We observed no statistically significant differences in outcomes for the two groups analyzed. The hemodialysis and diabetic sample exhibit moderate levels of acceptance of the disease, respectively on average, 22.76/26.93.

Conclusions: Regardless of the disease and the impact of your treatment, your acceptance is crucial in the adaptation process, by which healthcare professionals should consider as a positive variable, it is important to review the chronically ill.

Keywords: Acceptance. Chronic illness.

THE INFLUENCE OF EDUCATION IN THE QUALITY OF LIFE OF PATIENTS WITH SCHIZOPHRENIA

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Introduction: The psychological and behavioral attitudes of the person with schizophrenia can hinder the social integration of the individual due to the constant isolation from other people. In this context, the occupational performance for leisure such as, work, study activities, becomes compromised. In education, it is important to consider that this may be harmed due to higher incidence of disease symptoms which should be noticed during the period of schooling.

Objectives: To understand the influence of education on quality of life of patients with schizophrenia.

Methods: We seek through a literature review, to analyze articles that address the quality of life of patients with schizophrenia. To selection of the articles were considered the factors: schizophrenic patients treated in mental health services and medically stable and publications from 2005 to 2014. Databases were used The Medline, Lilacs and SciELO. Eighteen articles were analyzed, and only six showed relationship of quality of life with the level of education.

Results: We found different answers to the relationship between education and quality of life as: less level of education, with worst quality of life; higher level of education with better quality of life; higher level of education with poor quality of life.

Conclusion: However, one realizes that education can influence in some way in the quality of life; and that there is no consensus on the relationship between education and quality of life of patients with schizophrenia. It should be considered that the articles analyzed were not focusing on education.

Keywords: Schizophrenia. Education. Quality of life.

SLEEP DISORDERS IN SHIFT WORKERS. SYSTEMATIC LITERATURE REVIEW

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Introduction: Currently, there is a need for different teams to work on a shift rotation system to ensure the work over 24 hours. Shift work can, in the short and long term, cause disorders of the circadian rhythm due to forced changes in sleep-wake cycle.

Methods: Systematic literature review made between April and July, 2014. We used EBSCO, PubMed and Portuguese Scientific Repository, scientific data bases. The DeCs and MeSH were the descriptors used for locating and selecting the studies: "Sleep Disorders", "Shift Work", and "Sleep disorders circadian rhythm" and the research question "What variables influence sleep disturbances in shift workers?" as well as our research goal "study the variables that influence sleep disturbances in shift workers. From 3192 studies, 36 were used for its moderate and high methodological quality with a score over 12 points and with a evaluation grid about qualitative research over 75%, described by CEMBE, FML Carneiro & Bugalho (2004) and by the adapted version from Crombie (1996, quoted by Steele et al., 2003). Inclusion criteria were based in Method, Participants, Interventions, Results, Conclusions and Practical Implications.

Results: The age and gender influence the quality of sleep in shift workers. The shift-schedule and their rotation type are variables that determine the willingness of these workers to acquire sleep disorders.

Conclusions: It is undeniable how shift work can cause consequences in professional, personal, familiar and social life of individuals which are forced to work in irregular schedules.

Keywords: Sleep disorders. Circadian rhythm. Shift work.

REPRESENTATIONS OF THE PSYCHIATRIC CONTEXT IN NURSING STUDENTS

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Introduction: Developing critical-reflective skills in students should constitute a challenge in the teaching process.

Objectives: To identify concepts / representations associated to the context of psychiatry in students in the 4th year of the Nursing Course (CLE).

Methodological procedures: Qualitative approach. We used records of group dynamics from students of the 4th year of the CLE Unit - Integrating the Clinical Practice of Mental Health and Psychiatry in the academic year 2013/2014. We selected a random sample of 94 students and proceeded to do document analysis, from the resulting dynamics, through content analysis, focusing the analysis on concepts (mentally ill patient, psychiatry, psychiatric nursing) at the beginning and end of the unit.

Results: In the first round, the representation of the mental patient emerges as alienated, crazy, different; psychiatry being associated with aggression, fear and stigma and nursing with monitoring, discovery and evolution. In the 2nd round, the concepts change and are focused on knowledge associated with the experience where clinical practice takes place. The representation of the mental patient emerges as a result of imbalance, diagnosis and exhaustion; psychiatry being associated with relationship, learning, understanding and nursing with communication, stimulation and challenge.

Conclusion: The group dynamics leading to the identification of concepts/ representations are a means of coming to understand and transform context approaches, modifying teaching strategies by focusing on the learner.

Keywords: Learning. Mental Health Services. Nursing.

QUALITY OF LIFE OF INFORMAL CAREGIVERS OF THE MENTALLY ILL

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Introduction and objectives: With the return of the mentally ill to their communities of origin, the informal caregiver assumes an increasingly dominant role. The caregiver's quality of life becomes an important factor. Thus the objectives of this research were to assess the quality of life of the caregiver, analyze the relationship between the sociodemographic and professional factors and quality of life, determine to what extent the variables Subjective Well-Being, Overload and Age of the Mentally Ill are predictors of quality of life. **Methodology:** This research is based on a quantitative descriptive and correlational, by use of a questionnaire and scales: WHOQOL-Bref, ZARIT e PANAS. These instruments were administered to 104 informal caregivers of DPSPM do CHCB, EPE from 19 December 2011 and January 20, 2012.

Results: The informal caregivers with better quality of life are: females, between 23 and 36 years, married, with higher qualifications and have employed in charge of brother/sister. The results also indicate that the variables patient age, overload, subjective well-being, perceived self-efficacy, impact of care and interpersonal relationships are predictors of quality of life.

Conclusions: Caregivers who obtain lower the rates of the variables (patient age, overload and subjective well-being) and higher rates of variables (perceived self-efficacy, impact of caregiving and interpersonal relationship) have a better quality of life.

Keywords: Quality of life. Informal caregiver. Mentally ill.

ANXIETY, DEPRESSION AND STRESS IN CHRONIC PAIN PATIENTS

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Introduction: Pain is the most common physical condition symptom reported. Medicine has evolved in developing solutions for acute pain but not for chronic pain, with several physical, mental and even economical consequences for its patients, with 30% of adult population spending in average 4611 million euros per year. Therefore, prevention and treatment of chronic pain is one of today's most important concerns.

Objectives: To understand the extent to which the dimensions anxiety, depression, vulnerability to stress, intensity and pain-related disability, affects patients with chronic pain.

Methods: A sample of 53 patients who attended Chronic Pain Unit at Coimbra Hospital and University Centre, aged 25 to 86 years, was used, and applied the Hospital Anxiety and Depression Scale (HADS), Vulnerability to Stress Scale (23QVS), Pain Disability Index (PDI) and the Visual Analogue Scale (VAS).

Results: Results showed that 71.7% of patients suffer from anxiety disorders and 39.6% of mood disorders and when compared with the normal population, they present levels of anxiety and depression well above. Also, 77.4% of the sample is vulnerable to stress, with higher prevalence in less educated. The areas of sexual activity

and occupation are the most affected and pain intensity is higher in women. The higher levels of anxiety, the higher depression and stress vulnerability. Relations between perfectionism and intolerance, frustration, rejection, deprivation of affection and other dimensions were also found.

Conclusions: It's clear the relations between the different components here related to chronic pain. This way we aim a better understanding of chronic pain in order to contribute to enhance life quality and well-being, whether regarding assessment or long-term monitoring.

Keywords: Chronic pain. Anxiety. Depression. Stress.

MEMORIES OF FATHER AND MOTHER ACCEPTANCE AND REJECTION ATTITUDES AND DEPRESSIVE SYMPTOMS IN ADULTHOOD

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Introduction: The positive impact of the dimension of parental acceptance and the negative one of parental rejection attitudes on development has been extensively analysed in the scope of the Parental acceptance-rejection theory (PART Theory, Rohner, and Khaleque, 2008), that aims to extended the evidenced already gathered in childhood and adolescence to other stages of lifespan. **Objectives:** The aim of this study is to characterize young adults' memories of mother and father acceptance and rejection and its relation with depressive symptoms.

Methods: The research was developed in a sample of 180 Portuguese university students and the instruments used were the Adult-PARQ Father (short form) (Rohner, 2004), the Adult-PARQ Mother (short form) (Rohner, 2004) and the Center for Epidemiologic Studies Depressive Scale (CES-D) (National Mental Health Institute).

Results: The preliminary results evidenced that memories of mother and father acceptance do not correlate statistically significantly with scores of the depressive symptoms scale. However, memories of father hostility and memories of father indifference are correlated in a statistically significant way with depression scores. The same result was obtained when memories of mother hostility was considered but not when memories of mother indifference was analysed.

Conclusions: Results evidence the long-life impact of parental rejection attitudes and the importance to consider different dimension of this dimension and the differential influence of mother and father. **Keywords:** Parental acceptance and rejection. Memories. Depression in adulthood.

6. ADULT HEALTH

HEPARIN VERSUS 0.9% SALINE FLUSHING TO MAINTAIN PATENCY OF CVC IN ADULTS - A SYSTEMATIC REVIEW OF PATIENT SAFETY

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Context: In the maintenance and optimization of central venous catheters (CVC) controversy persists about the recommended solution to maintain patency. The use of heparin solution has

been the most used method, dating back to the 70s. However, its traditional use seems to have concealed its negative effects. In this matter, several studies suggest that saline flush is cost-effective, appropriate, with the benefit of not having the adverse effects of heparin. So we are compelled to think: It makes sense to use heparin taking into account their risks and benefits?

Objectives: To determine if saline flushing is safer than heparin flushing to maintain patency of CVC in adults.

Methods: We perform a systematic review and meta-analysis following the principles proposed by the Cochrane Handbook. The critical analysis, extraction and synthesis of data were performed by two investigators separately and statistical analysis performed using RevMan 5.3.3.

Results: We included two randomized controlled trials involving a total of 1511 patients. The results of the meta-analysis indicates that the heparin group had significant differences and higher risk (up to eight times) to develop complications related to thrombocytopenia (RR = 9.02, 95% CI = 1.08-75.71; p = 0.04).

Conclusions: The heparin solution constitutes per se a factor that increases the risk of develop complications related to thrombocytopenia. On the other hand, saline flushing does not increase that risk and several studies prove that is sufficient to maintain the permeability of the CVC. In this meaning we suggest the realization and implementation of a new guideline that ensures the use of saline solution to maintain the permeability of CVC, preventing the risks associated to the administration of heparin.

Keywords: Catheterization. Central venous. Heparin. Sodium chloride. Vascular patency.

PRIVACY IN HAEMODIALYSIS PATIENTS: A DESCRIPTIVE, EXPLORATORY STUDY

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Introduction: Nurse are professionals in constant contact with the patient during haemodialysis treatment, it is essential to state in detail about his conduct in preserving patient's privacy in care to ensure it, contributing to his welfare, to which everyone is entitled.

Objectives: Highlight studies that allow to know the perspective of the users / nurses of maintaining privacy in the provision of special care.

Methodology: Survey of empirical studies published between January 2000 and January 2012, and selected through the methodology PICOS with criteria inclusion / exclusion previously identified six relevant studies that allowed aggregation in four dimensions.

In the perspective of users: The absence of physical protection equipment of privacy, breach of confidentiality of information / communication wards, the nurses' perspective: the need to use protective equipment failures privacy bridging the physical structure of the units face with "normality" "necessity of invasion of privacy of the user.

Conclusions: The nurses are, inevitably, a position that can influence the privacy that this should be an essential component of their professional action.

Keywords: Privacy. Nursing.

THE THERAPEUTIC ITINERARY (TI) FROM USERS OF SANTOS (SP, BRAZIL) HEALTH SYSTEM

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Introduction: Therapeutic Itinerary (TI) is a set of plans (trajectory, path, choices) and individual and collective actions that succeed and retreat in an attempt to solve the problems of health/illness, which include therapeutic practices, demand for health care with yourself and with others, movements to preserve or restore health, as well as the subjective and symbolic dimensions of social support in relationships that permeate throughout this journey.

Methods: The goal was to understand the meaning of the Social Support Network care (selfcare) of patients who attend the various of services and procedures of Metropolitan Health System (Santos, SP-Brazil), with reference to the TI. With 102 users (men and women) of public and private health systems, over the age of 17 years (in good health at the time of collection). Through audio-taped interviews with open and closed questions, in the Public Health Service Units of the municipality, in public places and through the internet. Qualitative data analysis: categories of Social Support Network, TI and self-care program inserted into the Sphinx Brazil. Quantitative data analysis: clusters SPSS software.

Results: Were analyzed: quality and structure of the Social Support Network (size/proximity/emotional connections); autonomy (Construction of IT); disease prevention (care and self-care). Categorized by mechanism of care, actions, use of available resources and explanation of health. Showing that the 'feel bad' women and men to the principle 'do nothing', then use the resources available and only 'if symptoms worsen' is seeking the formal health services.

Conclusions: People seek ways different ways in different events of the disease, with different attitudes within the same disease process.

Keywords: Therapeutic Itineraries. Social Network Support.

A STUDY OF GENDER AND CONJUGALITY IN PORTUGUESE RETIREES

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Introduction: The growing aging population observed in developed countries is a major challenge for today's societies. Alongside this process, the increasing longevity also verified leads to individuals remaining a greater number of years retired, with implications both socially and economically. Retirement is a life cycle transition that influences health and well-being of people, exposing them to different states of vulnerability. In Portugal, the diagnosis of this vulnerability is small and the perception of this transition remains unknown by gender and conjugality.

Objectives: This project aims to characterize vulnerabilities, resources and strategies used by the recently retired Portuguese in adjusting to the retirement process, describing how this transition is perceived by gender (as an individual subsystem) and conjugality (as an interaction between the marital subsystem).

Methods: This project will use both qualitative and quantitative methodologies. There will be conducted focus group, interviews and questionnaires will be administrated.

Expected results: In the end of the project we will be able to understand the perceived vulnerabilities and strategies adopted by the recently retired in Portugal, how women and men are affected

by the transition to retirement and if gender differences are a strength or vulnerability in this transition, what means retirement from the perspective of women and men and, in the context of marital system if it is different when it is the woman to retire first, when is the man the first or when is simultaneously.

Conclusions: This is an innovative project in Portugal and we are expecting the results of the next phases of it.

Keywords: Retirement. Health. Gender. Conjugality.

This abstract is a result of a project denominated by "Active Retirement": study of a healthy ageing promotor program - REATIVA (PTDC/MHCPSC/4846/2012), funded by the Fundação para a Ciência e Tecnologia, the Portuguese Government and the European Union.

FUNCTIONAL INCAPACITY OF AGED AFTER THE BREAKING OF THE SUPERIOR EXTREMITY OF THE FEMUR

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Introduction: Aging is the passage of time, not a disease, being a natural and physiological. In the elderly, fractures of the upper end of the femur, is a serious problem due to the high disability that causes and its consequences.

Objectives: To identify the extent to which socio-economic variables, clinical and family functioning influence the functional disability after fracture of the upper end of the femur.

Methods: We conducted a cross-sectional study, analytical and comparative, using a quantitative methodology, using for this purpose a non-probabilistic sample of convenience consisting of 60 seniors in the municipality of Viseu with fracture of the upper end of the femur to 6 months. The measuring instrument was a questionnaire, the Family Apgar Scale and Modified Barthel Scale. **Results:** The study population was predominantly female, with a mean age of 78.5 years, married, residing in rural areas. Have qualifications as the 1st cycle of studies, without institutional support and low income. At the end of six months after fracture of the upper end of the femur, we found that 40% of patients are independent functional capacity, 33.3% have a high dependence, 16.7% and a moderate dependence only a fraction has a degree of dependence low (5%) and high (5%). The variables that significantly influenced the functional capacity are: age, marital status, education, institutional support, economic status, type of surgery and rehabilitation.

Conclusions: The variables that most influence the functional capacity are: age, in that with increasing age decreases the functional capacity, rehabilitation, where patients, how many more sessions do more rehabilitation improves functional capacity.

Keywords: Elderly. (In) Functional capacity. Fractures.

IDEALIZATION OF FUTURE LIVING AFTER RETIREMENT: THE PERSPECTIVE OF REATIVA PARTICIPANTS

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Introduction: Retirement is a transition event characterized by an experience of adapting to change. Retirees can be exposed to different states of vulnerability that may interfere with their active and successful aging. The project REATIVA aims to build a health promotion program, in primary health care, directed to individuals

and families who are in a phase of the life cycle of middle age and experiencing a process of adaptation to retirement.

Objectives: To identify the idealizations of future living of individuals who experience a process of adaptation to retirement in Portugal.

Methods: Descriptive and qualitative study, using the methodology of focus group. 18 focus group were conducted with individuals registered in functional health units belonging to the Regional Health Administration – Center that fulfill the condition of “being retired for less than five years”. Data was analyzed using NVivo 9®.

Results: The idealization of the future experience was one of the emerging themes. The retirees talked about their auto perspective, the external perspective and gave suggestions for future retirees. In their auto idealization the following sub-themes emerged: Optimism, Uncertainty, Dependencies, Belief, Fear and Worry. The external perspective for the idealized future made the following sub-themes emerge: Opportunity obstruction and Preparation for the end of life. The subtheme Suggestions for future retirees reported to indications that participants proposed towards future retirees, such as: “Keep life goals”, “Do what you love”, and “Preparing for change.”

Conclusions: Portuguese retirees have an optimistic vision of the future although they are worried about the economic crisis. They are not prepared for retirement and that interferes with their health.

Keywords: Retirement. Health promotion. Primary health care. This abstract is a result of a project denominated by “Active Retirement”: study of a healthy ageing promotor program - REATIVA (PTDC/MHCPSC/4846/2012), funded by the Fundação para a Ciência e Tecnologia, the Portuguese Government and the European Union.

MEN'S HEALTH AND THE IMPLICATIONS OF REDUCED USE OF HEALTH SERVICES, AMAZONIA-BRAZIL

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Introduction: The adherence of man to health services has been widely discussed on the world stage. In Brazil, was launched in 2008 the National Health Policy of Man, who keeps a close bond with primary care and was created to fill a gap in primary care this much time: the absence of a specific care to males.

Objectives: To investigate and describe the motives of poor adherence of man to the health services available in our country.

Methods: For this purpose, we carried out a qualitative study involving 30 subjects aged between 20 and 40 years, who expressed interest in participating in the study, signing the Instrument of Consent. For data collection took place a semistructured interview, which was recorded and performed in time and place chosen by the interviewees.

Results: The main impediments to adherence of man to health services factors are: lack of disclosure of services targeted to men, lack of time due to work, neglect their health, self-medication, feelings of invulnerability, embarrassment, issues related to care, lack of interest, culture and home measures.

Conclusions: We can see the need to establish measures for coping with male cultural obstacles that interfere with your health and wellness. One of the strategies would sensitize the population generally provided child care, child development and monitoring, modifying the form of human education, partnering with the school community and health services.

Keywords: Human. Health services health. Low adhesion.

7. EDUCATIONS FOR HEALTH EATING BEHAVIOURS

EATING HABITS IN A SAMPLE OF PORTUGUESE CHILDREN AND YOUNGSTERS

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Introduction: According to WHO (2006) nutrition interventions need to occur early in life preventing future health problems. Taking into account that Portuguese obesity rates in children and youngsters are dramatic (APCOI, 2014) it's crucial to promote healthy eating habits.

Objectives: To explore eating habits (soup consumption and sweet desserts intake) in children and youngsters according to sociodemographic (gender and age) and contextual variables (meal's location).

Methods: This is an exploratory study with a convenience sample of 121 Portuguese children and youngsters (8-12 vs 13-17 years), 44% male and 66% female. The instruments were constructed for this study including a sociodemographic questionnaire and a weekly eating habits record. Descriptive and inferential (Mann-Whitney U test) analysis were conducted in SPSS (IBM 22), with a p value ≤ 0.05 .

Results: We found statistically significant differences in the frequency of soup consumption at lunch during week, depending on age ($p = 0.002$) and meal's location ($p = 0.001$), with better results for children and when meals occurred at school. The same was found at dinner concerning only age ($p = 0.049$). Gender differences ($p = 0.040$) were found in the frequency of soup consumption only at dinner, with girls presenting favorable results.

Conclusions: The results enhance the need to promote healthier eating habits particularly in male youngsters and in home meals at dinner time. In addition, we consider extremely important to continue and increase the implementation of actual nutrition programs in Portuguese schools, attending obesity rates verified in our country and its future health and social consequences.

Keywords: Eating habits. Children. Youngsters.

DETERMINANTS OF HIGHER EDUCATION STUDENTS' EATING HABITS

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Introduction: Individual eating habits are conditioned by individual and societal factors that function as health determinants. Currently nutrition education is recognized as one of the purposes of health education.

Objectives: Characterization of university students' eating habits. **Methods:** We applied a quantitative, qualitative, and exploratory study with a non-probabilistic convenience sample of 210 students from a Portuguese higher education school. Firstly we have carried out the instrument's validation. The evaluation protocol aims to study the relationship between eating habits and sociodemographic variables.

Results: Significant differences between eating habits and gender ($\alpha = 0,05 > 0,036 = p$) were found. Parent training cannot be considered as a influencing factor of eating habits of students ($\alpha = 0,05 < 0,498 = p$). Besides we found no relation between eating habits and the region where the students come from ($\alpha = 0,05 < 0,226 = p$). However we found differences between students that report personal

perceptions of healthy eating habits and those who admit unhealthy eating habits regarding their nutrition education level.

Conclusions: The results point out to the need of considering sociodemographic factors as well as the knowledge regarding nutrition education as predictors of healthy eating habits.

Keywords: Health education. Determinants. Eating habits.

AFFECTIVE-SEXUAL RELATIONSHIPS AND EATING DISORDERS IN OBESITY CONTEXT – A SYSTEMATIC REVIEW

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Introduction: In human intimacy, affective-sexuality (Ambler, 2012) is variable which promotes physical and emotional well-being in intimate relationships, in general (Brigitta, 2004), and in obese, in particular. Apart from obesity as a risk factor for chronic diseases there is clear correlation between obesity and negative emotional states and vice versa (Kadioglu, 2009; Larsen, 2007). Some studies present a correlation between these two variables, showing body image and self-perception as two variables in sexual experience, particularly in female (Alba, 2013, Arcelus, 2012).

Objectives: This study aims at assessing the connection between affective-sexual relationships and eating disorders in overweight context from a sample of articles on this topic.

Methods: according to the methodology PICO, it was conducted a research on electronic databases Pubmed and B-On, between June 9th and July 9th, 2014, with retrospective studies until January 2004. Keywords such as Sexuality, Obesity and Intimate Relationship were used as research strategies, in order to extract abstract and select studies. 74 studies were found and 10 were selected for final analysis.

Results: Studies present some controversies about those variables statistical relationships. Only 7 in 10 studies –samples from Italy, New Zealand, Portugal, Canada and Iron- provide evidence of statistically significant associations between sexuality and obesity and 3 studies in 10 studies –with samples from Turkey and Romania- refute previous data.

Conclusions: It was found a reduced number of studies about the connection between sexuality and obesity. However, their results allow us to affirm that overweight and high body mass index (BMI) show adverse effects on sexuality in obese patients.

Keywords: Obesity. Affective-sexual relationships. Sexuality. Dietary behavior.

8. ELDERLY HEALTH

THE OLDEST OLD: FUNCTIONAL EVALUATION IN PHYSICAL HEALTH AREA

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Introduction: Nowadays, there is a pronounced demographic aging that is reflected in an increasingly decline of the individuals' physical health, which interferes with the independence and

quality of life of the elderly. Thus, it is essential to promote a multidimensional assessment to identify the functional status for an effective intervention.

Methods: Quantitative, descriptive-correlational study, with a sample composed by 1153 individuals (N = 16474). The questionnaire used was the Questionnaire of Functional and Multidimensional Assessment of Older Adults (QAFMI/OARS - Older Americans Resources and Services). The assessment of physical health area involves number of physician visits, prescribed drugs, pathologies mentioned and their interference with activities, self-evaluation of vision and hearing, consumption of alcohol, and self-rated of physical health.

Results: It is pointed out that over the past six months, 89.5% of participants (90.0% men and 89.2% women) reported having had at least one physician visit. However, only 32.3% referred that had been sick, and only 16.6% referred that did not need medical care besides what already had. Hypertension was the most referred pathology (51.6%), followed by arthritis or rheumatism (49.5%). However, the multiple sclerosis and stroke were the ones who most interfered with the activities. As for vision and hearing, 24.8% and 26.8%, respectively, answered that was poor. The women and individuals ≥ 85 years evaluated more negatively their physical health (p < 0.001).

Conclusions: Based on the functional assessment of the oldest old of Coimbra, it is showed the complexity of the elderly's' physical health evaluation and the value of knowing their functional status for screening and addressing situations of disability.

Keywords: Aging. Geriatric assessment. Health of the elderly.

IMPLEMENTATION OF A MULTIDIMENSIONAL EVALUATION PROGRAM FOR ELDERLY RESIDENTS IN THE COMMUNITY

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Introduction: The demographic aging, determine new needs in health, releasing enormous challenges to health systems with regard not only to the accessibility and quality of care, but also to the sustainability of the systems themselves. This project aims to implement the multidimensional assessment in the elderly in perspective community, family and individual.

State of art: The aging of the population is a reality of developed countries, where Portugal is integrated. According to National Health Plan (DGS, 2004), the aging cannot be understood as a problem, but as one of the result of the cycle of life span, being desirable that it constituted a chance to more healthful and autonomous form of living in a long possible time.

New perspectives/guidelines: In the current National Health Plan (DGS, 2012), it is not observed a concern in response to this challenge, nor to the level of the organization and the functioning of the health services that are not adapted to the felted needs of the elderly population. Overall this constituted an obstacle to the promotion/or maintenance of the quality of life of this specific group of the population and also their families.

Theoretical and practical implications: This implies: a reorganization of the response of the services of health and social support to new social and family realities that follow the individual and demographic ageing and also an adequacy of training of the health professionals and of other area's such as social services.

Conclusions: To operationalize the multidimensional assessment it is necessary to use methodologies, strategies and instruments of various kinds, a multi and interdisciplinary perspective that only in the team work can decode in order to find the best answer for each case.

Keywords: Aging. Geriatric assessment. Health of the elderly.

FUNCTIONAL STATUS AND GENDER DIFFERENCES IN OLDEST OLD COMMUNITY DWELLING

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Introduction: The World Health Organization recognizes the gender as an ageing determinant. Thus, apart from biological differences, there is a need of a gender approach in health that includes an analysis of how differences in gender roles affect the health.

Objectives: To assess the functional status in five core areas of the elderly's life: social resources, economic resources, mental health, physical health and activities of daily living (ADLs), analyzing the impact of gender as a determinant of health in aging women and men.

Methods: Quantitative, descriptive-correlational study, with a probabilistic and stratified by age, gender and area of residence sample of 1153 older persons aged ≥ 75 years living in the municipality of Coimbra (N = 16474), consisting of 422 men (36.6%) and 731 women (63.4%), divided into two age groups of 75-84 years with 814 individuals (70.6%), and other ≥ 85 years, with 339 individuals (29.4%). The instrument for data collection was the Questionário de Avaliação Funcional Multidimensional para Idosos/Older Americans Resources and Services (QAFMI/OARS).

Results: We found that the study sample showed a trace of feminization as we advance in age, and marital status of widowhood in prevalence in women compared with men. The results evaluated with the OARS model stand women with worse scores in the functional areas of social resources, economic resources, physical health and mental health, except in ADL's.

Conclusions: The feminization of aging implies an adequate public policies and the organization of health services and social support based on the understanding of the differences between aging as a man and as woman.

Keywords: Aged. Gender and health. Geriatric assessment.

EVALUATION OF ELDERLY' COGNITIVE FUNCTION AND MEDICATION ADHERENCE TO IMPROVE PHARMACEUTICAL CARE ON HOME CARE VISITS

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Introduction: The complexity of the medication scheme in the elderly, in conjunction with isolation and possible physical and cognitive alterations, make this population particularly vulnerable to the medication non-adherence.

Aim: To evaluate older patients' ability to manage their own medication, by assessing their cognitive function and medication adherence, in order to provide data to improve pharmacist's intervention on home care visits of isolated elderly.

Methodology: Patients with 65 or more years old, living alone and integrating a social support network of the Coimbra City Council concerning the provision of meals on weekends were invited to participate in this study. A questionnaire was applied to each senior at their home after assigning the informed consent. In order to assess the cognitive function three questions of the Mini Mental State Examination were included, and to evaluate the medication adherence the Portuguese version of the Morisky-Green Questionnaire was used.

Results: From a total of 28 seniors visited, 25 agreed to participate. When the three questions of the Mini Mental State Examination

were asked, 60% answered all questions correctly, 16% got in two questions, 20% answered correctly to only one question and 4% missed all issues. Taking into account the Morisky-Green Questionnaire, 60% presented at least one behavior of non-adherence, but none of the seniors presented the lowest degree of adherence. The most common behavior of non-adherence was negligence (44%), followed by the difficulty of remembering to take the medication (32%).

Conclusions: There is a potential to improve medication adherence in the elderly living isolated in their homes by defining pharmaceutical care interventions to overcome the identified barriers.

Keywords: Cognitive impairment. Elderly. Home care visits. Medication adherence. Pharmaceutical care.

EVALUATION OF OLDER PATIENTS' MEDICATION MANAGEMENT TO IMPROVE PHARMACEUTICAL CARE ON HOME VISITS OF ISOLATED ELDERLY

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Introduction: Knowing that many seniors are polymedicated in response to multiple comorbidities they develop and that polypharmacy is the origin of many of the problems related with drugs that the elderly often present, health professionals have the duty to assist these patients and to promote the proper and rational use of medicines.

Aim: To assess older patients' ability to manage their medication and the strategies they use to help them in order to provide data to improve pharmacist's intervention on home care visits of isolated elderly.

Methodology: Patients with 65 or more years old, living alone and integrating a social support network of the Coimbra City Council concerning the provision of meals on weekends were invited to participate in this study. A questionnaire composed by 10 questions, including specific questions to assess patient's ability to manage his medication (the strategies used to do so) was applied to each senior at their home after assigning the informed consent.

Results: From a total of 28 seniors visited, 25 agreed to participate. When interrogated specifically with regard to the ability to manage their own medication, 20% answered that they did not use any strategy to help them to remember to take their medication, but the majority revealed to resort to one or more tools to assist them in this task. The association of one activity with drug intake was the most referenced tool by seniors. Regarding the ability in using a pillbox, 24% showed a low degree of performance, 28% an average degree of performance and 32% a high degree of performance.

Conclusions: Pharmaceutical care can be useful in helping the elderly living isolated in their homes in the management of their medication.

Keywords: Elderly. Home care visits. Medication management. Pharmaceutical care.

EVALUATION OF OLDER PATIENTS' MEDICATION KNOWLEDGE TO IMPROVE PHARMACEUTICAL CARE ON HOME VISITS OF ISOLATED ELDERLY

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Introduction: Patients' knowledge about their medicines is generally poor. Since older adults are prescribed more medicines than any other age group, they are more exposed to possible negative outcomes related to medication. Patients' education seems to be useful to help the elderly in the management of their medication.

Aim: To evaluate older patients' knowledge about their medication in order to provide data to improve pharmacist's intervention on home care visits of isolated elderly.

Methodology: Patients with 65 or more years old, living alone and integrating a social support network of the Coimbra City Council concerning the provision of meals on weekends were invited to participate in this study. A questionnaire composed by 10 questions, including specific questions to assess patient's knowledge about his medication, was applied to each senior at their home after assigning the informed consent.

Results: From a total of 28 seniors visited, 25 agreed to participate. When interrogated specifically about two medicines, 46% knew the therapeutic indication for both drugs and 27% knew the indication for only one of the drugs. When asked about 'how' and 'when' to take the medicines, only one participant distinguished the two terms; nevertheless, 82% knew when to take their drugs. Virtually all seniors were unaware to identify the possible adverse effects of the two drugs, 36% would appeal to their physician if adverse effects occurred and 9% would stop the medication. If a dose was forgotten, 27% of the participants would wait for the next dose.

Conclusions: Older people's knowledge about their medication is reduced, being useful to create strategies of pharmaceutical care to support the elderly living isolated in their homes in the management of their medication.

Keywords: Elderly. Home care visits. Medication's knowledge. Pharmaceutical care.

EVALUATION OF DRUG STORAGE CONDITIONS TO IMPROVE PHARMACEUTICAL CARE ON HOME VISITS OF ISOLATED ELDERLY

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Introduction: Multiple chronic diseases in the elderly leads to several types of medication. Older people are more prone to make mistakes and susceptible to problems related with medication. It is crucial to assure the quality of the use of medicines by this population.

Aim: To evaluate how the process of drug storage is achieved by elderly people in their homes in order to provide data to improve pharmacist's intervention on home care visits of isolated elderly.

Methodology: Patients with 65 or more years old, living alone and integrating a social support network of the Coimbra City Council concerning the provision of meals on weekends were invited to participate in this study. A questionnaire composed by 10 questions, with specific questions to assess patient's storage of medicines, was applied to each senior at his home after assigning the informed consent.

Results: From a total of 28 seniors visited, 25 agreed to participate. Different active substances stored per home varied between 2 and 41 (mean 14). An average of 9 medicines/home not being used at the moment of the interview was found, with 64% mentioning they intended to use it in the future. 62% stored their medicines in the kitchen. Medication stored was exposed to moisture (43%), heat (46%) and light (11%). 24% of the units found had no information leaflet, 12% had no outer packaging and 15% had already expired. At the end of the therapeutic, the participants referred they keep the medicines at home (40%), give them back to the pharmacy (40%) or threw them into regular trash (36%).

Conclusions: There is a need of education of the elderly concerning use, storage, management and disposal of medication. Pharmaceutical care can be useful in promoting strategies regarding rationalization of medicines home stocks.

Keywords: Elderly. Home care visits. Medication storage. Pharmaceutical care.

EFFECTS OF AN ACTIVE AGING PROGRAM ON OLD PEOPLE'S FEELINGS

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Introduction: Portugal is actually an aged country where two distinct scenarios can be distinguished. The coast, and the interior one. The regions with higher proportions of old people are the interior ones, less dense and populated where the lower proportion of people in active age is associated with lack of employment and educational opportunities leading the younger generations to leave these regions (EUROSTAT, 2014).

Objectives: To evaluate the effect of an active aging program with a group of elderly.

Method: Quasi-experimental study with a questionnaire including Mini Mental Test, and the scales of Subjective Happiness and Life Satisfaction to 9 elderly community residents and 11 living at a nursing home in the city of Bragança to whom an active aging program was implemented along four months.

Results: The community older adults had a mean age of 79.45 ± 7.93 years, all female, while the residents at the nursing home had a mean age of 83.72 ± 5.06 years, 5 men and 6 women. There were statistically significant differences between the means of scores before and after the interventions: Mini Mental Test (before: 25.7 ± 3.35 ; after: 26.75 ± 2.57 , $p = 0.038$) and subjective Happiness Scale (before: 12.05 ± 3.26 ; after: 17.95 ± 4.11 , $p < 0.001$). Although there has been an increase in the average of Satisfaction with Life scale scores after the intervention, the difference between averages did not reveal to be statistically significant (before: 17.45 ± 3.72 ; after: 19.00 ± 3.67 , $p = 0.128$).

Conclusions: Data allow us to conclude on the importance of the implementation of active aging programs among the elderly.

Keywords: Active aging. Happiness. Satisfaction with life.

NUTRITIONAL STATUS AND SOCIAL RESOURCES OF AN OLD POPULATION IN THE NORTHEAST OF TRÁS-OS-MONTES

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Introduction: Portugal shows a very pronounced aging population. It lost population in every quinquennial age group between 0-29 years. To ages over 70 years the growth was about 26%. The total of old people living in Alto Trás-os-Montes is of 56966 and in the region of Alfândega da Fé is of 1660 (INE, 2011).

Objectives: To assess nutritional status of people with 75 years or more in the municipality of Alfândega da Fé; To know social resources and to check if there are correlations between nutritional status of the elderly and clinical and characterization variables of the studied population. A proportional and probabilistic sample of 109 old people of a total of 487, mainly female (62.4%; 68) was gathered from the database of users registered at the Health Centre of Alfândega da Fé.

Materials and methods: A Correlational and cross-sectional study was designed. It was applied the Mini Nutritional Assessment (MNA) and also the Scale of Social Resources (OARS).

Results: From the total of 109 old people 28, 4% (31) are at risk of malnutrition and 71, 6% (78) present a normal nutritional status. From the total of subjects who participated in the study 40.4% (44) have adequate social resources, while more than a half 59.6% (65) have impaired social resources. We also concluded that social resources are independent from the nutritional status

($p = 0.786$). However, we have found, that the elderly who had been hospitalized had a higher risk of malnutrition ($p < 0.001$), with a significant relationship between the variables.

Conclusions: Results appeal to the attention on a more adequate nutrition in this group of age, as well as the implementation of the mechanisms for referral the elderly at risk of malnutrition and isolation to local healthcare units and social security.

Keywords: Social resources. Elderly nutritional status.

EVALUATION OF FUNCTIONAL (IN)DEPENDENCY IN INSTITUTIONALIZED ELDERLY

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Introduction: Evaluation of daily life activities is considered an appropriate and legitimate tool for evaluating the degree of functional (in)dependency in the elderly.

Objectives: To evaluate the degree of functional (in)dependence in the elderly living in a long-term institution in the North of Portugal.

Methods: Descriptive cross-sectional study conducted in a long-term residence in the North of Portugal. The sample was constituted by the totality of institutionalized elderly during the month of April 2013, a total of 67. The collection of biographical data was accomplished through the individual process of the elderly. Barthel scale was used to evaluate the degree of (in)dependence through direct observation of daily life activities.

Results: Of the total of 67 seniors, 74 were female, mean age was 83.5 years ($SD \pm 7.6$), varying between 52 and 97 years, 92.5% from countryside, 47.8% can read and write. The most prevalent chronic conditions were hypertension 58.2%, dementia 38.8% and diabetes 31.3%. The Barthel Index revealed 43.3% of the elderly with a degree of total dependence and 11.9% independent. The majority showed independence in feeding 79.1%, in the transfer from the chair to the bed 53.7% and 52.2% in ambulation. The largest proportion of dependence observed in the bath 89.6% in the dressing 47.8% and 50.7% arrange itself. Noted a large proportion of elderly with bladder and bowel incontinence 50.8%.

Conclusions: There was a low prevalence of seniors independent in all activities. The largest proportion of dependence occurred in the personal hygiene. It seems to us important that professionals sensitize seniors to the importance of self-care in health promotion and quality of life.

Keywords: Aged. Dependency. Motor activity.

PREVALENCE OF HYPERTENSION IN INSTITUTIONALIZED ELDERLY

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Introduction: The high prevalence of high blood pressure and its hard control lead the scientific community to consider this as a public health problem.

Objectives: To identify the prevalence of hypertension in elderly institutionalized in a home of senior citizens of the District of Bragança.

Methods: A descriptive cross-sectional study performed in a senior citizens home in the district of Bragança. The sample consisted of 67 elderly institutionalized during the month of March 2013. The information was obtained through the records of the individual process of the elderly during the period from 20 to 28 April. Blood Pressure (BP) was assessed to all seniors, by one of the researchers, with electronic vital signs monitor device, following the criteria of the General Directorate of Health.

Results: There was a predominance of the female gender 74%, from countryside 92.5%, and with education level read and write 47.8%. The hypertension prevalence was 58.2%, the average systolic BP was 132.6 mmHg, ranging between 90 and 175 mmHg and diastolic BP averaged was 71.6 mmHg ranging between 42 and 94 mmHg. The average heart rate was 74 beats/minute varying between 50 and 101 beats/minute. The Group of hypertensive patients registered higher prevalence in females 74.4%, with an average age of 84.4 years, 94.9% from countryside and 48.7% could read and write. Concomitantly had diabetes and dementia 35.9%, congestive heart failure 17.9% and stroke 12.8%.

Conclusions: We observed a high prevalence of hypertension which justifies the need for adopting preventive measures. The adoption of healthy lifestyles in this group is an essential component of therapy as well as prevention of hypertension.

Keywords: Aged. Hypertension. Health of the elderly.

MULTI-INDICATORS OF SUCCESSFUL AGING IN CENTENARIANS

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Introduction: The multidimensional model of successful aging (Young, Frick & Phelan., 2009) has been serving as a reference in empirical studies of successful aging over the last years (e.g., Pruchno et al., 2010) and a benchmark to assess the health and functioning of very old individuals (Philips Lifeline, 2014). By comprising bio, psycho and social domains, it constitutes a promising approach to the study of the centenarian population who tend to present several age-related losses.

Objectives: The study aims to validate a multidimensional model of successful aging in a sample of Portuguese centenarians.

Methods: 80 centenarians from the PT100 project (Oporto and Beira Interior Centenarians Studies) were face-to-face interviewed. Indicators of disease and physical impairment (physiological domain), emotional vitality and inner contentment (psychological), and engaging with life and spirituality (sociological) were collected.

Results: Structural equation modeling analysis to the hypothesized model suggests removing the social activities indicator (factor loading of 0.07). The alternative model fits well to the observed data, with $\chi^2(24) = 29.058$, $p = 0.218$, CFI = 0.949, GFI = 0.925, RMSEA = 0.052, $p = 0.048$.

Conclusions: The consideration of multi indicators of successful aging enables considering compensatory mechanisms and synergies between physical, psycho and social domains. A greater focus on psychosocial domains values the individual capacities' of adaptation, resilience, and coping, which have been tremendously advocated in the gerontological literature (Baltes & Baltes, 1990; Jeste, Depp, & Vahia, 2010).

Keywords: Successful aging. Centenarians. SEM.

PROFILE OF DEPENDENTS INTEGRATED IN THE INTEGRATED CONTINUOUS CARE TEAMS: AN EXPLORATORY STUDY

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Introduction: The National Network for Continuous Care (NNCC), where nurses play an important role, is one of the major pillars of the National Health Service and a crucial support to families who integrate dependents in self-care.

Objectives: 1) to know the health profile of dependents in Integrated Continuous Care Teams (ICCT); 2) to identify significant relationships between the main variables that define the profile of dependents.

Methods: It is an exploratory and quantitative study. The sample includes all the dependents integrated in 4 ICCT of the coverage area of a Local Coordinator Team at Health Center Cluster of northern Portugal (N = 112), referenced in the timeline of March 1 to August 31, 2014. Applied the form "Profile of the Dependents Integrated in the Care Providers of the NNCC". Performed two ratings - at admission and clinic discharge.

Results: The most referenced medical diagnoses were pneumonia (25%), stroke (22.3%) and osteoarthritis (9.8%). Over 55% were "major dependents". 45.7% of the dependents improve the dependency level and bodily processes (37%) between admission and clinic discharge. The overall average scores of the "autonomy reconstruction dependents potential" and "family caregivers potential to care" are, respectively, 15.2 and 38.6. Performed further statistical tests of inferential analysis with statistically significant between the main variables of the study.

Conclusions: Substantive part of the care that dependents need and ensured by family caregivers is of great complexity and intensity, pointing to the importance of the support in care provided by ICCT.

Keywords: Self-care. Family caregiver. Dependent.

EVOLUTION OF THE DEPENDENTS HOSPITALIZED IN CONVALESCENCE UNITS

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Introduction: The convalescence units (CU) of the National Network for Continuous Care (NNCC) are a health resort whose main objective is to promote the autonomy reconstruction for dependent people.

Objectives: 1) To know the evolution of the dependents hospitalized in CU; 2) identify significant relationships among the main variables defining the dependents health profile.

Methods: An exploratory study of quantitative and longitudinal profile. The sample includes all the dependents hospitalized in two CU of the coverage area of a Local Coordinator Team at Health Center Cluster of northern Portugal (N = 124), referenced in the timeline of March 1 to July 31, 2014. Applied the form "Profile of the dependents Integrated on Care Providers of the NNCC" on admission and at clinic discharge.

Results: The most referenced medical diagnoses were osteoarthritis/arthropathy/hip fracture (41.9%) and stroke (31.5%). Of the 97 cases in the sample in which it was possible to assess the level of dependency and bodily processes, between admission and clinic discharge: 1) 1% worsened, 3.1% remained and 95.9% improved the dependency level; 2) 6.2% worsened, 17.5% remained and 76.3% improved bodily processes. The overall average of the "dependent autonomy reconstruction potential" and "family caregiver potential to take care" were respectively, 20.3 and 35.4. Performed tests of inferential analysis statistically significant between the main variables of the study.

Conclusions: The results of this study confirm the importance of the work done by health professionals at CU, where nurses play an important role in rebuilding the dependents autonomy.

Keywords: Self-care. Bodily process. Autonomy reconstruction potential. Family caregiver potential to take care.

QUALITY OF LIFE AND WELFARE OF THE ELDERLY: THINK HEALTH INTERVENTION FROM THE PLURALITY OF VOICES AND LOOKS

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Introduction: The population aging as a result of social and demographic changes that have led the extended longevity, but in a context of crisis and exodus of young people qualified, it challenges to new approaches to community health. At this moment, it's necessary to know the contours of the problem from the elderly and other actors involved in health care.

Purpose: Assess the Quality of Life and welfare of the elderly; characterize the profile of informal caregivers and their overload and identify priority areas of intervention, needs and potentialities from the perspective of community leaders.

Methods: This is a cross-sectional and descriptive correlational study. We used the Easycare Standard Portugal 2010, the Zarit Burden Interview Scale and an interview to the community leaders.

Results: It was inquired 199 elderly, 40 informal caregivers and 6 leaders. It was found statistically significant relations between: dependence and age ($p = 0.000$); falls risk and sex ($P = 0.004$); falls risk and age ($P = 0.011$) with higher risk in older women; faulty care risk and age ($p = 0.000$); faulty care risk and sex ($p = 0.000$) which is higher in women; depression risk and sex ($p = 0.000$) higher in the women; polypharmacy and falls in the last year ($p = 0.000$). There's no relationship between overburden of caregivers and the score of the elderly dependency ($p = 0.33$). It was found higher scores on the Zarit Burden Interview Scale of caregivers of elderly patients with severe cognitive impairment. The existence of a social support network and the promotion of active aging aspects were reported by community leaders.

Conclusions: To respond the elderly needs, we need to coordinate various stakeholders including the elderly, caregivers and community leaders, taking into account their needs/potentials.

Keywords: Life quality. Welfare. Elderly. Community.

HEALTH LITERACY WITHIN AND FOR THE ELDERLY PEOPLE: RESULTS FROM QUANTITATIVE STUDY IN THE OPORTO DISTRICT

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The concept of health literacy has caught the attention and interest of many scientific fields, such as Medicine, Nursing, Psychology, Sociology, Social Work, and Economics. Research in the field of Health has shown that individuals that are literate in health are more able to develop behaviors that effectively promote their health, because they easily understand the information provided by professionals regarding preventive care and treatment options. In contrast, people with a lower level of literacy tend to show a greater difficulty in prevention and management of health problems, adopting various risk behaviors. Elderly people are among the most vulnerable population groups in terms of health literacy degree, and are also those with lower academic qualifications. This study aimed to assess the level of health literacy among elderly people, through a quantitative method. The sample consisted of 456 elderly people, from the Oporto district, with an average age of 75 years old, mostly female, and with heterogeneous levels of education. The instrument used was a battery of tests in order to assess the degree of health literacy (Newest Vital Sign), and the quality of life (WHOQOL). The results have shown inadequate health literacy, although the male and the married participants had higher average levels compared to females and widowers. These results depend also on age and on the educational level. This research concludes that it is urgent to enhance health literacy within the elderly population in general, and among the most vulnerable groups in particular, by changing both elderly people's attitudes and professional practices.

NURSING DIAGNOSTICS MORE FREQUENT IN NURSING HOMES

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Introduction: According to the National Statistics Institute (NSI), the aging of the population has been worsening over the last decade. It is expected that in 2050 Portugal will be the fourth EU country with the highest percentage of elderly, 31.9%. In the mainland, more than 78 000 older people live in nursing homes. In the northern region there are 562 nursing homes, with 18300 residents.

Objectives: 1) Identify the prevalence of nursing diagnoses in the domain of bodily processes; 2) characterize the psychological health status; 3) identify relationships between sociodemographic variables, nursing diagnoses and the psychological process.

Methods: Quantitative cross-sectional descriptive correlational study, conducted between January and April 2014, in a nursing home in North of Portugal with 150 residents. Performed, descriptive and inferential statistical data analysis using the SPSS / PC for Windows, version 22.

Results: Participants (n = 142) are mostly female (76%), widows (54%), with an age average of 84 years. The most frequent nursing diagnoses in the domain of bodily processes are: obstipation risk, 45.8%; pressure ulcer risk, 35.9%; dehydration risk, 25.4%;

compromised deglutition, 21.1%; obstipation, 20.4%; aspiration risk, 17.6%; ineffectual expectorate, 11.3%; articular rigidity, 10.6%; dehydration, 4.9%; and pressure ulcer 2.8%. In the domain of psychological process, 28.9% had depression and 27.4% have cognitive impairment. Performed association tests, of inferential analysis, statistically significant between the study main variables.

Conclusions: Under this scenario, nursing homes, where nurses are still a very small number, constitute themselves an increasingly important context of nursing care provision.

Keywords: Nursing homes. Nursing diagnoses.

QUALITY OF LIFE OF ELDERLY HIPERTENSIVE / DIABETES IN A CITY OF THE BRAZILIAN AMAZON

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Introduction: Quality of life is an important evaluator to measure the impact on health. Thus, it becomes necessary to know the quality of life in old age, to contribute to the education act-cuidativo nursing.

Objectives: To conduct a comparative evaluation between the quality of life of hypertensive/diabetic patients seen by a team from the Family Health Strategy in a rural area and one urban elderly in the municipality of Santarém, Pará, Brazil.

Methods: A field study with a quantitative approach descriptive, conducted with 50 elderly attended FHS in rural and 50 in urban FHS attended this council, registered in HIPERDIA system these units. Data were collected through the questionnaire WHOQOL-OLD WHO, systematized tables from Excel 2013 software.

Results: The two groups of elderly people have a quality of life considered high, and the areas which had the highest values in the FHS from rural and urban areas, respectively, were Intimacy and Death and Dying, and then, with values lower in both groups, the standby. It was possible to notice a slightly higher total score on, however, insignificant rural area, showing that both locations have satisfactory indicators of quality of life.

Conclusions: The independence and autonomy of older people to perform their daily activities in this study were evident, integration in social life, the support of family and friends corroborate to feel useful in their midst hindering dependency that prevent them having a old age with quality.

Keywords: Quality of life. Senior citizens. Hypertensive. Diabetics.

9. HEALTH AND NUTRITION

SOCIODEMOGRAPHIC VARIABLES AND EMOTIONAL DIMENSIONS OF EATING BEHAVIOR IN YOUTH

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Introduction: Eating behavior includes not only nutrients intake but also food attitudes (Natacci, 2011). In fact, emotional dimensions (specially restraint) are crucial in weight loss programs (McGee et al, 2012) increasingly needed in Portuguese youth attending the

higher rates in obesity. Restraint is also relevant in eating disorders, unfortunately very common in adolescence.

Objectives: To examine changes in youth eating behavior (restraint, desinhibition and hunger) according to sociodemographic variables (age and gender).

Methods: This is an exploratory study with a sample of 72 Portuguese youngsters (ages between 13 and 19 years), 52.8% female vs 47.2% male. For data collection was used the Three-Factor Eating Questionnaire (TFEQ). Descriptive and inferential (T-test) analysis were conducted using SPSS (IBM 22) with a p value ≤ 0.05 considered as statistically significant.

Results: Age was not relevant in these analysis. However, we found that gender influenced significantly the attitudes towards food, specially restraint ($p = 0.002$). Girls presented higher results than boys in this dimension when compared to boys.

Conclusions: The results are consistent with previous studies showing greater concern of women with weight. This enhance the need to consider emotional dimensions in youth obesity programs, with special attention to girls, that seem more able to restrain unhealthy food intake but are also more liable to engage in inadequate eating behaviors (e.g. anorexia) as literature points out.

Keywords: Sociodemographic variables. Restraint eating. Youth.

HEALTH LITERACY IN WEIGHT MANAGEMENT AND ITS IMPACT ON HEALTH-PROMOTING BEHAVIORS IN NUTRITION

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Introduction: The health behaviors of teenagers are associated and influenced, according to some authors, to their health literacy skills.

Objectives: To know the levels of health-promoting behaviors in nutrition and health literacy levels in weight management among a sample of Portuguese teenagers. The other objective is to realize the impact of health literacy levels in health-promoting behaviors.

Methods: This study is quantitative, descriptive-corelocational and transversal, with a non probabilistic convenience sample of 1215 portuguese teenagers attending the secondary education in Portugal. The questionnaire was consisted in social demographic questions, the Adolescent Health-promoting Scale (Chen, Wang, Yang & Liou, 2003) and the assessment tool of health literacy (Tomás, Queirós & Rodrigues, 2014).

Results: It were found good levels of health literacy in weight management, being the highest levels of health literacy found in females ($p = 0.004$) and teenagers attending the last year of graduation ($p = 0.000$). The levels of health-promoting behaviors in nutrition found are good, being highest in teenagers in the intermediate year of graduation ($p = 0.020$), and decreasing this value with the age ($p = 0.007$). The two concepts are connected in a positive and statistically significant way, and there is a prediction of the health-promoting behaviors by health literacy in the total sample ($p = 0.014$), in female teenagers ($p = 0.027$) and older teenagers ($p = 0.041$).

Conclusions: Health literacy levels and health-promoting behaviors found were good, being perceived a correlation between concepts and a prediction of these behaviours, which lead us to the conclusion of the importance of an appropriate intervention in health literacy as a mean of promoting healthy behaviors.

Keywords: Health literacy. Health behavior. Nutrition. Teens.

EMOTIONAL STATE, STATE NUTRITION AND BODY IMAGE

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Introduction: Literature exposes the relationship between body dissatisfaction and low self-esteem, depression and changes in eating behavior (Silva, 2009). Depression is strongly associated with anxiety and stress, which in turn, are directly related to changes in appetite and food preferences, reflected in the nutritional status of individuals (Gomes, 2010).

Objectives: To characterize the perception of body image and nutritional and emotional state of outpatients in Nutrition consultation; Know the incidence of the presentation of emotional instability in individuals with BMI ≥ 25 kg/m².

Methods: An exploratory and quantitative study in a sample of 88 individuals between 18 and 65 years, of both genders, anthropometric measurements (weight, height and BMI) performed at the time of the query, using the Tanita scale body composition analyzer TBF- 300, and stadiometer Seca model 206 still constituted methodology for evaluating the Beck Depression Inventory (Gorestein, 1998) and the graph Perception of Body Image (Stunkard, 1983).

Results: 54.5% of the sample shows criterion depression, but most of sample shows a mild to moderate stage. 95.7% of respondents demonstrate dissatisfaction with body image, evidencing 93.2% strongly dissatisfied for excess. 94.3% of the sample has ≥ 25 kg BMI/m².

Conclusions: Individuals in excess weight or obesity also demonstrate dissatisfaction of body image and depressive symptoms, suggesting a strong positive correlation between BMI and depressive state. Thus, to validate this correlation is suggested to continue the study, enlarging the sample to obtain greater statistical significance in the interdependence of the variables studied.

Keywords: Body image. Emotional state. State nutrition.

10. HEALTH AND LIFE QUALITY

PATIENT 'S SATISFACTION WITH THE NURSES' CARE DURING RITUAL BATH

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Introduction: The bathing practice in hospital consolidates aspects such as its role in the continuity of care, the nursing bond, and the meaning and value to the group, but needs further research and validation on the impact on the patient.

Objectives: Evaluate the patient's satisfaction regarding the way he was attended by nurses in the bath.

Methods: This is a quantitative quasi-experimetal study (before and after) performed in a medical and surgical services, with a sample of 250 users, in Portugal. A training was delivered, introduced instrument, which instructed 12 nurses in the bath ritual. In both phases the SUCEH protocol was applied (patients' satisfaction with nursing care in the hospital). The protocol evaluation includes the sociodemographic questionnaire, the scale of frequency of administration of nursing care, and the scale of satisfaction with management (Ribeiro, 2003).

Results: We discovered an evolution of patients' satisfaction between the two phases ($p = 0.000$), either in the frequency of administration of care or how frequency affected satisfaction. In the first phase, satisfaction is explained by care: teach about bathing ($p = 0.002$); inform about the resources ($p = 0.021$); maintain privacy ($p = 0.015$). In the second phase are: the information to deal with the need for bathing ($p = 0.023$), keep a calm environment ($p = 0.000$) and meet the patient's opinion ($p = 0.000$).

Conclusions: The patients' satisfaction is more related to how to serve and the quality of care rather than with the care provision in the bath. The feedback of information has an attendance and assistance component. The results suggest the need to consider the patient's participation in planning his own care in bathing.

Keywords: Patient's satisfaction nursing bath.

NURSING STUDENT: VULNERABILITY/HEALTH AND WELL-BEING

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Introduction: The Nursing student, in his transitional process and during higher education frequency, shares common issues, inherent to his young adult and undergraduate conditions. However the entrance and frequency in a course with the characteristics of a Nursing degree, particularly psychologically demanding, confronting the students with complex experiences, mainly in the emotional level, sometimes with several consequences, inclusively in his health condition and well-being.

Objectives: Identify determinant factors in the transitive process of the nursing student, which are enhancers in health vulnerabilities.

Methods: This is a quantitative, descriptive, exploratory and cross-sectional study, conducted to a population of 250 students, attending a Nursing School, in the South of Portugal. The instruments used to collect the data included a sociodemographic questionnaire; the questionnaire on health status SF36-V2 (Ferreira, 2000) and the scale of well-being (Bradley, 2009).

Results: Were significant predictors of change in the health and well-being of nursing students: gender ($p = 0.006$); satisfaction with the course ($p = 0.015$); year of the course ($p = 0.000$) and clinical teaching ($p = 0.018$).

Conclusions: Being a Nursing student, of the female gender, the satisfaction with the course, attending the 2nd year and being in clinical training, are enhancers, liable to change the health and well-being of the student. Given the results, we believe it is essential, during initial and ongoing formation, know the factors that make the student vulnerable, in order to develop appropriate support strategies, since performance and academic success, depend largely on his health and well-being condition.

Keywords: Nursing student. Vulnerability. Health and well-being.

HEALTH-RELATED QUALITY OF LIFE AND FUNCTIONAL CAPACITY IN ELDERLY OF THE PRIMARY HEALTHCARE

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Introduction: The aging process, being complex, has as one of its features the gradual and progressive decline of functional capacity, interfering with quality of life.

Objectives: To characterize the sociodemographic and health profile of the elderly; to analyse the relationship between the perception of health-related quality of life (HRQOL) and the level of independence to perform basic activities of daily living (BADLs) and instrumental activities of daily living (IADLs).

Methods: A descriptive correlational study was conducted of older adults registered at a Personalized Healthcare Unit of a Health Center in northern Portugal. The data collection instrument was a questionnaire in which the first part contained descriptive sociodemographic and health variables, followed by Barthel, Lawton and Brody scales and the COOP/WONCA scale. The Spearman correlation was employed, with a statistical significance level of $\alpha = 0.05$.

Results: 213 elderly people participated in the study of whom 124 (58.2%) were female. The sample's average age was 76.83. The analysis of the relationship between the perception of HRQOL and the level of independence to perform BADLs revealed that the higher the level of independence to perform those activities, the perception of HRQOL was significantly higher ($p = -0,573$; $p < 0,001$). The correlation between the perception of HRQOL and the level of independence to accomplish IADLs presented that there are statistically significant differences for females ($p = -0,593$; $p < 0,001$) and males ($p = -0,517$; $p < 0,001$). Therefore, the higher the level of independence for IADLs the greater the perception of HRQOL.

Conclusions: The higher the independence to perform the BADLs and IADLs the greater the perception of the elderly regarding quality of life.

Keywords: Quality of life in elderly (QOL). Basic activities of daily living (BADLs). Instrumental activities of daily living (IADLs).

CENTENARIANS' QUALITY OF LIFE AND THE ROLE OF HEALTH AND LIVING CONTEXT: FIRST FINDINGS FROM THE OPORTO CENTENARIAN STUDY

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Introduction: The interest of the scientific community to study the centenarian population has been growing due to the significant expansion of life expectancy and human longevity. Evidences about their quality of life (QoL) are, nevertheless, still limited. Different conceptualizations of QoL, the overvaluation of the negative aspects of advanced age and the heterogeneity of the oldest old are some issues that could explain the difficulties in this assessment.

Objectives: This study aims to analyze the perceived QoL in a sample of centenarians and analyze if there are significant life context (community vs institutional) and health (objective and subjective perception) differences.

Methods: A subsample of 59 Portuguese centenarians who participated in the PT100_Oporto Centenarian Study, conducted in 2013 was considered. Descriptive and chi-square analysis were conducted.

Results: Most centenarians perceived their QoL in a very positive manner (50.8% rated it as "good", 6.8% as "very good" and 3.4% as "excellent"); 28.8% perceived it as "acceptable" and 10.2% as "bad". No significant statistical differences were found for the considered variables.

Conclusions: Centenarians seem to present high levels of perceived QoL, which can be associated with a great ability to adapt to adverse situations that occur through their lives. Neither contextual and health aspects seem to influence the perception of QoL in this particular sample study. Nonetheless, more research is

needed to understand the specificities of the QoL in the centenarian population, namely the role of psychological and social variables.
Keywords: Quality of life. Centenarians.

DOMAINS OF QUALITY OF LIFE OF WHOQOL-BREF IN ADULTS INDIVIDUALS WITH MOOD DISORDERS AND THE GENERAL POPULATION

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Introduction: The method used to assess the health and health care has been undergoing changes due to the recognition of the importance of the social consequences of the disease and the recognition of the goal of therapeutic interventions to increase the lifetime and its quality. In this sense, the quality of life is understood in scientific and academic circles as an outcome measure, along with mortality and morbidity.

Objectives: This study aims to contribute to a better understanding of the relationship between the presence of mood disorder and quality of life.

Methods: The sample consisted of 78 subjects: 39 diagnosed with mood disorder-major depression, dysthymia, bipolar disorder, and depressive disorder not otherwise specified (1st Group) and 39 without mental illness (2nd Group). The 1st Group was selected from outpatient Hospital of Portugal and the 2nd Group was selected snowball, having been controlled the sociodemographic variables. Both of these groups used the WHOQOL - Bref, contemplating sociodemographic variables and the Graffar Index to evaluate the socio-economic class.

Results: The 1st Group presented in all domains of the WHOQOL - Bref (psychological, physical, social relationships and environment) lower scores and also lower overall quality of life than the 2nd Group. It was found that the areas most affected by the presence of mood disorder were physical and psychological domains.

Conclusions: These results reinforce previous studies indicating that people with mood disorders have a poorer quality of life pointing thus to the need to establish a multidimensional monitoring these people.

Keywords: Quality of life. Mood disorders.

DISTANCE-RELATED INFLUENCE OF HEALTH FACILITIES ON SELF-PERCEPTION IN ELDERLY

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Introduction: The citizen is the focus of the health system in responding to their needs. Thus the programs and activities of the national health plan aim to improve the health of persons. Whether distance to health facilities compromise the self-perception of health is not deeply investigated.

Objectives: To analyze the influence of the distance from home to the health facility in self-perception of health of the elderly population.

Methods: This is a quantitative descriptive and explanatory study with a sample of 1341 (69.98% female) elders from North of Portugal with mean age of 78.90 (6.17) years old. The 36-item Short Form Health Survey (SF-36) questionnaire, including eight domains: General Health (GH), Physical Functioning (PF), Role Physical (RP), Role Emotional (RE), Bodily Pain (BP), Social Functioning (SF), Mental Health (MH) and Vitality (VT) were performed. Geographic

information about home and health facilities was calculated by google maps.

Results: We found a statistically significant correlation between self-perception of health, RE ($p = 0.045$) and BP ($p = 0.022$) domains, and the distance to health facilities. The results indicates that the farther the health facilities the lower the self-perception of health.

Conclusions: The distance from home to health facility should be taken into consideration in decisions about health services since they may affect the well-being in elderly population.

Keywords: Elderly. SF-36. Self-perception. Health facilities.

HYPERTENSION AND LEVELS OF STRESS

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Introduction: Hypertension is a risk factor for many diseases especially cardiovascular disease, whose clinical significances are well defined and has justified the attention of the scientific world and of important organizations such as who.

Objectives: Evaluate the factors that cause variations in the levels of stress in hypertensive people.

Methods: This study is quantitative, specifically a descriptive and correlational research whose inclusion criteria is that all participants have a diagnosis of hypertension; the participants may be at any stage of treatment; does not have restrictions in terms of age, sex, marital status, or race. The study sample consists of 50 subjects with a diagnosis of hypertension from the health center of Armamar. The instrument consists of the collection of demographic data on the sample and to assess the stress we used in the Life Experiences Survey.

Results: There is no significant effect of gender in stress, between age and stress, there is no significant effect of treatment adherence levels of stress and also there is no significant effect of behavior modification in the levels of stress.

Conclusions: The study of the interrelationship between stress hypertension is complex because of many other variables (genetic factors, diet, exercise, weight etc.) can influence its onset. The difficulty in controlling these inter-acting variables may partly explain the variability of results. Another difficulty is quantifying stress. The different ways in which individuals perceive, interpret and react to the same factor condition subsequent variation in behavioral adaptation and determine who is who reacts by becoming hypertensive.

Keywords: Hypertension. Risk factors. Stress.

11. HEALTH EDUCATION AND TEACHER TRAINING

CARE OF ELDERLY PEOPLE IN CLINICAL CONTEXT: DIFFICULTIES OF THE NURSING STUDENTS

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Introduction: In an era of global ageing, the increasing proportion of the older people has a direct impact on nursing practice, and also in nursing education, presenting unprecedented opportunities and challenges.

Objective: To identify the difficulties of the nursing students in caring of elderly people in clinical context.

Method: Quantitative, descriptive study, with a non-probabilistic accidental sample, constituted with 238 undergraduate nursing students of the 4th year of the Nursing School of Coimbra. a Likert type scale was developed and applied consisting of 34 items with seven dimensions: physical health care, mental health care; activities of daily living (ADL) care; social resources care; economic resources care; use of services care and multidimensional assessment care, correspond to the care of the elderly difficulties felt by nursing students in clinical training, which varies from 1 (no difficulty) to 5 (very difficult).

Results: The preliminary data analysis it is point out in a descending order of difficulties expressed by the nursing students in the care of elderly people: first economic resources care dimension, second social resources care dimension, third physical health care dimension, fourth mental health care dimension, five ADL care dimension and the use of services and multidimensional assessment care dimensions with similar lower scores.

Conclusions: From the main results found emerged a group of dimensions that allow us to identify some difficulties felt by the students in the care of the elderly people in the clinical training context. Thus, is possible the structuring of nursing programs, based on those felt difficulties, to support gerontology curricular innovations to prepare nursing students to the care of elderly people.

Keywords: Nursing education. Care of the elderly.

MENTAL HEALTH PROMOTION AND SUICIDE PREVENTION: TEACHERS TRAINING IN MOOC ENVIRONMENT

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Introduction: Mental health promotion and prevention of suicidal behaviors, in school context is a theme which scarce scientific research with effective evaluation in teacher training programs in mental health promotion and suicide prevention. It is intended, therefore, to develop, implement and evaluate a training program for teachers, from preschool to high school, in MOOC environment, promoting mental health and preventing suicide.

Methods: The study of the quantitative nature of the experimental type with population of 600 teachers/educators shall have stratified sampling of 236 subjects. Using the matching technique combined with a random assignment of pairs for the groups, an experimental group and a control group were constituted, with four strata: preschool, 1st CEB, 2nd CEB and 3rd CEB+HighSchool. There will be three evaluation moments: pre-test, post-test and follow-up with evaluation of the training programme.

Results: It is anticipated the need to create structures and integrated projects in PES that favour the students monitoring throughout their school career, greater knowledge and personal/social skills development implying better mental health and focus on training in MOOC environment, within the educational context, on the theme of suicide prevention.

Conclusions: A training programme in mental health promotion and suicide prevention produced in MOOC environment will be an asset in teachers' initial formation.

Keywords: Teacher training. MOOC. Health promotion.

EDUCATION FOR QUALITY OF LIFE AND MENTAL HEALTH: FORMATIVE INTERVENTION FOR TEACHERS

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Introduction: Health Education in schools has been a goal of health policies at national level, especially from 1997. Consequently, schools and teachers expressed the need to broaden and deepen their knowledge in other areas to develop more specific and systematic interventions. Mental Health (MH) and Quality of Life (QOL) are priority health areas, so, it was elaborated a workshop aimed at teachers.

Objectives: 1) Developing knowledge about MH and QOL; 2) developing promoting strategies of MH and QOL; 3) including MS and QOL in the educational project of the school and class activities plan.

Methods: Take part in this workshop 12 teachers from 2nd and 3rd cycles. The workshop had 15 classroom hours and 15 hours of autonomous work, a total of 5 sessions with intervals of a month. Contents of action: concept and approaches of MH and QOL and promoting strategies associated. In early action all teachers completed the WHOQOL-Bref. This questionnaire have four domains: physical, psychological, social relationship and environment.

Results: The attendance rate was 100%. All teachers performed the work proposed by presenting in the classroom. The WHOQOL-Bref show that 9 teachers presented the psychological domain with the lowest score of the four that make up the WHOQOL-Bref (score between 45.8-70.8 in 100).

Conclusions: The psychological domain is the most affected area in these 12 teachers. Participation and the tasks in the sessions and the work carried out showed intense interactivity. Critical reflection performed by the teachers presents an evaluation of very good and excellent in all its parameters. The results shows that the areas of MH and QOL reveal themselves generate interest and training in this regard, we point to new experiences in other school contexts.

Keywords: Health education. Mental health. Quality of life. Teacher training.

STUDENTS WITH INTELLECTUAL AND DEVELOPMENTAL DIFFICULTY AND EDUCATION FOR VALUES – WHAT PROSPECTS?

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Introduction: Educating for Values of Teachers requires an active role in the formation of participatory citizens.

Objectives: This study seeks to understand the conceptions of Teachers about the Values in Education for Students with Intellectual and Developmental difficulty.

Methods: The ones used are within the qualitative and quantitative paradigm, with recourse to a semi-structured interview and a questionnaire survey as instruments of data collection. The sample in study was 107 teachers of the 2nd and 3rd cycles of schools in the region Lafões. As for qualitative research, we had the participation of five Teachers of the 2nd and 3rd cycles of basic education.

Results: The teachers revealed that Education for Values can be at the service of social inclusion of students with Intellectual and Developmental Difficulties and the essence of their personal and academic lives, with a strong contribution to their holistic training. They considered that the objectives pursued by the Law on the

Education System, particularly in the area of values are those that education should promote, to comply with Decree-Law n.º 6/2001 of 18 January. Most participants operationalize this area in their teaching practices aimed at personal, moral and social development of students with Intellectual and Developmental slight difficulty.

Conclusions: There was sharing of experiences and cooperation between regular teachers and other mentors in relation to this theme, including Special Education teachers. There was recognition of the contribution of school, with regard to Education for Values, as well as attached importance to the role the family as an agent of development socialization, personal and social morality of the students, even though this is not always what happens.

Keywords: Special education. Intellectual difficulty. Values.

AGING, CONTINUING CARE AND NURSING TRAINING: ANALYZING AN ACTION SYSTEM

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Introduction: Nursing education takes place through linkages with health services and it is necessary take into account the needs for care in the face of demographic developments. Population aging and the increase of people in situations of dependency require new responses in terms of health care. Therefore, the nursing education cannot be separated off this reality. We seek to respond to the needs offering training in this area, however it is necessary to understand the dynamics and action systems of this process.

Objectives: Analyze the cooperation for training in nursing in context of continuing care.

Methods: Using qualitative methodologies, nurses of two health units, nursing teachers and students were interviewed (consented responses and authorization from the organizations were obtained).

Results: We found that different professional involved in the cooperation process, see it as a good experience, because of the involvement of professionals from work contexts during theoretical training and articulation made between school and health institutions, before and during the clinical teaching.

Conclusions: Teachers, nurses and students consider essential the training in continuing care, as well as the adoption of a system action that promote cooperation because this increases sharing and dissemination of knowledge, both theoretical and practice.

Keywords: Nursing training. Cooperation. Continuing care.

12. HEALTH AND VIOLENCE AT SCHOOL, WORK AND FAMILY

PREVALENCE OF DOMESTIC VIOLENCE DURING PREGNANCY

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Introduction: Domestic violence against women is a situation occurs mainly in the family's intimacy and can be inflicted by the partner/spouse. This kind of violence is considered by the World

Health Organization as a public health issue that has an impact on women's health throughout their lives, including during pregnancy and puerperium.

Objectives: To determine the prevalence of domestic violence during pregnancy in physical, psychological and sexual dimensions.

Methods: Quantitative, descriptive and correlational study, using a non-probability sample of convenience, consisting on a total of 852 postpartum women, from which 370 were victims of domestic violence according to criteria adopted by the modified scale of prevalence applied between February and June 2012 in two Portuguese public health institutions.

Results: The prevalence of domestic violence during pregnancy was of 43.4%. A total of 21.9% of physical violence was registered, among which 11.7% was mild, 3.2% moderate and 7% severe; the psychological violence was of 43.2%, among which 24.9% was mild, 2.9% moderate and 15.4% severe; and the sexual violence was of 19.6%, within which 15.1% was mild, 3.1% moderate and 1.4% severe. Only 7.2% of the women had admitted to be victims of violence and of those ones, 78.1% identified their partner/spouse or ex-partner/ex-spouse as the aggressor.

Conclusions: The prevalence of violence in pregnant women can be as high as in the general population. The psychological violence was the more prevalent during pregnancy and most of the women did not identify themselves as victims of violence. These results make us rethink the strategies in place so that intervention programs can be implemented to detect these violence cases.

Keywords: Prevalence. Domestic violence. Pregnancy.

HEALTHY SOCIAL BEHAVIOURS: A DEVELOPMENTAL APPROACH ON RISK FACTORS DURING ADOLESCENCE

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Introduction: Adopting a developmental perspective implies embracing the complexity of antisocial behaviours in adolescence, a life stage defined by multiple and profound changes in numerous dimensions and during which antisocial conducts are particularly prevalent and present important specificities.

Objectives: This research aims to understand the relation between antisocial behaviour and several personality, self-concept, social skills, family environment and socioeconomic dimensions.

Method: An occasional sample of 489 participants (60,5% female; 39,5% male) with an average age of 12.61 years old, were asked to fill a sociodemographic questionnaire along with the Portuguese versions of Youth Self-Report, Social Skills Questionnaire – Student Form, Family Environment Scale, Piers-Harris Children's Self-Concept Scale-2 and Eysenck's Personality Questionnaire-J. Their parents also answered the Portuguese version of the Child Behavior Checklist and a sociodemographic questionnaire.

Results: After a multiple regression analysis, we verified the predictive role of physical and behavioural self-concept, as well as of psychoticism (typically associated with impulsive traits), of conformity to social rules and of the organization within the family on adolescent antisocial behaviour.

Conclusions: With these results in mind, a first step is taken towards a prevention program for antisocial behaviours mainly focused on individual perceptions. Hence, we begin to build the foundations of a program aimed at specific individual issues – impulsivity, empathy, engagement in socially adjusted interactions and self-concept – but also at family management issues.

Keywords: Antisocial. Adolescence. Development. Risk. Factors.

DETERMINANTS OF ABUSE AND ABUSE IN CHILDREN

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Introduction: Maltreatment and abuse of children have been considered a problematic of modern societies essentially because there is a greater exposure of the subject. Therefore, health professionals, particularly nurses have come to pay heed to this issue in order to prevent, detect, signal, track and route the mistreatment and abuse of children. Knowledge about the determinants that lead to the onset of mistreatment and abuse of children is crucial to the development of health interventions in this target group particularly through partnerships with schools. The objectives of this work focus on characterize the victims of mistreatment and abuse and also identify and analyze which are the determinants of ill-treatment and abuse.

Methods: Integrative literature review, in which eight articles (in Portuguese, English or Spanish) were selected and analyzed from recognized published data bases, with a time limit of ten years.

Results: The analysis of articles permitted to identify the determinants that are associated with maltreatment and abuse of children. Determinants such as age, gender, perpetrator, family, social context, type of mistreatment and abuse, usually found themselves associated with more than one type of mistreatment and abuse.

Conclusions: Nurses working within multidisciplinary teams on the implementon of projects, in partnership with the child and family in differents contexts (especially in the schools), have a key role in the prevention of mistreatment and abuse in children by owning knowledge and means (support network) that favor the stopping of the cycle of violence.

Keywords: Sexual abuse. Children. Abuse children.

INTERVENTION OF ANTI-VIOLENCE IN SCHOOL: IMPLEMENTATION AND RESULTS

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Introduction: Health Education in schools has had an important role in raising awareness of issues that go beyond the curriculum. School violence is a phenomenon with potentially dramatic consequences, especially in the victim, bully, family and the whole school community. In this sense, we developed a project in a Vertical Group of Schools of Portugal (VGSP) that energized the school about the bullying prevention.

Objectives: To characterize bullying in a group of students attending the VGSP and evaluate a program of prevention / intervention, involving the whole school community.

Methodology: We performed a diagnostic evaluation (1st time: n = 313) in a random, stratified sample of students through questionnaire "Diagnosis of Bullying at School" of the Directorate-General of Health. Subsequently, an intervention program called "We and the Others". In the end, further evaluation was conducted (2nd time: n= 298).

Results: The extent of bullying found is consistent with the results of the literature decreasing from 14.6% to 10.7% of students who reported having been victims in the past two months. With regard to bully provokers, the results showed differences in the intensity of the phenomenon, revealing a decrease of verbal aggressiveness behaviors between the two points in time ($t(280) = 2.40, p = 0.017$).

Conclusions: It is important that this topic be part of the educational program of the AVENP. Bullying has changing characteristics and the School has the role of monitoring this phenomenon in a longitudinal

logic to modify behaviors. This program has implications for pedagogical practices that promote the mental health of students.
Keywords: Bullying. Program development. Health education.

13. SAFETY AND QUALITY IN HEALTH

PRACTICABILITY AND RELEVANCE OF GUM APPROACH FOR COMPUTING MEASUREMENT UNCERTAINTY IN BLOOD BANK SCREENING TESTS

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Introduction: Blood bank laboratories must select and compute measurement uncertainty when they have ISO 15189 accredited methods or tests. The measurement uncertainty determination shall be performed considering the relevance of its output to clinical decision (risk of false results, safety of the blood components receptor).

Objectives: Demonstration of measurement and importance of measurement uncertainty models fulfilling GUM principles (modeling and empirical approaches) in the context of blood bank.
Methods: Measurement uncertainty computed through modular (partial derivative, and Monte Carlo models) and empirical (intralaboratory, interlaboratory, and external quality assessment (EQA)/proficiency testing (PT)) GUM models using an anti-HCV screening immunoassay net counts from the reactivity between human antibodies and test recombinant antigens.

Results: Demonstration of the practicability of GUM models using a spreadsheet software, and the recommendation of partial derivative and Monte Carlo models for manufacturer of tests under research and development, and intralaboratory and interlaboratory models for blood bank. The EQA/PT model isn't recommended due to the effect that laboratories' group heterogeneity might have on the MU estimation (over-evaluation).

Conclusions: Evaluation of measurement uncertainty is a critical step to verify the uncertainty on screening immunoassays clinical decision point and to permit the classification of results also according to an "indeterminate zone" focusing on post-transfusion safety.

Keywords: Blood bank. GUM. ISO. Screening test. Uncertainty.

DIAGNOSTIC MODELS FOR COMPUTING MEASUREMENT UNCERTAINTY IN BLOOD BANK SCREENING TESTS

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Introduction: The European Union regulation for blood banks does not require the evaluation of measurement uncertainty in virology screening tests. It is required when screening tests are accredited

by ISO 15189 guideline complying with the principles of the Guide to the Expression of Uncertainty in Measurement (GUM). However, GUM is intended for numerical quantities, not for ordinal quantities where the result is expressed by a positive/negative results. Blood banks with ISO 15189 accredited screening tests could evaluate the uncertainty on cutoff point fulfilling GUM or consider an alternative (to GUM) model focused on the probability of results.

Objectives: This article discusses and proposes alternative (to GUM) models intended for screening tests validation, i.e., clinical sensitivity, clinical specificity, area under receiver operating characteristic (ROC) curve, where the outputs could be viewed as an alternative uncertainty result concept.

Methods: Example applications are provided for an anti-hepatitis C virus (HCV) test where calculations were performed using a commercial spreadsheet.

Results: The results show that the alternative (to GUM) models could be performed in blood bank laboratory satisfying ISO 15189 requirements. The determination of false negative results probability (β -error) is critical to the evaluation of post-transfusion risk.

Conclusions: The measurement uncertainty of screening immunoassays results can be determined by alternative (to GUM) models. The featured models allow the laboratory to claim the performance requirements for the measurement uncertainty and these determinations could be regularly reviewed.

Keywords: Blood bank. ISO. Probability. ROC. Uncertainty.

THE LITERACY IN PROFESSIONAL NURSING IN PERIPHERAL VENOUS CATHETERIZATION PROCEDURES – A SYSTEMATIC REVIEW

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Introduction: The peripheral venous catheterization is a common practice in the hospital setting with risk of nosocomial infections. Few empirical studies have evaluated the relationship between nurses' knowledge of national and international recommendations on this procedure and its applicability in clinical practice.

Objectives: To know which scientific evidence on the literacy of nurses in this procedure.

Methods: This is a Systematic review of scientific studies published in reference databases, between 2009 and 2014. Survey conducted in April 2014, were selected following the PICOD model and previously defined inclusion/exclusion criteria.

Results: Mostly nurses have knowledge about the guidelines of peripheral venous catheterization procedure, however not always mobilize for the provision of nursing care. For example, 89.7% of nurses said they needed to wear gloves in the salinization of catheter, yet only 30.5% used gloves (Moncaico & Figueiredo, 2009, p. 623-624). Also the educational activities allowed reflective and update the knowledge of professionals about this procedure times, conceiving objective and desired changes in behavior and increase adherence to recommendations, with consequences on the applicability of this quality of care. For example, Ahlqvist et al. (2006 apud Oliveira & Parreira, 2010, p.142) mentions that after the implementation of the guidelines, the number of satisfactory nursing care increased by 12%.

Conclusions: It was found in the analyzed studies that there is a disparity between theoretical and observed nurses in providing nursing care in this procedure. Also identified as necessary to establish the practice of continuous education, effective and integrated. We recognize the contribution as required for further research in this area.

Keywords: Peripheral venous catheterization. Nursing. Literacy.

14. HEALTH AND ADDICTIVE BEHAVIOURS

ABSTINENCE AND ALCOHOL CONSUMPTION AMONG STUDENTS 8TH GRADE: THE INFLUENCE OF PERSONAL, FAMILY AND SOCIOCULTURAL SPHERES

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Introduction: Among the young, the regular or alcohol abuse seems, allying to the individual factors that come together to generate other risk health behaviors, in social environment, including family and school. Currently, alcohol is the most widely consumed psychoactive substance in the world. In the Portuguese case, the Alentejo is the region that registers higher consumption among students.

Objectives: This study aimed to know the personal influences of family, group membership and the school environment, on the habits of abstinence and drinking among adolescents from the 8th grade.

Methods: We developed a qualitative investigation using the direct method of data collection. The study was conducted in a secondary school with 3rd Cycle of Basic Education of the District of Évora, located in the Central Alentejo, Portugal. Comprehensive semistructured interviews were conducted. The sample consists of ten students, five non-consumer-five consumers, aged between 13 and 15 years old.

Results: The trial takes place between 12 and 14 years old as a result of curiosity, explicit or tacit motivation, "styling", the environment, and the fun of observing behavior. Among the effects of intake indicated as motivators for consumption stands out the reach states of joy and good disposition. Family members tend to encourage moderate drinking on festive occasions. The elements of group membership tend to motivate, explicitly, the intake between pupils consumers. The school promotes initiatives on the theme.

Conclusions: The consumption of alcohol among young 8th grade suffers the personal, family and group belonging, despite the legal prohibition of consumption in public spaces and access to the public influences. The initiatives in school tend to have no effect.

Keywords: Alcohol. Abstinence. Consumption. Teenager.

PROBLEMS RELATED TO ALCOHOL: A CONSTRUCTION OF A MODEL OF AN INTEGRATED INTERVENTION

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Introduction: Problems related to alcohol (PRA) has become one of the most serious public health problems worldwide, national and regional level. Being a problem which affects the Alto Minho region (cf. Morbidity and mortality indicators), a structured intervention in this area has a recent history and involves basically three counties. On the other hand, the adopted strategy is characterised by having a trans-disciplinary character, but mostly focuses its attention to reducing individual damage and intervening in schools. Thus, our proposal centres on an action-expansion, even though in a phased manner.

Objectives: Implement an integrated approach in the framework of the PRA at the Health Center of Caminha, maximizing coordination between the Community Care Unit, Personalized Health Care Unit and Family Health Units and intervention of School Health (synergies between programs).

Methods: Document analysis, group focus to diagnose the situation and construction of the participated action plan, involving different levels of prevention.

Results: The intervention was consensual in three axes: Providing care across the life cycle, School Health, Clinical Supervision, development of the information and monitoring system.

Conclusions: This is a project locally-based, built with the people, with 4 intervention levels of prevention.

Keywords: Evidence-based practice. Problems linked to alcohol. Empowerment.

15. HOSPITAL INFECTIONS

INSIGHTS ON THE EVOLUTION OF BACTERIAL SUSCEPTIBILITY EXPOSED TO MULTIPLE ANTIBIOTICS: A TRIENNIAL EPIDEMIOLOGICAL STUDY

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Introduction: The emergence and propagation of multi-resistant bacteria in the hospital environment have become serious epidemiological and therapeutic problems. It is essential to update data regarding the susceptibility to the most commonly used antibiotics in each hospital, allowing obtaining specific resistance patterns to define the antibiotic therapy.

Objectives: This study aims to establish a profile of susceptibility vs. resistance for different microorganisms isolated during 3 years (2009-2011) using 3300 clinical isolates of different biological samples obtained from different hospital units belonging to Centro Hospitalar de Trás-os-Montes e Alto Douro (CHTMAD).

Methods: Identification and susceptibility tests were done using microdilution plate method and results were submitted to principal component analysis (PCA).

Results: Methicillin resistant *Staphylococcus aureus* (MRSA), *Enterococcus faecium* and coagulase negative *Staphylococcus* (CNS) seem to be the most concerning Gram positive microorganisms. For Gram negative species, despite the high resistance presented by Enterobacteriaceae producing extended-spectrum beta-lactamases (ESBL) to β -lactamic antibiotics, imipenem is still a good therapeutic option, as well as fosfomicin (for urinary infection). *Stenotrophomonas maltophilia*, *Pseudomonas aeruginosa* MR and *Acinetobacter baumannii*, are progressively acquiring higher resistance to these antibiotics, mainly to imipenem, cotrimoxazol and even aminoglycosides (tobramycin and gentamycin).

Conclusions: Overall, the developed resistance seems to be directly associated with antibiotics use and, therefore, studies centered in multi-resistance to antibiotics are crucial to establish dynamic protocols adequate to specific resistance vs. susceptibility profiles.

Keywords: Multidrug-resistant microorganism. Surveillance.

WILD MUSHROOM EXTRACTS AS INHIBITORS OF BACTERIAL BIOFILM FORMATION

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Introduction: Microorganisms can colonize a wide variety of medical devices, putting patients in risk for local and systemic infectious complications. These microorganisms are able to grow adhered to almost every surface, forming biofilms. The use of natural products has been successful in the discovery of new medicine, and mushrooms could be a source of natural antimicrobials.

Objectives: The present study reports the capacity of wild mushroom extracts to inhibit in vitro biofilm formation by multi-resistant bacteria.

Methods: Four Gram-negative bacteria biofilm producers (*Escherichia coli*, *Proteus mirabilis*, *Pseudomonas aeruginosa* and *Acinetobacter baumannii*) isolated from urine were used to verify the activity of *Russula delica*, *Fistulina hepatica*, *Mycena rosea*, *Leucopaxillus giganteus* and *Lepista nuda* extracts.

Results: The results obtained showed that all tested mushroom extracts presented some extent of inhibition of biofilm production. *Pseudomonas aeruginosa* was the microorganism with the highest capacity of biofilm production, being also the most susceptible to the extracts inhibition capacity ($\geq 50\%$). Among the five tested extracts against *E. coli*, *Leucopaxillus giganteus* (47.8%) and *Mycena rosea* (44.8%) presented the highest inhibition of biofilm formation. The extracts exhibiting the highest inhibitory effect upon *P. mirabilis* biofilm formation were *Sarcodon imbricatus* (45.4%) and *Russula delica* (53.1%). *Acinetobacter baumannii* was the microorganism with the lowest susceptibility to mushroom extracts inhibitory effect on biofilm production.

Conclusions: This is a pioneer study since, as far as we know, there are no reports on the inhibition of biofilm production by the studied mushroom extracts and in particular against multi-resistant clinical isolates.

Keywords: Clinical isolates. Biofilm. Mushroom extracts.

USE OF OZONE TO DISINFECT THE HANDS OF HEALTH PROFESSIONALS

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Introduction: The practice of hand washing is very important to eliminate microorganisms from the skin, preventing the spread of disease, protect against the aggressions of the environment. The problem is the low adherence and neglect of health professionals in carrying out this practice. Ozone gas has interesting microbicide characteristics with efficient action on a large number of microorganisms, including resistant pathogens and does not induce microbial resistance.

Objectives: The aim of this study was to evaluate the use of ozone to disinfect the hands of health professionals.

Methods: After approval by the CEP (# 084/11) and accepted by the WIC health professional volunteers to UBS-Santarém (PA) standard procedure was performed (hand washing with soap), initial microbiological collection with sterile swab and processed

in the laboratory. Later the volunteers were randomly divided into two groups (n = 6): G1-application of ozone gas (1 min, 33 mg/L) and G2- ozonated water (1 min, 10 ppm), and final microbiological sampling.

Results: The results showed significant ($p < 0.05$) in both microbial reduction techniques. The protocol with ozone gas was more efficient in microbial reduction ($96.4\% \pm 10.4$) compared with ozonated water ($69.3\% \pm 8.1$) ($p < 0.05$). It is believed that future new protocols based on these technologies may have applicability in out patient and hospital settings.

Conclusions: The use of ozone in the techniques of gas or ozonated water was effective in reducing microbial and disinfection of the hands of health professionals.

Keywords: Ozone. Decontamination. Control of cross infection.

16. OTHERS

NURSING STUDENTS' DIFFICULTIES RELATED TO PROVIDING CARE OF PEOPLE FROM DIFFERENT CULTURE IN TURKEY

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Introduction: Nurses should know cultural factors underlying health and diseases, differences and similarities in values and beliefs about health care for improving quality of care.

Objectives: To determine the difficulties experienced by nursing students related to care of people from different culture in Turkey.

Methods: This descriptive study was conducted 270 nursing students (in March 2014) at School of Health Sciences in Nursing Department of Mugla Sıtkı Kocman University.

Results: 71.8% of the students were female, 94.8% were Muslim, 11.8% were from Southern East region of Turkey. 72.9% of them reported that they gave nursing care to individuals from different cultures and experienced difficulties when providing care. Half of them had language problems, also 18.5% of them declared that the patients did not want to receive care from male nurses, and 24.4% rejected nursing care. They emotions they faced because cultural differences were: pessimistic feelings and worry (29.2%), despair (16.6%). Also, they reported that they did not know what to do (29.6%) and thought nursing was not suitable for them (10.3%). Their coping methods with these difficulties were: asking help from patients' companions (29.2%), other health care workers (32.5%) who speak the same language with the people or professional translators (18.8%). Most of them indicated the need education about cultural diversity.

Conclusions: Since nursing students give care to individuals from different cultures and face with some problems, it was concluded that cultural diversity courses should be included in nursing curriculum.

Keywords: Nursing students. Different culture. Nursing care.

PORTUGUESE VERSION OF THE CLINICAL EFFECTIVENESS AND EVIDENCE BASED PRACTICE QUESTIONNAIRE

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Introduction: In the Portuguese context, there is the unavailability of validated instruments to provide accurate assessment in a systematic way of nurse's skills regarding evidence-based practice, allowing structuring and implementing intervention strategies to encourage their generalized dissemination and adoption.

Objectives: Describe the process of translation and linguistic validation and cultural context for the Portuguese Questionnaire Clinical Effectiveness and Evidence-Based Practice (EBPQ) originally developed by Upton & Upton (2006).

Method: We developed a methodological and transversal study. A translation and a retroversion according to usual standards was performed. In determining the psychometric characteristics of EBPQ was used the Principal Component Analysis with Varimax orthogonal rotation according to the method followed by confirmatory factor analysis. Internal consistency was assessed by Cronbach's alpha value. Data collection occurred between December 2013 and February 2014.

Results: Participated 358 nurses exercising clinical practice in a hospital centre in northern Portugal. The EBPQ presents 20 items and three subscales: Practices ($\alpha = 0.74$); Attitudes ($\alpha = 0.75$); Knowledge / Skills and Competencies ($\alpha = 0.95$), with an overall internal consistency of $\alpha = 0.74$. In the model tested obtained an explained variance of 55.86%. The model showed a good fit: $\chi^2(167) = 520,009$; $p = 0.0001$; $\chi^2/df = 3.114$; CFI = 0.908; GFI = 0.865; PCFI = 0.798; PGFI = 0.678; RMSEA = 0.077 (IC 90% = 0.07-0.08).

Conclusions: Through confirmatory factor analysis it was demonstrated that the questionnaire is valid and appropriate for use in the studied context.

Keywords: Evidence based practice. Methodological study.

EVIDENCE BASED NURSING PRACTICE: ONE EXPLORATORY STUDY BETWEEN DIFFERENT CARE SETTINGS

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Introduction: Currently, the importance of a clinical practice based on the best available evidence justifies the development of investigation to construct a situational diagnosis that allows to identify in different contexts of care, barriers, attitudes and practices towards an evidence-based nursing.

Objectives: In this investigation we aim to identify barriers regarding the adoption of an Evidence Based Practice (EBP) in different care settings and describe the main nurse's attitudes and practices in relation to PBE.

Methods: We developed a cross-sectional study in a local health unit in the north of Portugal including nurses working in a hospital and in several primary health care settings. Data collection occurred in two distinct stages: between December 2010 and March 2011 and between March and July 2012 Through a convenience sample we applied the Portuguese version of the "Attitudes Towards

Evidence-Based Practice Questionnaire “ to 345 participants, the rate of response of 70.7% (n = 244). We proceed to univariate and descriptive statistics and performed the t Student and the chi-square (χ^2) tests.

Results: Nurses demonstrated a positive belief in supporting practices based on research, believing that this will contribute for a better future professional development. Comparing the studied settings we globally verified a favourable perspective for the adoption of an EBP existing however facilitators whose mean is highest in the hospital context.

Conclusion: It has been noted the need for additional support regarding the adoption of EBP. Therefore is essential an integrated policy to streamline clinical research involving the active participation both of the clinical practice nurses and academic institutions.

Keywords: Evidence based nursing. Cross-sectional study.

ETHICAL PRINCIPLES OF JUSTICE IN MICROALLOCATION HEALTHCARE RESOURCES

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Introduction: In a context of scarcity prioritization patients is plagued with ethical dilemmas focusing on principles of efficiency and equity. To define reasonable criteria for microallocation decisions requires knowing the ethical principles of justice defended by society.

Objectives: This study attempts to: 1) identify and compare the opinion of two groups of the Portuguese society – people in general and health professionals, about the personal characteristics of patients they value when prioritizing them; 2) understand the reasons behind that choice in order to fit them under efficiency or equity orientations.

Methods: Using quantitative and qualitative methods a sample of 180 college students and 60 health professionals were studied. A questionnaire was developed with eleven hypothetical emergence scenarios. Respondents must decide and justify which patients to treat when only one bed is available. Patients are distinguished by personal characteristics summarized in three types: 1) inherent to the person (age, sex, race); 2) person's relations with others in society (having children; marital status; economic status; labor status) and 3) person's causal relation with illness (smoking, drinking).

Results: Findings suggest the: 1) existence of significant differences in the choices made by both groups with health professionals to choose more often assign equal priority to patient's; 2) coexistence of equity and utilitarianism orientations among both groups even though efficiency received the greatest support especially by health professionals.

Conclusions: Results suggest the acceptance of social criteria in the microallocation of health resources primarily for utilitarianism reasons.

Keywords: Rationing. Ethical judgments.

PECULIARITIES OF POST OPERATION PAIN AND NON-PHARMACOLOGICAL PAIN MANAGEMENT

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Introduction: Intensive and continuous pain after surgery has negative impact on patient's emotional and physical state. Problem of post operation pain and reduction of it by using

non-pharmacological management is relevant and not fully disclosed.

Objectives: 1) Assess the peculiarities of postoperative pain and the factors influencing it; 2) identify practices of non-pharmacological pain management after surgery.

Methods: Was made quantitative study. Statistical methods: Correlation, Student's Criterion, Anova test. Representatives sample 300 patients, who had surgery in past 2 years.

Results: 2/3 patients felt moderate or severe pain in the first days and 1/3 in few days after surgery. Women, younger people are more sensitive to pain than seniors. Postoperative pain is greater in urgent than in elective surgery. The highest postoperative pain is felt after Cesarean Section, abdominal operation. If the emotional state is worse pain is bigger. 3/3 patient got pharmacological pain treatment by doctors prescription ($p \leq 0.05$). Communication with relatives was frequently applied as non-pharmacological pain way (86.9%), book, magazine reading (46.3%), social media (27%), watching TV (24%). Psychological, spiritual, physical ways were rarely applied: relaxation (31.5%), breathing exercises (23.4%), prayer (29%). In respondents opinion non-pharmacological pain management was effective ($p \leq 0.000$). More than 2/3 participants would like to get more information about it.

Conclusions: Considering patients' interest, non damaging effect to the health, economical effect, possibility to reduce pharmacological treatment and implementation to the later postoperative period implementation of non-pharmacological pain management is beneficial in surgery and nursing practice.

Keywords: Postoperative period. Pain. Non-pharmacological pain management.

UNDERSTANDING IMMIGRANTS' ADHERENCE TO CHILD HEALTH SURVEILLANCE SERVICES IN PORTUGAL: HIGHLIGHTS FROM A GROUNDED THEORY

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Introduction: Immigrant children are a vulnerable group regarding health. Evidence suggests lower rates of their adherence to health services (vs non-immigrants, Javier et al, 2009), in general, and child health surveillance services (CHSS), in particular. Although the promotion of immigrant children's adherence to CHSS may be an important step in promoting their health, little is known about the determinants of their (caregivers') behavior.

Objectives: This study aimed to develop a Grounded Theory (GT) on the determinants of adherence to CHSS, of Cape Verdean and Brazilian immigrant child caregivers in Portugal.

Methods: 5 Focus Groups (n = 19) and 17 in-depth interviews were conducted, with Cape Verdean, Brazilian and Portuguese child caregivers, from heterogeneous socioeconomic conditions. Data was analyzed using the GT methodology of Strauss and Corbin (1990). **Results:** Adherence to CHSS is a nuclear and multidimensional concept with several determinants at different levels of analysis. Some of these main determinants are: immigrants' socioeconomic conditions; (lack of) support for children's care in the host country; (cultural) beliefs about recommended interventions; the degree of similarity between consults/health-care providers of origin and host countries; (cultural) differences between caregivers' and health-care providers' practices.

Conclusions: These findings may contribute to increase the knowledge about immigrants' (non)adherence behaviors, especially those that aim at health promotion. Also, our findings may point to important direction for further research and intervention aiming at the improvement of immigrants' adherence to CHSS in Portugal.

Keywords: (Non)adherence. Immigrant children. Determinant.

HEALTH LITERACY PRIORITIES IN PRIMARY HEALTH CARE

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Introduction: Health literacy has been identified as a way to improve health care in Portugal. Several studies have shown that exist a relation between low levels of health literacy and poorer health condition.

Aims: To develop a methodology that allows the prioritization of health literacy needs from the physicians and citizens perspectives.

Methods: Survey with three dimensions: health management and wellbeing; access and utilization of health care services; informational resources. The survey was applied to 1404 citizens and 79 physicians, aiming to answer the questions what the people needs?

Results: Citizens priorities Dimension 1-1 understand the instructions on how to take a prescribed medicine; 2nd find information on treatments of illnesses that concern you; 3th find out what to do in case of a medical emergency; 4th understand the differences between treatment options; 5th find information about symptoms of illnesses that concern you. Dimension 2-find out information about 1st which transport should take to health services according to the situation; 2nd how to manage in the best way the health expenses; 3th the social sector support. Physicians priorities Dimension 1-1st (equal); 2nd (equal); 3th find out information about family planning and contraceptives methods; 4th find out information about sexual risk behaviors; 5th find information about healthy nutrition. Dimension 2-find out information about 1st schedules and general functioning; 2nd different services available in which unit; 3th to which service should go according to the personal needs.

Conclusion: Comparing the perspectives, there are significant diversions in the health literacy interests. It's crucial the development of mechanisms that allows people to participate in the health literacy promotion interventions.

Keywords: Health literacy. Primary health care. Empowerment.

NEUROMUSCULAR TAPING DOES NOT CHANGE FIBULARIS LONGUS LATENCY TIME AND POSTURAL SWAY

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Introduction: Ankle sprains are a common injury and fibularis longus plays an important role improving functional stability. Neuromuscular tape seems to improve muscle force, although little is known regarding its effect on latency time.

Objectives: To examine the effects of Neuromuscular Taping on fibularis longus latency time and postural sway in healthy subjects.

Methods: Twenty subjects were randomized into the experimental (n = 10, age 22.4 ± 3.0 years) and control groups (n = 10, age 23.5 ± 6.3 years). Before and after the intervention, postural sway was assessed on a force plate and fibularis longus latency

time was recorded with surface electromyography during a sudden inversion perturbation. In the experimental group, the Neuromuscular Tape was applied from the origin to the insertion of the fibularis longus and then subjects rested with the tape applied during 20 minutes. The control group rested during the same period without Neuromuscular Tape.

Results: At baseline, no differences were found between groups regarding age, anthropometrics variables, postural sway and fibularis longus latency time. In the experimental group, the application of tape did not change postural sway (COPx 3.8 ± 0.7 to 3.8 ± 0.6 cm, p = 0.989; COPy 3.0 ± 0.6 to 3.0 ± 0.5 cm, p = 0.742; COP area 11.8 ± 4.5 to 11.6 ± 3.3 cm², p = 0.858, total COP oscilation 94.6 ± 25.0 to 90.1 ± 19.3 cm, p = 0.0269, COP velocity 4.5 ± 1.2 to 4.3 ± 0.9 cm/s, p = 0.265) and fibularis longus latency time (93.7 ± 15.0 to 89.9 ± 15.6 ms, p = 0.102). No changes were observed also in the control group.

Conclusions: Neuromuscular tape did not enhance peroneal reaction time and postural sway in young healthy subjects.

Keywords: Latency time. Neuromuscular taping. Postural sway.

THE IMPACT OF ORAL HEALTH ON QUALITY OF LIFE IN TYPE-2 DIABETIC OLDER PEOPLE FROM INLAND NORTHERN PORTUGAL

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Introduction: The assessment of the relationship between oral health and quality of life (OHRQOL) is crucial to planning oral health care programs but there is paucity in research on such relationship among people with poor oral health.

Objectives: To assess the OHRQOL among older diabetic people from inland Northern Portugal.

Methods: A cross-sectional study was carried out among 250 type-2 diabetic individuals aged 65 years or more; 54% being female. Data collection included clinical examinations and structured interviews. The OHRQOL was assessed by using the OHIP-14 questionnaire (scale ranged from 0 to 56; higher scores indicating poorer OHRQOL). Multiple linear regression analyses were conducted separately by gender, using OHIP-14 score as dependent variable and oral health parameters (dry mouth, gingival bleeding, periodontal pockets, number of natural anterior and posterior teeth and prosthodontic rehabilitation) as explanatory variables. Multiple standardized regression coefficients (β) were obtained for variables that kept in the model through a stepwise procedure.

Results: Clinical examination revealed that women had poorer oral health than men. OHIP-14 score was significantly higher among women than among men (28.3 ± 13.30 vs 20.8 ± 12.28; p = < 0.001) Multiple regression analysis in male group showed that number of natural posterior teeth (β = -0.428; p < 0.001) and dry mouth (β = 0.225; p = 0.020) had significant association with OHIP-14 score. In female group there were no oral factors significantly associated with such score.

Conclusions: The OHRQOL showed a different pattern by gender. Among men the number of natural posterior teeth had impact on OHRQOL, highlighting the importance of strategies in preserving natural teeth throughout lifetime.

Keywords: Diabetes. Oral health. Quality of life. Elderly.

THE INFLUENCE OF ANXIETY, HOSTILITY AND TYPE D PERSONALITY ON HEALTH BEHAVIORS OF HIGHER EDUCATION STUDENTS

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Introduction: Several studies demonstrate that type D personality and negative emotions are associated with health risk behaviors and determine the incidence and progression of cardiovascular disease in initially healthy individuals.

Objectives: The main goals of this study were to evaluate the incidence of anxiety, hostility and type D personality and its influence on health risk behaviors in a sample of Portuguese college students.

Methods: In this cross-sectional study, 151 participants (87.4% female) were recruited from the School of Allied Health Sciences - Porto Polytechnic. Every student aged over 18 attending any of the graduate classes was included in the sample. Participants completed a brief sociodemographic and clinical questionnaire, the Lifestyle Questionnaire in Higher Education, the visual analog scale RICH, two subscales from the Symptom Checklist-90-Revised (hostility and anxiety), and the Type D Personality Scale.

Results: A mild hostility and anxiety disturbance was obtained with the sample. Type D personality was present in a significant number of students. A higher prevalence of anxiety was observed mainly with women; positive associations between hostility and smoking, alcohol and coffee consumption as well as a negative association between hostility, anxiety and type D personality and lifestyle were obtained. Finally, alcohol consumption, coffee intake, physical activity and diet assumed statistical relevance in explaining health behaviors.

Conclusions: Given the associations found between lifestyle and hostility, anxiety and type D personality, and considering the predictors of health behaviors found in this study, we conclude that higher education students may benefit from a premature evaluation in prevention of future cardiovascular disease.

Keywords: Anxiety. Hostility. Type D personality. Students.

THE RADBOUD FACES DATABASE: THE INFLUENCE OF THE SEX OF THE MODEL AND RESPONDENT IN THE FACIAL EXPRESSION RECOGNITION

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Introduction: The investigation of emotional phenomena using simple presentation slides containing drawings, words or images is affected by factors such as the low researchers' little control of the

emotion-inducing stimuli. The studies in the domain of emotion recognition may benefit from databases such as Langner et al (2010) Radboud Faces Database (RaFD) in which particular characteristics of the emotion-inducing stimuli, such as facial expression, ethnicity, age, sex and the models' gaze direction are controlled.

Objectives: To obtain Portuguese normative data, in a large community sample regarding the RaFD for the identification of seven facial emotional expressions (anger, sadness, fear, disgust, surprise, happiness, contempt) and a neutral expression; to study the influence of the sex of the model and the sex of the respondent in the performance of this task.

Methods: A convenience sample of 1246 male and female students from several university-level institutions participated in a task of facial expression recognition. Most were female (1054) and 192 were male. A total of 312 adult Caucasians emotional faces with frontal gaze were displayed. A mixed ANOVA, with "sex of the model" as the "within-subjects" factor and "sex of respondent" as the "between-subjects" factor, was conducted in SPSS 20.0.

Results: Similarly to the original study, our results show high recognition levels of the facial expressions presented. No differences in levels of recognition were observed regarding the sex of the model or the sex of the respondent, though some emotions were more easily recognized for one than for the other sex of the respondents.

Conclusions: The RaFD is adequate for the study of emotions in Portuguese studies. Moreover, its stimuli are gender-unbiased.

Keywords: RaFD. Emotions. Recognition facial expressions.

IMMEDIATE EFFECTS OF FOUR MAT PILATES EXERCISES ON POSTURAL SWAY OF YOUNG ADULTS WITH LOW BACK PAIN

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Introduction: The long term effects of Pilates exercises have been well documented, nonetheless the immediate effects of mat Pilates exercises on postural sway of subjects with low back pain (LBP) has not yet been studied.

Objective: To determine the immediate effects of four mat Pilates exercises on postural sway of young adults with LBP.

Methods: 46 university students with LBP participated in a randomized controlled trial in June and July of 2014. Participants were randomized to a Pilates (n = 23, 10 males; age: 21.8 ± 3.2 yrs; weight: 64.5 ± 11.5 kg; height: 1.70 ± 0.1 m) and a control group (n = 23, 9 males; age: 22.8 ± 3.6 yrs; weight: 62.5 ± 9.9 kg; height: 1.68 ± 0.1 m). Postural sway was assessed with a force plate (AMTI MSA-6), before and after the intervention or rest period. To assess postural sway, participants stood quiet in the force plate for 90s, with eyes closed on an unstable surface. The intervention lasted 20 min and consisted on four Pilates exercises: single leg stretch (level 1), pelvic press (level 1), swimming (level 1) and kneeling opposite arm and leg reach.

Results: At baseline, no differences were found between groups in postural sway. The Pilates group improved in all the postural sway values (COPx: 5.7 ± 1.0 to 5.1 ± 0.7 cm, p = 0.005; COPy: 4.4 ± 1.0 to 3.8 ± 0.7 cm, p < 0.001; Total COP Oscillation: 255.2 ± 55.9 to 210.5 ± 42.7 cm, p < 0.001; Area of COP: 11.5 ± 3.4 to 9.7 ± 2.7 cm², p = 0.02 and Velocity: 2.8 ± 0.6 to 2.3 ± 0.5 cm/s, p < 0.001). Control group only improved in velocity (2.8 ± 0.5 to 2.6 ± 0.5 cm/s, p = 0.009) and total COP oscillation (248.5 ± 45.3 to 237.3 ± 47.2 cm, p = 0.009). However, the improvements in the Pilates group were significantly greater than those of the control group.

Conclusions: Four mat Pilates exercises immediately improved postural sway in young adults with LBP.

Keywords: Pilates. Low back pain. Health and exercise.

ETHICAL DECISIONS IN PORTUGUESE PALLIATIVE CARE UNITS: A BURNOUT RISK FACTOR? A MIXED METHODS MULTICENTRE STUDY IN PT

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Background: Ethical decision-making in end-of-life care is often perceived as stressful.

Aims: To identify the most common ethical decisions made by Portuguese palliative care teams and how the making of such decisions relates to burnout among these professionals.

Methods: A mixed methods study was performed in 9 palliative care teams. Data was collected through questionnaires, Maslach Burnout Inventory, interviews and observations. Quantitative data analysis included both descriptive, univariate and multivariate logistic regression analyses; qualitative data was analysed inductively with categories and themes being embedded in the data. Results were triangulated to ensure reliability of the findings.

Results: Communication issues caused the most common ethical decisions, followed by forgoing treatment and terminal sedation. Although perceived as a risk factor for burnout in the discourse of the participants, quantitative data showed that the need to make ethical decisions was not significantly associated with higher burnout levels. A possible explanation for these findings could be found through the analysis of the transcripts of interviews and field notes: the decision-making process, in which an interdisciplinary approach took place and ethical resources were used, was identified as a protective factor against burnout.

Conclusions: Making ethical decisions is not associated with burnout among professionals working in Portuguese specialised palliative care units. This might be explained by the ethical deliberation and decision-making process followed by these teams. Promoting palliative care skills among other professionals providing end-of-life care might be useful to diminish burnout and other work-related problems related to making ethical end-of-life decisions.

Keywords: Ethical decisions. Palliative care. Burnout.

CHARACTERIZATION OF ACCIDENTS AT WORK IN THE OPERATING ROOM SERVICES OF THE PORTUGUESE PUBLIC HOSPITALS

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Introduction: The care provided in Operating Room Services (ORS) are highly specific and using high and sophisticated technology, exposing the workers to increased risks.

Objectives: To characterize the accidents occurred in the ORS of portuguese public hospitals.

Methods: Retrospective epidemiological study relating to accidents at work occurred in ORS of portuguese public health institutions in the period of January 1, 2009 to December 31, 2010. The information was obtained using the computerised registration notification of work accidents from the ACSS, referring to 1201 workers.

Results: Work accidents occurred in the ORS represented 10.1% of the total accidents recorded. There were higher frequencies of accidents in 2010, 54.1%, in ARS de Lisboa e Vale do Tejo, 47.4%, in females, 77.2%, in the professional category of nurses, 41.6%, in the age group 25-29 years, 20.8%, with length of service more than 10 years, 45.3% and practice timetable for shifts, 59.0%. On average the accidents occurred at 12.5 hours, between the 3rd and 6th hour of the beginning of work, 37.6%, and in the 3rd day after weekly rest, 37.9%. The action of most prevalent lesion was the needlestick/object-cutting, 66.3%, the type of injury was wounds, 52.3% and the body part most affected were the hands, 66.2%. Used personal protective equipment 50.4% of workers. Absenteeism resulted in 22.5% with a total of 7203 lost working days.

Conclusions: There was a high prevalence of needlestick injuries/cuts on nurses that could be preventable by which suggests the implementation of training measures and monitoring these situations in order to reduce them.

Keywords: Accidents Occupational. Health. Operating rooms.

NURSES AND SUPERVISION OF CLINICAL TRAINING

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Introduction: Clinical supervision gains an important role, understood as a process of guidance, monitoring and support of students, that makes the learning process easier and promotes personal and professional skills. The objective of the study is to analyze the prespetiva nurses on the management of clinical education in undergraduate nursing, because they are the ones who daily deal with the problems of educational, organizational, functional, ethical and professional countenance in the supervision of Clinical Training students.

Methods: It's an explorative, descriptive, correlational and transversal study, with quantitative nature, that comes next to an inquiry of questions, using CICRS (Clinical Instructor Characteristics Ranking Scale).

Results: From the results, we point out the fact that supervisor nurses are mainly female, with ages between 30 and 39 years, with college degree, and professional experience between 10 and 19 years. The most valued aspects are Nurse and Human Being. To the extent Teacher the most important indicator was on average transmit knowledge (6.55). For the Nurse dimension: to be competent as a nurse (9.92). To the Person dimension: be honest (9.19).

Conclusions: This study presents various important aspects to set the management of the supervising process, assuring the responsibility of the participants and promoting the safety and the quality of performances in the Nurse Clinical Teaching.

Keywords: Clinical teaching. Clinical supervision. Skills.

BURNOUT IN PERIOPERATIVE CONTEXT

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Introduction: Companies in a global context are going through moments of great development of information and technologies. In these environments Burnout is highly prevalent, this syndrome is

considered as one of physical and emotional stress that leads to a lack of motivation to work, leading to a progressive sense of inadequacy and failure.

Objectives: What level of stress Perioperative nurses for nurses in the Region of Tras-os-Montes and Alto Douro.

Methods: Non-experimental study, quantitative character, descriptive and correlational a transverse plane. The sample consisted of 81 participants, 27 perioperative nurses of the Local Health Unit of the Northeast (ULSNE) and 54 of the Hospital of Tras-os-Montes and Alto Douro. Three assessment instruments were applied: Maslach Burnout Inventory (MBI) of Maslach and Jackson, Nurse Stress Index (NSI) Harris and Inventory Troubleshooting (IRP) Vaz Serra.

Results: According to the NSI, the sample exhibits a considerable degree of stress, presenting the equivalent values in stressful subscales Workload 1 (Quantitative), Organizational Climate and Dealing with patients and family.

Conclusions: The level of Burnout, the MBI scale, it was found that the respondent sample has a low level of burnout and how the coping, through the IRP concluded that the sample globally, has reasonable coping mechanisms, showing effective strategies in terms of internal / external audit of problems in controlling the level and internalized / externalized aggression.

Keywords: Operating room. Stress. Burnout. Coping.

PSYCHOSOCIAL FACTORS AND WORK ABILITY IN PORTUGUESE FIREFIGHTERS

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Introduction: In recent decades there have been profound changes in the conditions and requirements of the job that inevitably brought implications for the health of workers. According to the annual report of the European Agency for Safety and Health at Work.

Objectives: In this study we try to understand the relationship between work ability and exposure to psychosocial risk factors in a sample of Portuguese firefighters.

Methods: This is a quantitative descriptive and explanatory cross-correlated study with 91 portuguese firefighters were studied in order to analyze the psychosocial risks COPSQ use, and ICT to assess the ability to work as well as the STAI and the BDI.

Results: The results obtained indicate that the ability to work in the firefighters decreases with age. We found that the greater the number of years of service, the greater the emotional demands and cognitive demands. There is a positive correlation between cognitive subscale requirements and levels of trait anxiety and depressed mood (p.000). Well as positive and statistically significant correlations between the subscales of "stress", "Burnout" and "trouble sleeping" with levels of trait anxiety and depressed mood.

Conclusions: As in previous studies that also concludes that firefighters in the study have good capacity for work. Finding as possible high response levels of resilience of these professionals.

Keywords: Work ability. Psychosocial risks. Occup health.

WORKPLACE HEALTH PROMOTION BY MODELLING POLLUTANT EXPOSURE RISK

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Introduction: Indoor air quality (IAQ) is an important factor to be controlled for the occupants' health and comfort. Indeed, indoor

air pollutants are ranked among the top five environmental risks to public health.

Objectives: To alert to the problem of IAQ and its impact on health, particularly users of pollutants equipment, and to provide an effective IAQ assessment to prevent pollutant exposure.

Methods: A CFD (Computational Fluid Dynamics) model for indoor air pollution was used to analyze predictions of pollutants dispersion in ventilated room, considering different locations of a common pollutant source in workplaces (photocopier). For this purpose, a uniform contaminant emission (formaldehyde) was considered. The emission rate considered is in accordance with the European Commission recommendation EU 21500.

Results: The indoor air quality obtained by the different simulated conditions was analyzed and compared. Distinct poor occupation areas, perfectly identified by concentration fields, were given. Once the contaminant concentration fields depend on the source location, it is very useful to choose the best place to install any pollutant indoor equipment in order to preserve breathing zones.

Conclusions: There is a link between ventilation rates and concentration of air pollutants in indoor environment. To reduce laboratory costs, a CFD model approach was presented for assessing exposure risk to indoor air pollutants. The results would be useful for making decisions to optimize the design procedure, establishing the best location to install polluting equipment, healthy occupied areas and their interdependence with ventilation systems. This would prevent the cutaneous and upper and lower respiratory tract problems related to the sick building syndrome.

Keywords: Occupational health. Exposure risk. IAQ. CFD.

DEVELOPING A PEDAGOGICAL LEARNING MODEL FOR THE TRAINING OF MINIMALLY INVASIVE SURGERY

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Introduction: The progressive development and application of Minimally Invasive Surgery (MIS) implies the need to provide training opportunities to the health professionals working in this area, that promote the contact and training with the constant technical innovations. This was the main goal of this two cross-border iberian partner organizations, the Jesús Usón Minimally Invasive Surgery Center, from Cáceres (Spain), and the Superior Health School from the Polytechnic Institute of Portalegre (Portugal), combining the most recent technologies with a Learning Model.

Objectives: This model intends to contribute to an appropriate set of learning plans on the MIS with a competency-based approach, providing a quality based training.

Methods: Pedagogical-based actions are supported on the knowledge of an activity and the perception of the difficulties expressed and manifested in the effectiveness of interventions, by all the components of the surgical team. So, the development on the pedagogical learning model for the training of MIS was based on an evidence-based experience, through a humanistic approach.

Results: The principal aim on this model is promote space to a Reflective Practice, focused in the theoretical learning model developed by Donald Schön (1983), based on the use of reflective techniques, as possibly one of the most pedagogical important elements in MIS training.

Conclusions: The model developed allows a content-based approach, on a learning working model that promotes a large pedagogical approach on different aspects related either by exploring theoretical concepts, based on the creation of scenarios and case studies, or either by the activities developed in simulated practice contexts, where the competency based learning in MIS is directly involved.

Keywords: MIS. Learning model. Training. Reflective.

CONCEPTUAL DESIGN OF TRAINING COURSES IN MINIMALLY INVASIVE SURGERY FOR NURSES USING NEW TECHNOLOGIES

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Introduction: The e-learning has become one of the methods of nurses training with more potential. However, despite the benefits to students, nurses opinion on the suitability of e-learning for training is hardly known.

State of the Art: An online survey filled by 112 nurses from Portalegre district has been used to assess the usefulness of e-learning platforms for the training of Minimally Invasive Surgery (MIS). Most nurses are inexperienced in MIS and their training in this field is inadequate, therefore, they are potential users of online training courses in MIS.

New perspectives/guidelines: The nurses motivation to perform training courses related to MIS are to increase their general knowledge of MIS, professional retraining, to share experiences with other professionals, to increase their skills for a safe surgical environment, improved care for patients and surgeons, and to know how to select the most appropriate tools.

Theoretical and practical implications: Based on these motivations, the design of training courses for nurses in MIS is proposed, consisting of a theoretical online part with topics such as care of patients in a MIS intervention; cleaning, disinfection and sterilization of instruments; surgical tools care; diagnostic and intervention techniques of MIS; basic fundamentals of MIS equipment. Then will follow a presential practical part with topics including solutions of the most frequent technical MIS complications; handling and maintenance of MIS equipment; assistance to various MIS techniques.

Conclusions: Due to the poor training in MIS of nurses, the conceptual design of a training course through the e-learning method is proposed, complementing its online theoretical learning with a part of presential practical training.

Keywords: Nursing. Training. Courses. MIS. E-learning.

TOTAL PRODUCTIVE MAINTENANCE AND PSYCHOLOGICAL SENSE OF OWNERSHIP

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Introduction: In a global market as we are experiencing nowadays, the search for competitive advantages over its competitors is one of the required strategies for companies that intend to survive.

This way, Total Productive Maintenance (TPM) Model provides the development of various methods, such as autonomous maintenance. This method resorts to different tools, in order to seek operators commitment to maintain optimal conditions for production and equipment performance.

Objectives: Evaluate operator's psychological sense of ownership in a section of a particular plant; in order to propose and encourage ways and make them able to promote high levels of productivity for operator's work.

Methods: Descriptive and cross-sectional study conducted in a convenience sample of 30 participants living in central Portugal. The Psychological Sense of Ownership was assessed by the Psychological Ownership Questionnaire (Avey et al 2009).

Results: Confirmed the existence of a psychological sense of ownership by operators for section areas and production lines of the factory, verifying both significant an positive association for 5 dimensions (Territoriality, Self-efficacy, Self-identity, Having a House and Responsibility), highlighting the General Warehouse, Palletizing and Ercas.

Conclusions: The implementation of TPM tools promoted the interaction of operators with the equipment, providing a continual attention in detention and anticipation of abnormalities that resulted in the reduction of failures, breakdowns and quality defects. The existence of a culture promoting a sense of psychological ownership ensures the commitment of workers and generates increased levels of productivity.

Keywords: Psychological ownership. Autonomous maintenance.

FIBROMYALGIA IMPACT ON QUALITY OF LIFE OF PEOPLE

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Introduction: Fibromyalgia (FM) is a chronic and painful syndrome, which manifests itself in the musculoskeletal system and has serious repercussions levels cognitive, emotional, physical and social factors impacting negatively on the Quality of Life of People.

Aim: To analyze the impact of FM on quality of life of people and to verify the extent to which socio demographic and clinical variables that influence quality of life.

Methodology: This is a quantitative, non-experimental, transversal, a logic of descriptive and correlational analysis. The sample consisted of 70 patients diagnosed with FM, who attend pain clinics in the Hospital Centre of Tras-os-Montes and Alto Douro EPE - Unit Hospital of Vila Real and consultation of Rheumatology Hospital Center-Tondela Viseu - Unit Hospital of Viseu. The instrument for data collection is a questionnaire consisting of socio demographic, clinical characterization, assessment of pain and Fibromyalgia Impact Questionnaire (FIQ). The statistic used was SPSS version 19.

Results: The sample is mainly female, lives together, has an average age of 56.97 years, has the 4th grade and is working on average 8 h/day. The data reveal that the variables that influenced the quality of life are: age, employment status, the "way they live"; practicing physical exercise and pain, being this last that represents the largest association.

Conclusions: The results support the multidimensionality and variability in the quality of life of patients with FM and show the need for health professionals get on board intervention programs in the community, in order to implement intervention strategies that minimize pain, functional disability and promote the quality of life of patients with fibromyalgia.

Keywords: Quality of life. Health professionals. Functional.

SLEEP QUALITY IN ADULT / ELDERLY USERS: IMPLICATIONS FOR THE REHABILITATION PROCESS

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Introduction: Sleep is a precious commodity, essential to a proper balance. So is constituted as a state of recovery physical and mental energy that is crucial for all people, in different age groups, particularly in the elderly, where the aging process itself causes changes in both the quantity and quality of sleep, the which affect more than half of the elderly over 65 years. Factors that interfere with sleep patterns are manifold. With hospitalization this process worsens, with negative repercussions on the therapeutic process in general and rehabilitation in particular.

Objectives: To evaluate the quality of sleep of users adults/seniors and verify its association with sociodemographic variables, clinical determinants of perception of sleep and chronic fatigue.

Methodology: This was a cross-sectional, descriptive, correlational, a quantitative. For this purpose a form was applied to 60 users, hospitalized, consisting of a sociodemographic form, a range of Chronic Fatigue and Sleep Quality Index Pittsburg (PSQI).

Results: Our sample is mainly composed of male clients, married, aged above 75 years, living with his family in the rural and mostly illiterate. All participants perform rehabilitation program in the morning, for an average 16-30 minutes and sometimes only feel able to deliver. The majority (55.00%) feel more active at night, sleep on average 6.8 hours, often waking up earlier than intended and (36.70%) feel they need more sleep than normally sleeps. Chronic fatigue is present in the vast majority of respondents.

Conclusions: The majority of participants (96.70%) had poor sleep quality, this being associated with older users, in women, the widowed and divorced singles, with the 1st course of study and those who have higher rates chronic fatigue.

Keywords: Sleep. Quality of sleep in hospitalized users.

BEING BORN A WOMAN IN TODAY'S SOCIETY... A PHENOMENOLOGICAL APPROACH FROM YOUNG WOMEN SPEECHES

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Introduction: Women have been conquering more space in society since the 20th century with the change of roles and the assumption of a new feminine condition.

Objectives: To ascertain how young girls see the contemporary woman in society.

Methods: Phenomenological study resorting to semi structured interviews, to 23 girls, from 15 to 24 years of age, customers of the Youth Sexuality Supporting Bureau, of the Portuguese Youth Institute, between February and March 2007, and use of the Max Van Manen phenomenology approach.

Results: The theme, ways of viewing women in society has emerged in the categories: the citizen woman, woman and academic life, woman and labour, affections and life in society. The young girls pointed out that currently women have more liberty, and have been acknowledge the same rights as men, even though society still has censorship expressions when confronted with some behaviour, particularly in the aspect of sexuality. Entry into the labour market, due to increased academic qualifications, as well as the need to help the family and to reassert as a person, solidified the woman as more independent and free. From the youths

speech one can also conclude that, if on one hand, women are still subject to professional discrimination due to gender on the other hand housework and child rearing is, for many families, a female imposition, resulting in an additional burden, which is often invisible and devalued.

Conclusions: It is evident the growing assertiveness of women in society, but some prejudice still exists and the need persists to continue invest in their self-empowerment and to understand that to be a woman is and always will be a social construction, consolidated in the relationships established with others.

Keywords: Woman. Social role. Prejudice. Empowerment.

CHILD'S ROAD TRANSPORT AS A PASSENGER: OF THE INTENT TO PROTECT INTO THE EFFECTIVE PROTECTION

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Background: The children's evaluation while passenger is an indicator of the child safety progress, allowing establishing improvement goals. In Portugal despite some positive evolution, there continues to be a mismatch between protect intention and effective protection.

Objectives: To evaluate the relationship between the intent to protect and effective protection in road transport of children during an awareness activity.

Methods: Cross-sectional and descriptive study, conducted by the Group for the Safety Alert (GAS) during the Children's Day 2014, with a intentional sample of 74 parents/car drivers, 77.0% male, mean age 37.4 years (SD = 5.74), and 105 children while passengers (mean age 6.55 years, SD = 3.59). We conducted assessment of road transport during a STOP operation in partnership with local authorities, applying a demographic questionnaire and registrant observed data.

Results: Of the Drivers, 42.5% were 12 years of schooling and all used the seat-belt. From the children 92.4% were using restraints systems (CRS), however in 47.6% not properly, regardless of gender (Chi square = 1.104, p = 0.576) and the drivers' schooling (Chi-Square = 0.093, p = 0.955), especially in children between 6-11 years (26.7%). In a distance of 500 meters 94.6% of drivers confirmed wear always seat-belts while only 79.7% always put the child in the restraint system. Traveling loose in the car 8.6% of children and 44.9% of those who traveled with passenger restraint system, this was inadequate, indicating however no significant relationship between the intention to protect and effective protection (Chi-Square = 3.591, p = 0.166).

Conclusions: The study reveals that there is still much to do to improve safety levels in children while passenger.

Keywords: Children's safety. Child restraint systems. Safe road transport. Children transport.

ACUTE CONSULTATION IN PRIMARY CARE: A PORTRAIT OF ITS USERS

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Introduction: The Acute Consultation in Primary Care aims to give response to acute situations, preventing the overcrowding of the Emergency Departments. The characterization of its users is crucial to improve accessibility to these types of consultations.

Objectives: The aim of this study is to relate the causes for attending acute consultations with social and demographic characteristics of its users.

Methods: An observational, analytical and cross-sectional study.

Population: Acute Consultations from a medical file. Control Group: Consultations for not acute causes belonging to the same file. Convenience sample, consisting of all acute consultations held in March and April of 2014.

Study variables: Gender, age and education. Data was retrieved from medical records in SAM® and processed in Microsoft Office Excel® and SPSS®. In order to accomplish the inferential analysis, we used the Chi2 and Mann - Whitney tests, with a significance level of 5%.

Results: 148 consultations, 98 of which were analyzed for reasons considered acute (66.2%). There was no relationship between gender and the motive ($p = 0.439$). It was found that users who attended acute consultation with real acute reasons were younger ($p = 0.001$) and more likely to have higher education levels ($p = 0.016$). There were no statistically significant differences between both groups for the remaining degrees of education.

Conclusions: Regarding the internal validity of the study, we assume the existence of information and classification bias. However, this study established the profile of the acute consultation users, allowing future interventions and improvement in the management of these consultations. More studies are needed on this topic, multicentric, using larger samples and confounding variables.

Keywords: Acute consultation. Primary care. Users profile.

LEADERSHIP AND KNOWLEDGE MANAGEMENT PRACTICES - THE CASE OF HEALTHCARE ORGANISATIONS

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Introduction: Technological innovation and subsequent changes in leadership assume an increasingly important role in organizations given their absence implies a high probability of error and a lower performance in terms of achieving the missions and visions set. Leaders are able to influence groups into adopting certain procedures before a problem occurs and their role is to provide strategic vision, motivation, effective communication and act as an agent of change, nurturing the creation of knowledge. Organizations should therefore pay particular attention to leaders, in particular their leadership style, which becomes crucial to knowledge management initiatives within an organization.

Aims: This study tries to establish a link between leadership and knowledge management. A model is set out using constructs from knowledge management, leadership and emotional commitment. The model was then applied to healthcare nurses.

Methods: A random sample was drawn, consisting of 265 nurses from a Portuguese health care organisation, representing 42% of the number of nurses in the organisation. A questionnaire was set out based on two validated scales for the Portuguese population: the LPC (least preferred co-worker) scale, and the Cardoso et al (2005) knowledge management scale.

Results: Although the path between the two constructs is not significant, the relationships between them are considered robust and explained by R^2 equal to 0.195.

Conclusions: The instrument for collecting data that enabled the study is reliable and valid psychometric studies demonstrated in the results to the hospital under study. This hospital's leadership creates a positive impact on the practices of KM, as mentioned in the literature review.

Keywords: Leadership. Knowledge management. Hospital.

THE ASSOCIATION BETWEEN INFANT DEVELOPMENT AND MOTHER-INFANT QUALITY OF INTERACTION IN FREE PLAY ACTIVITIES

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Introduction: The mother-infant quality of interaction may influence the infant development in different levels.

Objectives: To assess mother-infant quality of interaction, infant development and family resources and their interactions.

Methods: Descriptive, correlational study including a random sample of 42 Portuguese healthy infants and their parents. At 11 months, mothers described their infants' temperament using the Temperament Scale (Lopes dos Santos, Fuertes & Sanches-Ferreira) and identified their family resources with Family Support Scale Family Inventory (Dunst, Jenkins & Trivette); Family Needs Survey (Bailey & Simeonsson) and Parent Responsibility Scale (McBride & Mills). Child development was assessed using The Schedule of Growing Skills II (Bellman, Lingam & Aukett). At 12 months, mothers were observed and taped playing with their infants; videos were scored with Care-Index (Crittenden) to assess mothers's sensitivity.

Results: The quality of mother-child interaction was strongly related with infant development outcomes. The infants with better development indicators (e.g., manipulation, vision, speech-language, hearing, language, social interaction and cognition) tended to be more cooperative and had more sensitive mothers. Autonomy was negatively correlated with maternal control and social interaction. Speech-language was negatively associated with maternal passivity. Mothers with higher education levels received more help from fathers and exhibited higher scores on maternal sensitivity.

Conclusions: Maternal sensitivity is associated with infant development. In turn, infants with better developmental outcomes were more cooperative, engaged and reciprocal when playing. Infant development and mother-infant quality interaction are mutual affected.

Keywords: Infant development. Mother-infant interaction.

HEALTH CARE PROFESSIONALS PERCEPTION FACING THE SAFETY OF PATIENTS INPATIENT IN PALLIATIVE CARE UNITS

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Introduction: Due to the quality of life and health cares improval, the average life expectancy increased with a consequent increase in chronic and progressive diseases. (Neto, 2010). The growing number of Palliative Care Units in Portugal lead to the need of understanding what are the security numbers in what concerns cares in the health units and the occurrence of mistakes/accidents with the patient.

Goals: To analyze the influence of the health professionals' socio-demographic and professional variables on the occurrence of incidents/mistakes compromising the patient safety.

Methods: Transversal study with a descriptive-correlational focus. The “Questionnaire of Patient Safety”, from the author Olivério Ribeiro (2014) and collaborators, was used (the reliability was verified by the Cronbach’s alpha 0.771). The sample consisted of 146 professionals from units with chronic and palliative patients.

Results: The younger professionals (≤ 27 years), female gender and postgraduates/specialists are those who observe more frequently the incidents/mistakes, and so are the professional working in “Health Units” ($MR = 74.29$; $p = 0.000$). On the other hand, “Palliative Care Units” are those who less incidents/mistakes observe ($MR = 37.53$, $p = 0.001$). The “degree of seriousness of the observed harm” assumed as severe or death is the dimension with greater percentage, followed by “aggressive attitudes/behaviors” towards the patient and then the “infections”.

Conclusions: To assure the patients’ safety is a primordial aspect and should thus be worked daily in the professionals’ clinical practice review, so preventing mistakes/incidents associated to health cares.

Keywords: Patient safety. Healthcare professionals. Errors/i.

PROJECT IMPLEMENTATION OF THE NEW SYSTEM PERFORMANCE ASSESSMENT FOR NURSING CAREER

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Introduction: In the increasingly competitive global environment the process of performance evaluation should always be present in organizations within the human resources management, as it is a key tool to verify the individual performance. The new Ordinance for evaluating performance of the class of nurses is considered a major challenge for institutions, and should be a dynamic process.

Objectives: Seek the views of nurses on the new performance evaluation.

Methods: For the collection of opinions a semistructured interview to assessors and assessed was used, being a non-probabilistic convenience sampling during the month of March 2012. Nine nurses were asked for their assessment (one top nurse, four assessors, and four assessed) relatively to the performance evaluation, in order to identify their perception of the existent system.

Conclusions: This new performance evaluation has yet to be implemented in the institution. It appears through the interview with the nurse who occupies the top position that this will be a top priority for the institution in the near future, however there is a huge gap for a commitment and an act, that is, between what is said and what is acted upon for its successful implementation. According to the assessed, the most important would be a constant accompanying through the evaluation time, following the continuous feedback, so that the assessed know about the variations on their performance.

Keywords: Performance evaluation. Nurses.

MULTIDISCIPLINARITY AND PALLIATIVE CARE – AN ANALYSIS OF EVERYDAY WORK

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Introduction: Our work was based on sociological findings achieved in the frame of a project financed by FCT, which focuses upon the ways by which professionals of medicine, nursing and social work deal, in palliative care, with specific forms of social complexity. In

this communication the objective is to highlight the issues related to the importance of multidisciplinary care.

Methods: Data collection took place in three phases. We collected qualitative data in two palliative care units in Portuguese hospitals: first one, through direct, non-systematic observation; a second one, through ethnographic observation and a third one, through interviews. Data were analyzed using content analysis.

Results: We found that patients, families and professionals had different experiential careers, built on their relationship with illness and care. We also found in nurse professionals, the existence of rows with several years of work and in another group a short professional experience. These aspects influenced the forms of interaction established in the daily work. We also found that professionals build their action sustained in the multidisciplinary care in order to reduce the complexity associated with the tensions that daily emerge. This interaction and multidisciplinary work always aims to promote patient comfort, trying to lower the suffering.

Conclusions: The results of this work corroborate the importance of multidisciplinary care. In the case of palliative care, this multidisciplinary work emerges and also provides the daily goal of trying to promote “total comfort” to patient and their family. We believe that these results can be useful for health professionals and sociologists involved in the discussion and analysis of health professionals.

Keywords: Palliative care. Multidisciplinarity. Health.

FUNCTIONAL DIMENSION OF THE ACCESS TO THE HEALTH SERVICE IN THREE QUILOMBOS IN THE STATE OF PARÁ, AMAZONIA, BRAZIL

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Introduction: The quilombola populations are among the most vulnerable Brazilian groups in relation to health services.

Objectives: To determine the functional dimension of access to health services in three Quilombos with different ecological conditions in Amazonia.

Methods: This was a qualitative study with observational participation in the Quilombos: África; Santo Antônio and Mangueiras. Interviews with residents, managers and health professionals were analyzed based on the content analysis (Bardin 2012). A cross-sectional analysis of the access was performed as a service planning and management category, according to the re-interpretation of basic health care models using (Starfield 2002) and (Jesus; Assis 2010)’s studies.

Results: Health services work from the sanitarian-planner and sanitarian-campaigner models. The first is concerned with the ensuring of the planned distribution of resources in the service network and the results would be related to the gradients of supposed effectiveness and efficiency, achieved through the integration of resources from epidemiology and public administration. The second model is represented by the campaigns and health control of endemic diseases. It is based on the Brazilian hygienist historical reflection in the early twentieth century.

Conclusions: Health services adopt these operating models under the Brazilian system of allocation of funds for health. A national policy on access to health services is fundamental to allow achieving the National Integral Health Politics of the Black Population planned from a participatory logic and health equity promoting, consistent with the socio-cultural dynamics of the Brazilian Amazon and its Afro-descendant population.

Keywords: Health service. Afrodescendants. Unified health system.

QUALITY MANAGEMENT - PROCESS MANAGEMENT IN A HEMODIALYSIS UNIT

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Introduction: Assessment systems designed to sustain quality management, focus on process improvement and not in control of the employees responsible for work processes. This means emphasizing the metric of the process and not on the metric results. Employee participation is encouraged so in practice, through the so-called quality cycle, based on four stages (planning, do, check and act) that set more ambitious goals and continually encourage the development of the company / unit / institution.

Objectives: Develop a plan of activities, multiannual, to nursing staff with different areas of intervention, patient-oriented and interconnected.

Methods: Based on the integrated quality management in Clinical NephroCare Viseu, was designed a plan of action through the implementation of a set of projects, integrated, patient-centered. For each, we selected a nurse coordinator. We developed a descriptive study based on the retrospective data about the projects developed. 8 projects were developed in our unit.

Results: We managed to monitorize all vascular access per month (1680 analysis per year), to do two nursing consultations per patient per year and introduce the CIPE language in the diagnosis and nursing interventions. Every month is analyse all the medication prescribe to the patients and so we managed to reduce the bad consumption of medication. And with the projects related with the quality management we achieved in the clinical audits the result of a non clinical recommendation.

Conclusions: The management of the unit using a basis of quality management allowed to develop individual and collective skills that promoted, improving care, and a link between patient/nurse coordinator, exciting and stimulating, responsible for increasing the motivation of nurses.

Keywords: Quality management. Hemodialysis.

PATIENT SAFETY - IMPLEMENTATION OF A PROGRAM IN A HEMODIALYSIS UNIT

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Introduction: The errors resulting from clinical practices, usually have devastating for the patient, family and for all health professionals involved consequence. An English research found that 10% of patients admitted to the English national health system (NHS) have undergone a type of incident and almost half of these incidents were preventable. In a hemodialysis unit several procedures very often and with possible risks for the patient and healthcare professional, for example, a unit of the national average hemodialysis are performed appreciably over 30,000 punctures in a year.

Objectives: Implementation in Viseu NephroCare a system of corporate security for patients, called "Variance Clinic" based on "Seven Steps to patient safety" of the NHS.

Methods: The program called "clinical variance" has been available since the beginning of 2013, based on clinical data (EUCLID). Developed a study in the field of quantitative longitudinal research, exploratory, and descriptive through a retrospective analysis off all events that occur in our unit.

Results: After 12 months we can see that the results empirically confirm the expected events. It was related 313 events in total. The most frequent events were those related to patient volume and its weight, ie, hypotension (28.7%), cramps (9.5%) and vascular access problems (20.7%). Most events were identified as having a slight damage to the patient.

Conclusions: Implementing this system we could identify, evaluate and act on our most frequent complications. Another advantage of this system was the simple and practical monitoring and quantification of events, allowing a more effective contribution of the various collaborators unit on the problems.

Keywords: Patient safety. Hemodialysis.

PRO-ACTIVE AND PROSPECTIVE NURSING ROLE IN A HEMODIALYSIS UNIT

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Introduction: The KDOGI (2006) say it is not proven that prospective monitoring and surveillance of vascular access may prolong survival of vascular access, however, they foster the ability to save local access through the coordination of the teams involved, planning, corrective action of an elective rather than emergency procedures or replacement.

Objectives: Whether the active and prospective role of nursing in the detection of problematic vascular access was effective.

Methods: Developed a study in the field of quantitative longitudinal research, exploratory and descriptive. The assessment of access in our unit involves physical examination of the access flow, recirculation, Kt/V, venous and arterial pressures and problems with cannulation. Retrospectively identified all accessions were analyzed in the unit as dysfunctional, suspecting the presence of stenosis.

Results: 85 AV were detected with suspected stenosis, 88.2% confirmed by Doppler in consultation vascular surgery or angiography. Approximately 91.7% of AV changes manifested in the physical examination. The accesses that had stenosis, most were men, not diabetic and hypertensive around 48% are brachiocephalic AVF, only 9.3% were PTFE, 30.3% exhibited values of Kt/V < 1.2 and 64% had lower Qa to 600 ml/min. Mention that were detected even 8 stenoses in the vascular access maturation process. The most common etiologies were just anastomotic and most were resolved by PTA dilatation and 22.7% resolved surgically.

Conclusions: Given these values we can say that the role played by the nursing team in the early detection of dysfunctions, was extremely positive and contributes to the maintenance of and access to continuing improvement of nursing care.

Keywords: Vascular access. Hemodialysis.

CANNULATION USING THE BUTTONHOLE TECHNIQUE – APPLICATION IN ANEURYSMAL ARTERIOVENOUS FISTULA

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Introduction: Using the buttonhole technique for arteriovenous fistula (AVF) cannulation has advantages for staff and patients: less bruising, less failed punctures, shorter haemostasis time, less

scarring related to punctures, and reduced pain (Peralta, 2008): Its application in aneurysmal AVF is not consensual but Marticorena et al. (2006) mentions its use with decreased aneurysms in two AVF.

Objectives: Preventing the increase in the number and size of radiocephalic AVF aneurysms, by using the buttonhole cannulation technique.

Methods: We developed the analysis of this case study, about a patient with three pre-existing aneurysms was prepared for the buttonhole technique. We examined patient's vascular access to have no signs of stenosis or complications. A responsible nurse for puncturing was chosen and puncture sites away from pre-existing aneurysms were identified. Cannulation by the buttonhole technique was introduced.

Results: After one year we observed that: 1) There was an effective reduction of the size of the 3 pre-existing aneurysms (opinion corroborated by the patient); 2) there was a decrease in the hypopigmented areas of the skin.

Conclusions: The frequency and size of AVF aneurysms, which are associated with its frequent cannulation, appears to be reduced by using the buttonhole technique. Consequently, this may establish itself as an additional advantage achieved by its use and therefore guide towards a new line of research to validate and possibly corroborate the findings of this case-study.

Keywords: Vascular access. Hemodialysis.

AND WHEN THE CENTRAL VENOUS CATHETER IS THE (ONLY) ACCESS!

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Introduction: The prevalence of CVC in hemodialysis units has increased in recent years, largely due to the increase in the average age of patients on hemodialysis, the growing of associated comorbidities, circumstances that often dictates that this is the only vascular access possible to get. Is the responsibility of nurses to management of all vascular access in hemodialysis unit.

Objectives: Check whether patients with central venous catheter for long-term, assumed to be final access - no alternative (CVCD) show adequate results.

Methods: Developed a study in the field of quantitative longitudinal research, exploratory, descriptive correlational type, through a retrospective analysis of patients undergoing hemodialysis by CVC LD. The research took place over 24 months. Data were compared with a control group of patients with arterio-venous fistula (AVF group).

Results: 46 patients were analyzed CVC LD hemolytic treatment for at least 6 months. Of these, 31 patients are carriers of a definitive CVC (CVCD group). The average age of both groups was identical (79 years). The presence of diabetes was similar (CVC 10 and 13 FAV). Patients with CVCD perform dialysis for longer, and have a history of exceeding the AVF patients (average of 4.1 hits and 1.9 in the CVC AVF) access. In data processing FAV group presents higher values in Qb, volume of dialysate blood Kt/V and volume replacement.

Conclusions: These results suggest that patients whose clinical condition does not achieve the construction of another type of vascular access can still enjoy a compatible with what is considered a standard of quality hemodialysis. We believe these results also reveal the high level of nursing care.

Keywords: Vascular access. Hemodialysis.

RELATIONSHIP BETWEEN EXAMS AND ANXIETY IN NURSING STUDENTS

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Nursing students and all students in higher education are confronted by situations with psychological pressure and anxiety. The realization of a exam can be considered anxiogenic and/or stressful, to which react with anxiety, maximizing often feelings of insecurity. So, we intend to identify with the anxiety level of nursing students before and after an exam. It is a descriptive and cross-sectional study of quantitative nature in a class of 47 students of 2nd year nursing course in 2013. The data collection instrument used was constituted by the Hamilton Anxiety Scale (HAS-Hamilton Anxiety Scale) with association of sociodemographic items and characterization. The sample consisted of 47 nursing students, mostly female (79%), aged between 18 and 36 years, the vast majority does not mention health problems, exercise hard, does not smoke tobacco and sleep well. Different levels of anxiety were found in relation to gender variable, health problems, life styles and between the two evaluation moments. The research results reveal the existence of high levels of anxiety among nursing students.

Keywords: Anxiety. Nursing students.

MINDFULNESS-BASED GROUP INTERVENTION IN BREAST CANCER SURVIVORS

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Introduction: The emerging technological advances in cancer treatments resulted in the implementation of therapies tailored to each patient and the exponential increase in the number of survivors. The psychoeducational group interventions have been shown to be beneficial for breast cancer survivors and mindfulness based interventions identified as useful in treating this population.

Objectives: This study aims at evaluating the impact of a psychoeducational intervention program with the integration of mindfulness-based strategies in a group of breast cancer women survivors.

Methods: 21 women were recruited at Aces Baixo Vouga: 10 constituted the intervention group and 11 constituted the control group. The participants completed the Quality of Life Questionnaire of the European Organization for Research and Treatment of Cancer with the additional module of Breast Cancer (EORTC QLQ-C30 and BR-23), the Hospital Anxiety and Depression scale (HADS), Cancer Coping Questionnaire (CCQ), and the Clinical Self-Concept Inventory (ICAC) at the beginning and end of the intervention.

Results: The survivors who had no intervention showed deterioration of self-efficacy and mastery of self, and the worst results in emotional function domain of quality of life. The intervention group showed improvements in self-efficacy.

Conclusions: The implementation of mindfulness-based group intervention leads to positive effects on breast cancer women survivors regarding self-efficacy.

Keywords: Mindfulness-based group intervention. Breast cancer.