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IPLeiria International Health Congress

09^{and} 10, MAY 2014

CHALLENGES & INNOVATION
IN HEALTH

Abstracts

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WELCOME LETTER

Dear participant,

The Health Research Unit (UIS) of the School of Health Sciences of the Polytechnic Institute of Leiria (ESSLei-IPL) is extremely pleased to welcome you to the 2nd IPLeiria International Health Congress, which is once again held at the Polytechnic Institute of Leiria School Campus. Conveniently located at the heart of Portugal, Leiria holds the outstanding magic of an historical city, which also presents a gracious and sociable modernity that can be easily stated by the friendliness of the people, the tasty gastronomy and the joyous environment.

The 2nd IPLeiria International Health Congress, held under the theme of “Challenges & Innovation in Health” offers the delegates and participants a program of excellence that comprises plenary sessions, specialized short-communications and poster sessions, along with workshops on hot and current issues on health. This year’s program features more than 600 communications, divided in several symposia under the subjects of: RD&T in Health; Health Literacy; e-Health and e-Therapy; Quality of Life and Well-Being; Health Interventions in the Community; Measurement and Decision Making; Ethnicity and Health; Technological Platforms for Communication and Simulated Practice for Clinical Education.

Health is adaptability, and science is permanently challenged to efficiently promote life, by means of research and innovation. Therefore, under the theme of “Living with chronic disease” we intend to provide a reflexion on the practices of health care given to the patient with chronic disease. Also, new perspectives and approaches will be debated in order to promote a more active and sustainable aging, that brings actual gains in health and walks hand-in-hand with an improved living. Regarding e-Health, we will get to know and discuss some of the new methodologies that have been put forward to more adequately respond to the various and specific needs of the individuals, guarantying more quality of life among the populations.

Hence, during two days in May, a month also known by the Portuguese as the month of Mary, chosen by the pilgrims to annually visit the Sanctuary of Fatima/Leiria, the region is honored to simultaneously receive in the city of Leiria, health professionals and researchers from all continents to participate in this thrilling Scientific Meeting. Participants can also enjoy a relaxing moment of gathering and fruitful discussions during a dinner at the medieval castle of Leiria (a Romanesque-Gothic castle built during the first dynasty of Portuguese kings). Furthermore, we strongly recommended you to stay until the end, in order to benefit from all the activities enclosed in the congress program, and to take part in the awards ceremony!

The Health Research Unit is deeply thanked to the President of the Polytechnic Institute of Leiria and to all the operative units that have actively collaborated and worked towards the organization of the meeting. Likewise, UIS is grateful to the Mayor and board of the city council of Leiria, as well as, to the tourism region of Leiria-Fátima, and to all the institutions and companies that have sponsored and supported the event. We also want to show our appreciation to the board of directors and editors of “Revista de Saúde Pública” and to the untiring and committed members of both the Scientific and of the Organizing Committee.

Graciously we intend to receive you in the city of Leiria, in what promises to be a fantastic scientific meeting surrounded by the unique beauty and history of the coastline and region of Leiria, Portugal.

Maria dos Anjos Coelho Rodrigues Dixe
Congress President and
Head Coordinator of the Health Research Unit of ESSLei-IPL

PROGRAM

May 09, 2014 (Friday)

Morning

9h00 – Opening session

Nuno Mangas, President of the Polytechnic Institute of Leiria (IPL)

José Carlos Gomes, Director of the Superior School of Health of Leiria (ESSLei)

Maria dos Anjos Dixe, Head Coordinator of UIS/ESSLei-IPL

09h30 – Session 1 -Theme: Chronic diseases

“Living with chronic disease”

Antonio Torres de Oliveira, Agencia de Calidad Sanitaria de Andalucía

António Bugalho de Almeida, Fac. Medicina, Univ. Lisboa

Ester Gama, Paediatric Service, CHLP e UIS/ESSLei-IPL

Chairwoman: Maria Pedro Sucena Guarino

11h00 – Coffee break

11h30 – Poster (Session I-1, J-1, L-1)

11h30 – Free communications (Session: A-1, B-1, C-1, D-1, E-1, F-1, G-1, H-1)

Synchronous sessions under the following themes:

- RD&T – Research, Development & Technology in Health
- Health literacy
- e-Health and e-Therapy
- Quality of life and well-being
- Health Interventions in the community
- Measurement and decision making
- Ethnicity and Health
- Technological platforms for communication building and sharing
- Simulated practice for clinical education

Afternoon

14h00 – Session 2 – Theme: Demographic changes in the population/Ageing

“Ageing at home”

Fernando Alonso López, Universidad Autónoma de Barcelona

Cândida Soares e Sousa Fialho, Catholic University of Portugal (CUP)

Baltazar Ricardo Monteiro, UIS/ESSLei-IPL

Chairman: José Alves Guerreiro

15h30 – Coffee break

16h00 – Poster (Session I-2, J-2, L-2)

16h00 – Free communications (Session: A-2, B-2, C-2, D-2, E-2, F-2, G-2, H-2)

17h30 – Coffee break

18h00 – Poster (Session I-3, J-3, L-3)

18h00 – Free communications (Session: A-3, B-3, C-3, D-3, E-3, F-3, G-3, H-3)

Synchronous sessions under the following themes:

- RD&T – Research, Development & Technology in Health
- Health literacy
- e-Health and e-Therapy
- Quality of life and well-being
- Health Interventions in the community
- Measurement and decision making
- Ethnicity and Health
- Technological platforms for communication building and sharing
- Simulated practice for clinical education

20h30 – Congress Dinner

May 10, 2014 (Saturday)

Morning

09h00 – Session 3 - theme: e-health

“E-health in response to the health challenges”

Gisele Roesems-Kerremans, Unit for Health and Well-being, EC

Josep Maria Monguet, Universitat Politècnica de Catalunya (UPC)

Pedro Miguel Sousa, UIS/ESSLei-IPL

Chairman: Pedro Soares Gaspar

11h00 – Coffee break

11h00 - Poster (Session I-4, J-4, L-4, M-4)

11h00 – Free communications (Session: A-4, B-4, C-4, D-4, E-4, F-4, G-4, H-4)

Synchronous sessions under the following themes:

- RD&T – Research, Development & Technology in Health
- Health literacy
- e-Health and e-Therapy
- Quality of life and well-being
- Health Interventions in the community
- Measurement and decision making
- Ethnicity and Health
- Technological platforms for communication building and sharing
- Simulated practice for clinical education

Afternoon

14h00 - Poster (Session I-5, J-5, L-5)

14h00 – Free communications (Session: A-5, B-5, C-5, D-5, E-5, F-5, G-5, H-5)

Synchronous sessions under the following themes:

- RD&T – Research, Development & Technology in Health
- Health literacy
- e-Health and e-Therapy
- Quality of life and well-being
- Health Interventions in the community
- Measurement and decision making
- Ethnicity and Health
- Technological platforms for communication building and sharing
- Simulated practice for clinical education

15h30 – Coffee break

16h00 - Poster (Session I-6, J-6, L-6)

16h00 – Free communications (Session: A-6, B-6, C-6, D-6, E-6, F-6, G-6)

Synchronous sessions under the following themes:

- RD&T – Research, Development & Technology in Health
- Health literacy
- e-Health and e-Therapy
- Quality of life and well-being
- Health Interventions in the community
- Measurement and decision making
- Ethnicity and Health
- Technological platforms for communication building and sharing
- Simulated practice for clinical education

Satellite courses: 14h – 18h (limited vacancies)

- Central auditory processing
- Neuromuscular Bands
- Sensory Integration
- Communicating Science
- Looking for your inner Clown (Session A – 14h-16h/
Session B – 16h–18h)

19h00 – Closing session and awards ceremony

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Revista de Saúde Pública

CONTENTS

E-HEALTH AND E-THERAPY

| | | |
|-----|--|----|
| 001 | Trust and Credibility in e-Health Interface..... | 23 |
| 002 | HAPPY: a Cancer Prevention Mobile App supported by a Qualitative Study | 23 |
| 003 | How to address the prescription and selection of AAL systems & services for end users..... | 24 |
| 004 | E-health Web based technologies patient adoption..... | 24 |
| 005 | VAST Autismo – innovation and technology in Speech and Language Therapy..... | 25 |
| 006 | from Technology to Health: a risk-benefit analysis of the Mobile Healthcare Applications | 25 |
| 007 | Project “Good citizen with ingenuity and education” - prevention and intervention in response to bullying at school..... | 26 |
| 008 | Study of the relationship between sleep quality and bullying behaviors in school age children..... | 26 |
| 009 | Effectiveness of e-health intervention programs in overweight adolescents: systematic review | 27 |
| 010 | Who benefits from an e-therapeutic weight management program? | 27 |
| 011 | Validation of a Decision Support System in Bariatric Surgery | 28 |
| 012 | CareForMe: an application for iOS devices for helping in preventing pressure ulcers..... | 28 |
| 013 | New Therapeutic Systems for Multiple Sclerosis: Patient Perception and Challenges | 29 |

ETHNICITY AND HEALTH

| | | |
|-----|--|----|
| 014 | Epidemiological aspects of tuberculosis in Brazilian northeastern..... | 30 |
| 015 | Immigrants’ care: from ethnocentrism to ethnorrelativism in nurses..... | 30 |
| 016 | Occupational therapy from an intercultural perspective: a challenge and an opportunity | 31 |
| 017 | Psychosocial Correlates of Physical Activity among children and adolescences with spina bifida | 32 |

HEALTH INTERVENTIONS IN THE COMMUNITY

| | | |
|-----|--|----|
| 018 | Training and Education in health: a Brazilian inter-institutional research for the SUS..... | 32 |
| 019 | The User of Psychoactive Substance to the emergency service: a systematic review..... | 33 |
| 020 | Weight status and jump proficiency: differences between healthy weight and obese children..... | 33 |
| 021 | Does weight status influence the ball throwing skill in children? | 34 |
| 022 | Effect of acute caffeine administration on glucose homeostasis and blood pressure | 34 |
| 023 | The practice of ethics: report of the experience of students in the professional master’s program..... | 35 |
| 024 | Disposal of unused or unwanted pharmaceuticals as a source of environmental pollution..... | 35 |
| 025 | Evaluation of pharmaceutical experience in dispensing of ophthalmic products in Portugal | 36 |
| 026 | an evidenced-based systematic review about the dual-task intervention in decreasing falls on the elderly ... | 36 |
| 027 | an evidence-based systematic review on the effectiveness of balance training in decreasing the number of falls in healthy elderly..... | 37 |
| 028 | The importance of the physiotherapy on the treatment of subacromial impingement syndrome: an evidenced base systematic review | 37 |
| 029 | Asthenopic symptoms and binocular vision of professional users of optical microscope..... | 38 |
| 030 | Analysis of Binocular Vision on Hospital Administrative Employees computer users | 38 |
| 031 | Nursing intervention program for family caregivers..... | 39 |
| 032 | Health education groups: the need for change..... | 39 |

| | | |
|-----|---|----|
| 033 | Health and Physical Activity in Community-Dwelling Older Adults..... | 40 |
| 034 | Aging, Physical Activity and Self Perception of Physical Discomfort Manifestations | 40 |
| 035 | The importance of nutritional counseling in renal patients | 41 |
| 036 | Health Promotion (HP) – ESSS/UMIS community intervention | 41 |
| 037 | Diabetes Type 2 and risk of fall: functionality assessment and risk group in diabetic foot | 42 |
| 038 | Risk and vulnerability markers of breast cancer in women with HIV/AIDS..... | 42 |
| 039 | Influence of self-efficacy in an educational and exercise program for chronic low back pain..... | 43 |
| 040 | Effects of exercise training on fall prevention in elderly. A randomized controlled trial | 43 |
| 041 | Isometric endurance of the spine extensor muscles after applying Global Postural Reeducation | 44 |
| 042 | Critical period in preschool children for the development of overweight | 44 |
| 043 | Education of nursing students in work with vulnerable groups: Female Prisoner | 45 |
| 044 | Body practices and the Amplified Clinic: learning about health education in the Brazilian Health System (SUS) | 45 |
| 045 | Impact of a family-based pulmonary rehabilitation program: an exploratory study..... | 46 |
| 046 | Effects of a respiratory physiotherapy session in patients with Lower Respiratory Tract Infections | 46 |
| 047 | Audiologic changes in Pilots Aviators..... | 47 |
| 048 | A clinical education project for people with chronic obstructive pulmonary disease | 47 |
| 049 | The Perceived Health of Cerebral Palsy People Who Are Ageing | 48 |
| 050 | Does 6-minutes walk test predict functional capacity in elderly people? A pilot-study | 48 |
| 051 | The program “More Doctors”: the impact on health access in Rio Grande do Sul analysis..... | 49 |
| 052 | Palliative care at home: a right for all, an integrative review..... | 49 |
| 053 | Intervention in adults on a mental health care center – A clinical education project | 50 |
| 054 | Com(viver) Mais – Project for Community intervention in the elderly population in Azores | 50 |
| 055 | The influence of the ingestion of alcohol on sleep quality..... | 51 |
| 056 | Are skin lesions correctly classified? | 51 |
| 057 | Nursing home visit impact in puerperium: systematic review | 52 |
| 058 | Qualitative assessment of cardiovascular risk in a community pharmacy in the Algarve..... | 52 |
| 059 | Rehabilitation and Subjectivity: Cartography of a mutilated body by Leprosy..... | 53 |
| 060 | Behaviours and sexual attitudes in higher education students | 53 |
| 061 | Physical health and activities of daily living in oldest old community-dwelling assessment | 54 |
| 062 | Scales to assess medication adherence in people with chronic disease: a systematic review..... | 54 |
| 063 | Sex education in schools: an interventional project | 55 |
| 064 | Association between grip strength, anthropometric data and functional capacity..... | 55 |
| 065 | A community-based exercise program to control cardiovascular risk in type 2 diabetics..... | 56 |
| 066 | Host families targeted for nursing intervention..... | 56 |
| 067 | Evaluation of a protocol exercises for musicians with musculoskeletal problems | 57 |
| 068 | Influence of Stretching Program in Factory Workers, Prevalence of Musculoskeletal Symptoms | 57 |
| 069 | Prevalence and determinants of gingival recessions in Portuguese adults | 58 |
| 070 | Intervention project into Academic Community: a reality | 58 |
| 071 | Oral health and the use of dental prosthesis among the institutionalized elderly..... | 59 |
| 072 | The Challenges of Feeding | 59 |
| 073 | Voluntary counselling and testing for HIV: an intervention at the University Campus of Évora | 60 |
| 074 | Assessment of medication adherence and regimen complexity in hypertensive patients..... | 60 |
| 075 | Effects of the association of cognitive stimulation with motor training in cognitive impairment elderly | 61 |
| 076 | Perfil sociodemográfico, hematológico e bioquímico de uma população alcoólica | 61 |
| 077 | Alaryngeal Voices under a magnifying glass of the community | 62 |
| 078 | Mental Health Intervention in School | 62 |
| 079 | Effect of the ergometer cycling on the rehabilitation of the elderly with hip arthroplasty | 63 |
| 080 | Denver-II: Portuguese Normative Profile | 63 |
| 081 | Analysis of Normal and Pathological Voices for Women dysphonic | 64 |
| 082 | Eating habits of children in school age..... | 64 |

| | | |
|-----|---|----|
| 083 | Intervention Program in children and adolescents to promote Physical Fitness, Physical Activity and Nutritional Knowledge..... | 65 |
| 084 | Community-dwelling Elderly: ineffective management of drug regimen and risk of fall..... | 65 |
| 085 | Object naming: is it a matter of age?..... | 66 |
| 086 | Adolescent Sexuality: Perspective of Teachers | 66 |
| 087 | Medication adherence in elderly people: literature review | 67 |
| 088 | Determinants of self-medication in elderly people: systematic review | 67 |
| 089 | (Re)Think Healthcare to Elderly from their Perceptions | 68 |
| 090 | Predictors of postoperative outcomes after surgery for lung cancer | 68 |
| 091 | Self-care adherence in type 2 diabetes..... | 69 |
| 092 | Supporting older people's Informal CAREgivers at home through InCARE Programme: the study protocol | 69 |
| 093 | Medication Adherence and Cardiometabolic Control in Type 2 Diabetes | 70 |
| 094 | Evaluation of Trihalomethanes and Aluminum in Drinking Water in the Northwest of Portugal..... | 70 |
| 095 | Nursing interventions to prevent falls in older people: a systematic review..... | 71 |
| 096 | Guide to preventing falls for older people living in the community..... | 71 |
| 097 | Contamination levels that compromise the hygienic condition in the handling of food..... | 72 |
| 098 | Residual neuromuscular blockade in patients undergoing surgery. Alterations of muscle strength and postoperative respiratory morbidity | 72 |
| 099 | ECPICID-AVC: an Instrument for measuring self-care in older people after a stroke | 73 |
| 100 | Bibliographic study groups and workshops on mental health praxis of psychology | 73 |
| 101 | Lifestyle of Parents With Children in School Age..... | 74 |
| 102 | Providing home counseling for older adults: benefits and challenges..... | 74 |
| 103 | Lifestyles of the School Age Child..... | 75 |
| 104 | Men access to primary health care: discussing difficulties and resistance faced by them..... | 75 |
| 105 | Socioeconomic influence on intestinal endoparasitic diseases in pregnant women in Diamantina, Brazil..... | 76 |
| 106 | Implementation of Single Health System (SUS): analysis of scientific production in Brazil | 76 |
| 107 | Characteristics of Vulvovaginitis in Pregnant Women in a Usf (Health Unit) in the Municipality of the Interior of Bahia..... | 77 |
| 108 | Application STOPP criteria and beers criteria in the evaluation of the drug pharmacotherapy used in elderly: a comparative study in the Londrina city, Brazil | 77 |
| 109 | Knowledge and Practice About the Contraceptive Methods Among Nursing Students of a College of Bahia, Brazil..... | 78 |
| 110 | Health promoting school. Healthy lifestyles: Mental health promotion | 78 |
| 111 | The antisocial phenomenon among Portuguese students: Towards healthier social behaviours..... | 79 |
| 112 | The incidence of falls in institutionalized elderly | 79 |
| 113 | Assistance for Violence Victims in Stationary Pre-Hospital Units | 80 |
| 114 | Exclusive Breastfeeding: Prevalence and Identification of Problems until Four Months..... | 80 |
| 115 | MIDWIFERY EMPOWERMENT: the perception of the nurses' midwives in Portugal..... | 81 |
| 116 | General and Mental Health of Poor and Multiproblematic Families | 81 |
| 117 | Music ParodiED: Applications in Community Health Education..... | 82 |
| 118 | Capsicum annum L. with different colors provide bioavailable phytochemicals with health benefits . | 82 |
| 119 | Humanization of health education, practice reflection and community empowerment..... | 83 |
| 120 | Characterization of users of Santa Maria Maior Continuous Care Unit (CCU) and Social Response after discharge of users with cerebrovascular accident (CVA) | 83 |
| 121 | Sexual education and people with intellectual disabilities in residential care: an experience..... | 84 |
| 122 | Factors Associated With Access To the Family Health Strategy Services..... | 84 |
| 123 | Loneliness and depression in the institutionalized elderly..... | 85 |
| 124 | Effectiveness of educational toy in hand hygiene in children of a public school..... | 85 |
| 125 | Health, Speech-Language Therapy and Health Education: (Re)view indirect intervention..... | 86 |
| 126 | Effects of a physical activity program in the workplace: a Sanitation Company case study | 86 |

| | | |
|-----|---|-----|
| 127 | Projects of Health Education in school: from evaluation to practice..... | 87 |
| 128 | Most significant socialization agents in adolescent sexuality..... | 87 |
| 129 | Symptoms and Diagnosis of Respiratory Disease in Elderly People - Geria Study..... | 88 |
| 130 | Markers of vulnerability for Bulimia and Anorexia: perceptions of health professional..... | 88 |
| 131 | Prevention of pathological online gambling in adolescents..... | 89 |
| 132 | Respiratory Symptoms in Elderly With Depression And/or Dementia - Geria Study..... | 89 |
| 133 | the Influence of Obstetric Factors in the Prevalence of Breastfeeding: Weaning Reasons..... | 90 |
| 134 | 3rd cycle students' knowledge on dating violence: effectiveness of an education session..... | 90 |
| 135 | Food intake of pregnant adolescents attended at a hospital-school in Colombo, PR, Brazil..... | 91 |
| 136 | Mothers' perception with regard to care in the introduction of supplementary food..... | 91 |
| 137 | Prenatal Health Education: the Nursing Action in Brazilian Community..... | 92 |
| 138 | Love & Violence on dating: perspective of the Adolescents..... | 92 |
| 139 | Knowledge To Intervention in Lifestyles on Hotel Workers..... | 93 |
| 140 | Diagnosis of Lifestyles of Adolescents in Middle School..... | 93 |
| 141 | Risk assessment to Hypertension in a working population in the city of São Paulo..... | 94 |
| 142 | Risk assessment for occupational diseases according to the International Classification of Functioning, Disability and Health..... | 94 |
| 143 | Long-term effectiveness of health education program in security guards: a 12-months follow-up study..... | 95 |
| 144 | Sociodemographic characterization of diabetic patients assisted in primary care..... | 95 |
| 145 | Health profile of diabetics assisted in primary care..... | 96 |
| 146 | Procedure of Nursing and Dentistry in the infant care: a literature review..... | 96 |
| 147 | Body composition assessment in Leiria's 7TH graders – a 5 year comparison (2009-2013)..... | 97 |
| 148 | Parenting in the first years of child's life: areas of nursing intervention..... | 97 |
| 149 | Non-steroidal anti-inflammatory drugs (NSAIDs) pattern use in central region of Portugal..... | 98 |
| 150 | Attitudes towards consumption, recycling and potential of reutilization of medicines..... | 98 |
| 151 | Impact of a walking program on type 2 Diabetic subjects..... | 99 |
| 152 | The Reality of Crack in a Northeastern Brazilian City: the User Look..... | 99 |
| 153 | Physical and sport activities in school and community context: what impact on health indicators?..... | 100 |
| 154 | Prevalence and risk factors for overweight/obesity in Leiria's 7 th graders (2009-2013)..... | 100 |
| 155 | Food Supplements Labels and health claims: implementation of European Union Regulation..... | 101 |
| 156 | from meanings of spirituality to the challenges of nurses in family intervention..... | 101 |
| 157 | Behaviors of outdoor workers concerning sun exposure..... | 102 |

HEALTH LITERACY

| | | |
|-----|--|-----|
| 158 | Stressful situations: diagnosing to educate in Speech Therapy..... | 103 |
| 159 | Strengthen the Maternal and Child Health competency among nurses by blended continuing education program..... | 103 |
| 160 | The nurses' experience on nursing students and their clinical learning process in hospital..... | 104 |
| 161 | A fall prevention manual for older adults according to health literacy demands..... | 104 |
| 162 | Prevalence of urinary incontinence during pregnancy and postpartum in Brazilian women..... | 105 |
| 163 | Risk factors for urinary incontinence in pregnancy and postpartum..... | 105 |
| 164 | Media approaching behaviors in nursing: a descriptive study..... | 106 |
| 165 | Opioid Substitution Programs in Portugal: Understanding the decision making process..... | 106 |
| 166 | Health literacy assessment at the primary health care: a strategy for falls prevention..... | 107 |
| 167 | Hearing Health Promotion in Children Five Years Old: a Need to Undertake!..... | 107 |
| 168 | Health literacy - a pathway to patients' determination..... | 108 |
| 169 | Group chronicles on a CoP: a tool for collaborative analysis and improving reflexion..... | 108 |
| 170 | OT Community of Practice as continuing education: mental health assistance on primary care..... | 109 |
| 171 | Patient care in brain death: weaknesses of a nursing staff..... | 109 |
| 172 | Health illiteracy in students of a polytechnic institute..... | 110 |
| 173 | Influence of the economic scenario in the proliferation of Pharmaceutical Counterfeiting..... | 110 |

| | | |
|-----|---|-----|
| 174 | The Importance of the Electrocardiogram in the Sports Medical Evaluation..... | 111 |
| 175 | Impact of psycho education on anxiety and perspectives face to death among health professionals of a Unit of Primary Health Care..... | 111 |
| 176 | Vulnerable population to low health literacy: a systematic review | 112 |
| 177 | Health Literacy and its measurement tools: a systematic review..... | 112 |
| 178 | Health Promotion & Emotional Education: development of a website..... | 113 |
| 179 | Types of Information and Communication Technologies useful to promote health literacy in patients with COPD | 113 |
| 180 | Mouth self-examination rates are higher among users of SUS: evaluation based on a model of health literacy | 114 |
| 181 | Cross-Infection Risk in Clinical Dentistry Performed by Students | 114 |
| 182 | Internet addiction related-symptoms in a sample of young-adults | 115 |
| 183 | Young's mental health literacy: a systematic review..... | 115 |
| 184 | Health Education - Analysis of Curriculum Matrix of the Course of Nursing | 116 |
| 185 | Water intake as a promoter of health behaviour with children | 116 |
| 186 | Communicative styles of a person with aphasia after brain injury | 117 |
| 187 | Shame and Social Anxiety in Adolescence: the Experience of Shame Scale for Adolescents..... | 117 |
| 188 | Vestibular Effects of Cochlear Implantation | 118 |
| 189 | The Health Literacy and Empowerment of Citizens: Integrative Review..... | 118 |
| 190 | Behaviour Face To Packaging Waste and Drugs Out of Use..... | 119 |
| 191 | Knowledges of Brazilian Academics of Nursing on Burns | 119 |
| 192 | Fish Consumption in College Students..... | 120 |
| 193 | Body image and body composition in students from two secondary education schools of Braganza city, Portugal..... | 120 |

MEASUREMENT AND DECISION MAKING

| | | |
|-----|--|-----|
| 194 | The measurement of Adaptive Behaviour in Portugal..... | 121 |
| 195 | Characterization of accidents relating exposure to biological material involving the staff of a university hospital..... | 121 |
| 196 | The use of images in Speech and Language Therapy in Portugal..... | 122 |
| 197 | The web on the decision-making process of pregnant/postpartum women: a Portuguese survey | 122 |
| 198 | Patients' preferences and needs: centrality of nursing care..... | 123 |
| 199 | Development of a Geriatric Functionality Scale to screen for functional ability | 123 |
| 200 | Muscle co-contraction assessment during walking in clinical practice-a preliminary accuracy and reproducibility study..... | 124 |
| 201 | Comparative analysis of the management of diabetes mellitus in UCSP and USF in the Alto Minho region..... | 124 |
| 202 | Cultural adaptation and validation of the Portuguese version of the Assessment of Chronic Illness Care (ACIC) version 3.5..... | 125 |
| 203 | Knowledge management in public health institutions with different management models | 125 |
| 204 | Child development screening system in Portugal - What opportunities? | 126 |
| 205 | Eliminating measles in Portugal: the contribution of nurses..... | 126 |
| 206 | Comparative study of Birth and Maternity Indicators..... | 127 |
| 207 | Measuring patient satisfaction with dental care in a University dental clinic background..... | 127 |
| 208 | Development of an instrument for measuring patient satisfaction with dental care | 128 |
| 209 | Root caries: a problem in institutionalized elderly | 128 |
| 210 | Intrarater reliability and agreement of chest wall mobility in patients with COPD..... | 129 |
| 211 | The use of trademarks in the Brazilian market by pharmaceutical companies | 129 |
| 212 | Confirmatory Factor Analysis of the Portuguese Version of the Peritraumatic Dissociative Experiences Questionnaire..... | 130 |
| 213 | Accuracy of nurses in risk classification of an adult emergency in south of Brazil | 130 |
| 214 | Nurses and assessment cardiovascular risk in people hospitalized by non-cardiac causes | 131 |

| | | |
|-----|---|-----|
| 215 | Physical activity predicts self-reported disability and performance in adults aged ≥ 60 | 131 |
| 216 | Disability and healthcare consumption among older adults..... | 132 |
| 217 | Results from a 9-month physical activity intervention in physical fitness of older women | 132 |
| 218 | Measures to assess the suitability of quantitative compound tests with the dilution effect | 133 |
| 219 | Teenagers and drugs: subsidy for decision making in educational intervention in health..... | 133 |
| 220 | Cryotherapy impairs proprioception function? | 134 |
| 221 | Muscular strength and endurance: effects of ice application | 134 |
| 222 | National Health Service: Qualitative and financial assessment of a decade of co-payments..... | 135 |
| 223 | Health professionals' commitment: a management tool..... | 135 |
| 224 | Formulation of a nurse's clinical judgment about the potential of autonomy reconstruction | 136 |
| 225 | Physical activity estimates in COPD rehabilitation: self-report vs. objective measures | 136 |
| 226 | Compound clinical trials: a comparative simulation study of its accuracy and cost..... | 137 |
| 227 | Decision making in intensive care at the end of life..... | 137 |
| 228 | Resistance bacterial profile in positive urine cultures: Nosocomial Infection vs Community acquired Infection..... | 138 |
| 229 | Falls in elderly community residents. an underdiagnosed problem | 138 |
| 230 | Evaluation of the use of bundle of prevention of ventilator-associated pneumonia..... | 139 |
| 231 | Bundle of infection primary prevention of bloodstream as a management tool in Brazilian hospital | 139 |
| 232 | Techniques for counting bacteria in a pooled sample..... | 140 |
| 233 | Short form 6D: can measure health in patients with systemic lupus erythematosus? | 140 |
| 234 | National humanization policy: conceptions of health professionals..... | 141 |
| 235 | Finding an instrument to assess fall risk in acute patients in hospital setting..... | 141 |
| 236 | Integrating Evidence-Based Practice in the Training Programme Bachelor's Degree in Nursing. University Jaume I | 142 |
| 237 | Assessment of prenatal under the perspective of management and family health teams | 142 |
| 238 | Analysis of the working process of nurses and doctors in the prevention of risk factors of gestational hypertension | 143 |
| 239 | Is Infant mortality an evidence of economic development?..... | 143 |
| 240 | Peer feedback: online model for developing metacognitive skills in students | 144 |
| 241 | Construction and Validation of a Reference Matrix for Large Scale Cognitive Assessment of the Biological-Functional Dimension in School Physical Education | 144 |
| 242 | The Attention to Elderly Health: indicators of performance evaluation and decision making in local management..... | 145 |
| 243 | Association of Obstetric Variables with Route of Childbirth | 145 |
| 244 | The Anxiety Disorders Interview Schedule for DSM-IV:Child Version(ADIS-C) in Adolescents | 146 |
| 245 | Comparing the psychometric properties of the instruments used in the economic evaluation of Parkinson's disease | 146 |
| 246 | Assessing ceiling effects in the EQ-5D and the SF-6D instruments in patients with Parkinson's disease | 147 |
| 247 | Organizational Stress: Development of a multidimensional measure | 147 |
| 248 | Perceived health status in people over 65 years | 148 |

MEDICAL EDUCATION – SIMULATED PRACTICE

| | | |
|-----|--|-----|
| 249 | Mentors' implication in clinical learning and assessment of nursing students..... | 149 |
| 250 | Prevention of drug abuse: practices developed by counselors and community leaders in Brazil | 149 |
| 251 | Attention given to users of substances psychoactive in units of service ready for nurses and doctors.... | 150 |
| 252 | What does the body have to do with it? Motion extrapolation in individuals with cerebral palsy | 150 |
| 253 | Simulated laboratory practice: impact on the student in preparation for the real context of clinical practice | 151 |
| 254 | The use of clinical simulation with actors: an action research in nursing..... | 151 |
| 255 | Health Promotion: Concepts and Actions of Nurses Teachers..... | 152 |
| 256 | Clinical training in surgery: developing nursing students skills..... | 152 |
| 257 | Care for the person in critical condition in the context of simulated practice..... | 153 |

| | | |
|-----|--|-----|
| 258 | Academic opinion about the about the National Curriculum Guidelines in health..... | 153 |
| 259 | Augmented reality for improving clinical decision skills | 154 |
| 260 | Debriefing in the simulation contexts | 154 |

OTHER RELATED TO THE THEMATIC TABLES AND CONGRESS

| | | |
|-----|--|-----|
| 261 | Implementation of Brazilian National Policy on Oral Health in a Regional Health Department | 155 |
| 262 | Psychological Consultation-Liasion: Methodological and Technical Aspects | 155 |
| 263 | Communication in Health | 156 |
| 264 | The finitude and aging: perceptions of the caregivers of institutionalized aged..... | 156 |
| 265 | Popular education, an interdisciplinary practice in the formation of health professionals..... | 157 |
| 266 | Human resources training for health teaching: characteristics and perspectives | 157 |
| 267 | Nursing management: activities performed for quality care | 158 |
| 268 | Advanced nursing education and professional development: master`s course students perceptions | 158 |
| 269 | Consonant perception and overall auditory performance in Cochlear Implant users | 159 |
| 270 | Evaluation of balance and postural control in seniors with thoracic hiperkyphosis..... | 159 |
| 271 | Levodopa controlled release from alginate membranes | 160 |
| 272 | Is dissociation in psychiatric and non-psychiatric Portuguese samples explained by intensity of psychopathology? | 160 |
| 273 | Evaluation of functional performance of patients with patellofemoral pain | 161 |
| 274 | Diabetes, therapeutic adherence and depression | 161 |
| 275 | Life expectancy of modern times: public policies of modern health? | 162 |
| 276 | Semantic processing in subjects with and without auditory processing disorders: case study | 162 |
| 277 | Hemodynamic changes in vacuum endotracheal in the elderly hypersecretion with dementia | 163 |
| 278 | Overload on perception of informal caregivers of dependent elderly with dementia..... | 163 |
| 279 | Polypharmacy in the elderly with dementia nursing home residents | 164 |
| 280 | Caring self-care dependents in home environment | 164 |
| 281 | Functional and cognitive decline in hospitalized elderly | 165 |
| 282 | User satisfaction with Primary Health Care: an analysis of the Emergency Care attendances | 165 |
| 283 | Dementia care: a focus on direct care workers` attitudes, burnout and job satisfaction | 166 |
| 284 | Attachment levels to the mother, the father and the peers, in institutionalized youngsters | 166 |
| 285 | Perception of Threat, Stress, and Anxiety in Athletes of Portuguese Football Championships | 167 |
| 286 | Prescription of antibiotics by dentists: a pilot study | 167 |
| 287 | Reconciling Operational and Organisational Logics in Hospital Change Management | 168 |
| 288 | Weight loss may be accelerated through a chrononutrition-based protein diet..... | 168 |
| 289 | Association between perceived competence, autonomy and physical activity..... | 169 |
| 290 | Constraint-induced aphasia therapy: effectiveness of a program in chronic aphasic patients | 169 |
| 291 | Learning meetings in the formation through work – the construction of Health Residencies | 170 |
| 292 | Nursing interventions to prevent pressure ulcers in intensive care units: systematic review..... | 170 |
| 293 | Health education and sexuality during pregnancy | 171 |
| 294 | Ageing and social informatics: a case study | 171 |
| 295 | Beliefs and stereotypes in human aging | 172 |
| 296 | Auditory electrophysiological evaluation in individuals with type 2 Diabetes Mellitus..... | 172 |
| 297 | Intensive Care Nursing: Portuguese Scientific Production: a Bibliometric study..... | 173 |
| 298 | Sports injuries characterization occurring in mountain sports | 173 |
| 299 | Cardiovascular risk factors found in stroke patients..... | 174 |
| 300 | Bilateral cochlear implantation in a patient with bilateral temporal bone fracture..... | 174 |
| 301 | Auditory long latency potentials before and after cochlear implantation | 175 |
| 302 | MDAIF: Training Transfer to the professional performance of family nurses | 175 |
| 303 | Sequential liver transplantation - ethical issues | 176 |
| 304 | Humanization of Nursing Care in Surgical Center: an Everyday Search | 176 |

| | | |
|-----|--|-----|
| 305 | Self-criticism, body esteem and eating disorders symptoms in a sample of female adolescents, practitioners of ballet and handball..... | 177 |
| 306 | Preventing pressure ulcers: the knowledge of the nursing students from the Azores and Canary Islands | 177 |
| 307 | Public health policies in Brazil under the aspect of ethics and management..... | 178 |
| 308 | Pedagogical training teacher´s: a challenge in nursing education..... | 178 |
| 309 | Mal: Instrument Rating Paretic Upper Member | 179 |
| 310 | Dental and Periodontal Complications Arising from the Use of Oral Piercings – Cases Reports..... | 179 |
| 311 | Tobacco Use Among Students in the Marajó Archipelago, Northern Brazil | 180 |
| 312 | There is more than underweight in pediatric Crohn's disease | 180 |
| 313 | Binge Drinking Among Students in the Marajó Archipelago, Northern Brazil..... | 181 |
| 314 | The learning process of the student care: starting of critical reflections..... | 181 |
| 315 | Sociodemographic and gynecological obstetric characteristics of Italian Nursing academics..... | 182 |
| 316 | Sexual profile of nursing students about your sexual behaviors..... | 182 |
| 317 | Patients undergoing chemotherapy: effect of a high-calorie supplement on nutritional status..... | 183 |
| 318 | Analysis of Maternal Self-Efficacy in the Process of Teenage Mothers' Breastfeeding | 183 |
| 319 | Analysis of the Development of Children in the Northeastern Region of Brazil | 184 |
| 320 | Infections, Resistance and antibiotic therapy in an Internal Medicine Service | 184 |
| 321 | Parental Stress in Parents of Children with Developmental Disorders | 185 |
| 322 | Marijuana Use Among Students in the Marajó Archipelago, Northern Brazil | 185 |
| 323 | Perceptions of Aider Nurses About the Assistance To Women Victims of Violence in Brazil | 186 |
| 324 | Nursing Care Systematization in a Psychiatric Hospital in the Brazilian Northeast..... | 186 |
| 325 | Lunch eating habits in Portuguese college students considering the location of meal..... | 187 |
| 326 | Eating attitudes and risk of eating disorders in adolescents: role of the thinness stereotype | 187 |
| 327 | Teaching and learning in family nursing: from theoretical framework to experiential reflection..... | 188 |
| 328 | Profile of the women who repeat an induced abortion | 188 |

QUALITY OF LIFE AND WELL-BEING

| | | |
|-----|---|-----|
| 329 | Acne and Public Health..... | 189 |
| 330 | Effect of massage therapy in cancer patients in palliative situation | 189 |
| 331 | Benefits of Physical Activity in Cholesterol and Triglycerides in the elderly | 190 |
| 332 | Comparison of functional fitness between sedentary and active elderly with AAHPERD tests | 190 |
| 333 | Psychometric Properties of Portuguese version of Personal Outcomes Scale: EPR | 191 |
| 334 | Assessing Quality of Life on Adults with Intellectual Disability: Escala Pessoal de Resultados versus WHOQOL-Bref..... | 191 |
| 335 | Herb-drug interactions among commonly used psychoactive substances by healthcare students | 192 |
| 336 | Communication with elderly patients – a weakness or an opportunity to young nurses?..... | 192 |
| 337 | The child with HIV/AIDS: Truth Disclosure | 193 |
| 338 | Infertility in males..... | 193 |
| 339 | Emotional changes in postpartum women | 194 |
| 340 | Effects of two exercise training programs and detraining in older women | 194 |
| 341 | Mother-Infant relationship with mothers suffering from anxiety and mood amendment | 195 |
| 342 | Influence of health indicators in prevalence of HTA and obesity in higher education..... | 195 |
| 343 | Cocaine, Crack and Multiple Drugs Consumption: Interface with Users' Quality of Life | 196 |
| 344 | The influence of weight status on physical fitness of primary school children..... | 196 |
| 345 | Education for health: Alcohol and young aged school teenagers..... | 197 |
| 346 | Reliability of a comprehensive fitness test battery in persons with fibromyalgia | 197 |
| 347 | Translation and Spanish cultural adaptation of the fibromyalgia knowledge questionnaire (FKQ) | 198 |
| 348 | Eight weeks of vigorous exercise are enough for a significant reduction in blood pressure..... | 198 |
| 349 | Management of Family Caregivers' Emotions: a challenge in pediatric intensive care nursing..... | 199 |
| 350 | Assessment of nutritional status of elderly patients with hip fracture | 199 |

| | | |
|-----|---|-----|
| 351 | Health Promotion in Higher Education: Resilience and Quality of Life | 200 |
| 352 | Well-being and academic success in elementary school | 200 |
| 353 | Health-related quality of life in elderly in primary care..... | 201 |
| 354 | Effect of Listerine® mouthrinse against oral microorganisms..... | 201 |
| 355 | How different is this boy in my class? Asking peers of children with cerebral palsy..... | 202 |
| 356 | Study of drug addiction and pregnancy newborn death | 202 |
| 357 | Social support of men living with human immunodeficiency virus/AIDS | 203 |
| 358 | Presence of parents in neonatal units: First stage of the Kangaroo method | 203 |
| 359 | The relation between functional performance and satisfaction with life in elderly..... | 204 |
| 360 | Communication of bad news to the elderly patient/his family, in critical situation | 204 |
| 361 | Exploring the healthcare needs of patients with mild chronic obstructive pulmonary disease..... | 205 |
| 362 | Student Support Service: promoting well-being of students of Polytechnic Institute of Leiria | 205 |
| 363 | Characterization of the sun-protection practices in higher education students | 206 |
| 364 | Use of emergency contraception in higher education students..... | 206 |
| 365 | Analysis of Postural habits in primary school children in a private and public institution | 207 |
| 366 | Characterization of the functional capacity of the elderly: effects of age and health status | 207 |
| 367 | Happiness and subjective health status among older adults in Southern Europe and Scandinavia | 208 |
| 368 | Physical activity and sleep – baseline results from an intervention study | 208 |
| 369 | Physical activity in healthy children and children with Acute Respiratory Infections | 209 |
| 370 | Family care at early COPD: Is there any risk for caregivers' mental well-being? | 209 |
| 371 | Virtual communication and relationship between nurse and elderly person..... | 210 |
| 372 | A systematic review of nursing interventions on adaptation in women with breast cancer | 210 |
| 373 | Self-perception of desirable behaviors for a healthy aging in adults with cerebral palsy | 211 |
| 374 | Exploring life satisfaction and depressive symptoms in older people receiving family care..... | 211 |
| 375 | Carers Burnout and Values: it's relation with the wellbeing of people with dementia..... | 212 |
| 376 | Relationship between balance and fear of falling in elderly people..... | 212 |
| 377 | Mental health, strengths and social support of single mothers..... | 213 |
| 378 | The State of Health of Teachers Exposed to Noise in the School Context | 213 |
| 379 | School, Family Support, Illness Representations and Quality of Life in Type 1 Diabetes | 214 |
| 380 | Professional Identity and the Psycho-Social Contract: the ideological link to commitment in Health Workers..... | 214 |
| 381 | Building Instrument to assess user satisfaction in communicating with health professionals based on the consensus of the Delphi method | 215 |
| 382 | Global geriatric evaluation of the Algarve population | 215 |
| 383 | Noise in an intensive care unit as a factor of discomfort: a descriptive exploratory study | 216 |
| 384 | Sleep and quality of life in college students: comparison between sexes..... | 216 |
| 385 | Relationship Between Motor Coordination and Physical Fitness of Prepubertal Children | 217 |
| 386 | Psychometric Study of the Adolescent Social Comparison Scale-Revised..... | 217 |
| 387 | Mobbing/psychological aggression in nursing profession..... | 218 |
| 388 | Quality of life in older people and Hospitalization | 218 |
| 389 | Effects of an exercise program on physical fitness in patients with type 2 diabetes..... | 219 |
| 390 | Specific schooling care for children with disabilities from a nursing perspective..... | 219 |
| 391 | Quality of life, concerns and therapeutic needs in parents of children with special needs | 220 |
| 392 | Burnout Among Nurses | 220 |
| 393 | Inventory of bullying in nursing students: final results..... | 221 |
| 394 | Quality of life in the elderly: a comparative study between two different care giving services..... | 221 |
| 395 | Quality of life in pediatric cancer: Illness perceptions of children and parents..... | 222 |
| 396 | Aging and mild hearing loss | 222 |
| 397 | Quality of life after liver transplant in familial amyloidotic polyneuropathy patients | 223 |
| 398 | Early experiences with caregivers, school bullying and negative affect in Adolescence..... | 223 |

| | | |
|-----|--|-----|
| 399 | Relationship between leisure activities and cognitive performance in older adults..... | 224 |
| 400 | Structural approach to the quality of life of teenagers | 224 |
| 401 | Unconventional therapeutic modalities in nursing practice..... | 225 |
| 402 | Knowledge of HIV amongst residents of the University of Évora Campus..... | 225 |
| 403 | (In)dependence from a gender perspective: a study of elderly people with social care services..... | 226 |
| 404 | Association between psychosocial aspects of work and quality of life of motorcycle taxi drivers | 226 |
| 405 | Personal social networks of elderly and mental health: preliminary results | 227 |
| 406 | Nomination and Identification of the Six Basic Emotions by Elderly people | 227 |
| 407 | A generic and a modular approach to children's quality of life self-assessment | 228 |
| 408 | Quality of life of the elderly with hip arthroplasty: comparison between two instruments..... | 228 |
| 409 | The voice as symbolic activity in the elderly | 229 |
| 410 | Quality of life: perspective of portuguese seniors | 229 |
| 411 | Experiencing anxiety: clinical indicators in nursing diagnosis..... | 230 |
| 412 | Caring patients with impaired verbal communication: nursing diagnosis | 230 |
| 413 | Teachers' perceptions about health promotion in pre-school: Exploratory study | 231 |
| 414 | Cardiogenic shock clinical indicators in nursing diagnosis | 231 |
| 415 | The impact of infertility on couples' dyadic adjustment and intimacy | 232 |
| 416 | Religiosity and spirituality in older persons: a challenge for nursing practice | 232 |
| 417 | Quality of Life in Pre-Lingual Deaf Children | 233 |
| 418 | Life quality of individuals in radiotherapeutic treatment lodged at a hostel..... | 233 |
| 419 | Physical exercise programme for institutionalized elderly: improving quality of life..... | 234 |
| 420 | Perceptions of sons about close relationships, life satisfaction and parent's marital satisfaction | 234 |
| 421 | Nursing care for patients with a stoma: a quasi-experimental study | 235 |
| 422 | Resilience in adolescents and their perception of the parenting styles..... | 235 |
| 423 | Better quality of life determinants. a correlational study in a drug addicts community | 236 |
| 424 | Family quality of life in families of people with intellectual disabilities: a new concept | 236 |
| 425 | Well-being in very old age: Valuation of life and health at one century of life | 237 |
| 426 | Maternal postpartum quality of life questionnaire - MAPP-QOL: validation of the Portuguese version in first-time mothers..... | 237 |
| 427 | First-time parents: quality of life and adjustment to the parental role in postpartum period..... | 238 |
| 428 | Psychometric studies of the Other as Shamer Scale for Adolescents - brief version (OASB-A)..... | 238 |
| 429 | Analysis among elderly institutionalized and non-institutionalized in a city of Brazil..... | 239 |
| 430 | The family of a hospitalized adult in ICU: Transitions in quality of life and well-being | 239 |
| 431 | Systematization of the Care System Nursing for Type II Diabetes Mellitus: Study of Case | 240 |
| 432 | Change in functional status and body composition in institutionalized elderly | 240 |
| 433 | Blow gun training enhances the ventilatory capacity in patients with Down syndrome: a pilot study | 241 |
| 434 | Intergenerational relations – grandparents and grandchildren's: a well-being factor?..... | 241 |
| 435 | Polypharmacy in the elderly: therapy adherence..... | 242 |
| 436 | Optimism, resilience and family impact in parents of disabled child | 242 |
| 437 | Medicines out of use and waste of medicines in a northern city of Portugal..... | 243 |
| 438 | Passion and satisfaction with life in disabled athletes..... | 243 |
| 439 | Quality of Life of Women With Urinary Incontinence, Using Icq-Sf..... | 244 |
| 440 | Perceived Social Support in Adult Celiac Persons..... | 244 |
| 441 | Nursing clinical supervision: support strategies..... | 245 |
| 442 | Pain and Quality of Life in Patients with Diabetic Foot Ulcer: Preliminary Results..... | 245 |
| 443 | Effects of Physical Activity on Mental Health in Patients with Depression | 246 |
| 444 | Ageing of people with disability: Identification of risk factors related to falls..... | 246 |
| 445 | The grieving process: young adults strategies after the loss of a parent | 247 |
| 446 | Passion, Motivation and Subjective Well-Being in Leisure Surf..... | 247 |
| 447 | Back pain characteristics of university students..... | 248 |

| | | |
|-----|---|-----|
| 448 | Conception of Persons With 65 Years of Age or Older To Be Old or Aging | 248 |
| 449 | Psychological Wellbeing, Satisfaction With Life and Optimism in Sports Managers | 249 |
| 450 | (Ex)Users of Injectable Drugs Seropositives for HIV and Quality of Life | 249 |
| 451 | Participation of the Family Caregiver in Adhesion of Hypertensive Person To Treatment - Analysis of the Impact of Health Promotion | 250 |
| 452 | Host: Oral Health Care in a Public Hospital In | 250 |
| 453 | The Family Caregiver's Knowledge About the Treatment of Hypertensive Personal: analysis focusing on health education..... | 251 |
| 454 | from the Desire of Having a Child to the Desired Child: the Dream Come True for the Couple..... | 251 |
| 455 | Informal caregivers of Portuguese centenarian :a first glance from the Oporto Centenarian Study..... | 252 |
| 456 | Profile of the cervical spine of academic professors..... | 252 |
| 457 | The buffering effect of warmth and safeness memories and feelings against shame on depression..... | 253 |
| 458 | Self-Care Profile in Haemodialised Clients..... | 253 |
| 459 | Impact of lifestyle, quality of life and treatment adherence among overweight adolescents | 254 |
| 460 | Health-promoting lifestyle profile in Portuguese academic community..... | 254 |
| 461 | Do thought suppression tendencies strengthen the link between social rank and depressive symptoms? | 255 |
| 462 | Person dependent on invasive ventilation at home: caring in partnership with family | 255 |
| 463 | How body image inflexibility impacts on disordered eating attitudes and behaviours | 256 |
| 464 | Standards of sleep quality in hospitalized patients on medical surgery context | 256 |
| 465 | Stress in context Perioperative | 257 |
| 466 | What practices and behaviour after the fall of the elderly, in residential structures for seniors?..... | 257 |
| 467 | Anthropometric measures, eating habits and performance of Portuguese soccer players | 258 |
| 468 | Harmful Effects of the Use of Psychoactive Substances in Perception of Users | 258 |
| 469 | "My body, my shame": Does body image shame plays a specific role in binge eating? | 259 |
| 470 | The psychometric properties of the Body Image Shame Scale for adolescents (BISS-A)..... | 259 |
| 471 | Amyotrophic Lateral Sclerosis: Knowledge of the Quality of Life of People Affected | 260 |
| 472 | Children With Neurological Disease: Mishel's Theory and Maternal Behavior | 260 |
| 473 | Being fused with body image: the impact on one's quality of life | 261 |
| 474 | Experiential avoidance amplifies the impact of body image-related experiences on quality of life | 261 |
| 475 | Insomnia: Prevalence and associated factors | 262 |
| 476 | Accidents at work by excessive efforts/inappropriate movements in nurses | 262 |
| 477 | The implications of Emotional Intelligence in Self-esteem..... | 263 |
| 478 | Comfort in a permanent care unit/emergency service: Patients perception | 263 |
| 479 | Physical dependence elderly informal caregiver's mental health, living in Coruche County | 264 |
| 480 | Experiences of Patients Undergoing Renal Dialysis: Integrative Literature Review | 264 |
| 481 | Improper use and abuse of vocal cords among teachers: Intervention of the speech and language therapist..... | 265 |
| 482 | Educational Strategies for the Prevention of Amputation in People With Diabetes..... | 265 |
| 483 | Diabetic Health Profile..... | 266 |
| 484 | Translation, Adaptation and Cultural Validation of the Workstyle Short Form for Portuguese Population..... | 266 |
| 485 | What was the cause of skin rashes on Carcavelos and Costa da Caparica beaches last summer?..... | 267 |
| 486 | The life-world of aged in homes: ethnographic perspective..... | 267 |
| 487 | Quality of life, nutritional status and individual perceptions of working conditions of employees working in a food company..... | 268 |
| 488 | Intake Diet and Quality of Life in Diabetic Patients Admitted in a University Hospital in Southern Brazil..... | 268 |
| 489 | Somatotype and Body Mass Composition in European Portuguese Adult Speakers..... | 269 |
| 490 | Food Intake Quality in the Preoperative and Postoperative of Bariatric Surgery | 269 |
| 491 | Predictors of Postpartum Quality of Life in Brazilian Mothers | 270 |

| | | |
|-----|--|-----|
| 492 | Average of Sodium Intake of Meals Supplied To Workers | 270 |
| 493 | Strategies used by caregivers in communication with person with aphasia | 271 |
| 494 | Body Practice's Effects of Lian Gong in Health Promotion: a Literature Review | 271 |
| 495 | The motivational factors of college students to engage in a physical activity program | 272 |
| 496 | Correlation between fine and gross motor coordination in children | 272 |
| 497 | Stress in University students and cardiovascular response to academic stressors | 273 |
| 498 | Quality of Life of Palliative Patients – Differences Between Men and Women | 273 |
| 499 | Caring for someone with advanced disease at home: the caregiver's perceptions | 274 |
| 500 | Caring for people with dementia in the community: Caregiver's burden and quality of health | 274 |
| 501 | ANXIETY DISORDERS: a study with Patients in a Brazilian Psychiatric Hospital | 275 |
| 502 | Relationship Between Mental Illness and Work: Study in a Brazilian Psychiatric Hospital..... | 275 |
| 503 | Vaginal Parturition, Sexuality and Episiotomy: an Integrative Review | 276 |
| 504 | Theory of Diversity and Universality in Cultural Care: in Focus the Feminine Sexuality..... | 276 |
| 505 | The Terminal Illness within the Family System: a Critical Review of Literature..... | 277 |
| 506 | Perception of the person with Aphasia and its caregiver about the difficulties and conversational changes in the communication patterns in the post-morbid period | 277 |
| 507 | Performance Status of Palliative Patients..... | 278 |
| 508 | Generic drugs and brand name products: an approach about excipients | 278 |
| 509 | Difficulties, Concerns and Needs in Pediatric Oncology: The Reality of Pediatric Patients and Their Families Under the View of Hospital Clowns' | 279 |
| 510 | The impact of lifestyle on health and functional independence in the elderly | 279 |
| 511 | Prevalence and Determinants of Breastfeeding in Portugal..... | 280 |
| 512 | Photopolymerizable hydrogels containing drug-loaded particles for biomedical applications | 281 |

RD&T – RESEARCH, DEVELOPMENT & TECHNOLOGY IN HEALTH

| | | |
|-----|--|-----|
| 513 | Analysis of the alterations induced by working memory tasks in the electroencephalogram..... | 281 |
| 514 | Using video games to combat childhood obesity: an integrative literature review..... | 282 |
| 515 | Photodynamic therapy in retinoblastoma: Cell proliferation and oxidative stress effects..... | 282 |
| 516 | Photodynamic therapy in retinoblastoma: Effects in cell viability, cell cycle and P53..... | 283 |
| 517 | Comparison Study of Procedures for Aspiration of Biopsy Samples | 283 |
| 518 | The contribution of Cellblock – Histogel – in bronchial washing samples | 284 |
| 519 | Vertebral Metrics: a non-invasive instrument that evaluates the spine..... | 284 |
| 520 | Health Promotion (HP) in nursing curriculum and learning contexts – 1st and 2nd cycles | 285 |
| 521 | Nursing aid provided for families of children with leukemia | 285 |
| 522 | S/N Ratio on Perception of the Word in European Portuguese in Normal-Listener..... | 286 |
| 523 | CogniPlus® software as Occupational Therapy adjuvant in the training of working memory: an experimental single subject design | 286 |
| 524 | Growth model in melanocytic skin lesions: a geometric look to skin pigmented lesions | 287 |
| 525 | Patient Safety in Pre-amputation Communication | 287 |
| 526 | Instrument for Measuring Patient Safety Culture in Nursing..... | 288 |
| 527 | Autonomic nervous system balance: Classic analysis versus time-frequency analyzes..... | 288 |
| 528 | Characterization and evaluation of skin lesions using symbolic dynamics | 289 |
| 529 | Continuous Autonomic Nervous System Evaluation and Inertial Analysis..... | 289 |
| 530 | University of Aveiro's Advanced Voice Function Assessment Databases (AVFAD) | 290 |
| 531 | Aphasia Assessment by the Portuguese Speech and Language Therapists..... | 290 |
| 532 | Children's Auditory Processing Performance Scale: parents versus teachers | 291 |
| 533 | A novel method for skin lesion segmentation using a multi-scale Local Normalization | 291 |
| 534 | Language development in children with cochlear implant..... | 292 |
| 535 | Profile of Nursing research in Intensive Therapy on Brazilian Post-graduation | 292 |
| 536 | Central Auditory processing evaluation – normative data for portuguese pediatric population | 293 |
| 537 | Soap formulation with coffee grounds. A new concept of food by-products | |

| | |
|---|-----|
| valorization and health promotion | 293 |
| 538 Hair extractive and microbial contamination in the surgical preparation of animal skin..... | 294 |
| 539 Hall Effect as alternative system for upper prosthetics control- a preliminary test | 294 |
| 540 Effects of inhaled lavender oil (<i>Lavandula angustifolia</i>) in response to agitation in people with dementia: intervention study | 295 |
| 541 Nursing Care in Control of Infection in Newborn Intensive Care Unit: Systematic Review..... | 295 |
| 542 University of Aveiro's Standardised Voice Case History Form | 296 |
| 543 Impact of Ionizing Radiation on Lymphoma Cell Line -Cell Death, BAX/BCL-2, P53 Expression | 296 |
| 544 Ionizing radiation induce DNA damage and cell cycle arrest in a lung cancer cell line | 297 |
| 545 Radiotherapy in Lymphoma and Lung Cancer patients - TNF-Alpha levels and T Cell subsets | 297 |
| 546 Construction and validation of instruments for systematization of nursing care in person during hemodialysis..... | 298 |
| 547 Modelling a Software for Qualitative and Quantitative Analysis of Oropharyngeal Swallowing by Videofluoroscopy | 298 |
| 548 Discrimination in professional musicians and non musicians | 299 |
| 549 Hazard Analysis and Critical Control Points (HACCP): still a public health effective tool?..... | 299 |
| 550 Clinical trials of blood-borne and vector-borne diseases: an European cross-analysis | 300 |
| 551 Extrusion Processes to Fabricate Biodegradable 3D Scaffolds for Tissue Engineering | 300 |
| 552 Biomechanical Analysis of the Cartilage | 301 |
| 553 Development of a computational tool for characterization of thermal images in medical applications. | 301 |
| 554 Implementation project of infection prevention bundle related to central venous catheter..... | 302 |
| 555 Evolution of dependence in self-care, in a sample of customers, three months after discharge..... | 302 |
| 556 Integrative rehabilitation device – exoskeleton..... | 303 |
| 557 Study the healing effect of creams <i>Inga subnuda</i> in skin lesions..... | 303 |
| 558 Effects of <i>Vernonia Polyanthus'</i> dry extract ointment on wound healing in rats..... | 304 |
| 559 Adaptation and validation of Mini-Mental State Examination for individuals with aphasia..... | 304 |
| 560 Potential of the platforms for assessment/monitoring the health of the elderly at distance | 305 |
| 561 The nurse's experience about adolescent's with CF care – a qualitative approach | 305 |
| 562 Information and communication technology in higher education in nursing: for an innovative praxis.. | 306 |
| 563 Nursing: reasons for a choice | 306 |
| 564 Integration in family emergency service: integrative review | 307 |
| 565 Characterization women who had cesarean conducted in a state of Northeast Brazil | 307 |
| 566 Growth and development of Brazilian children and institutionalized assumpti | 308 |
| 567 Illness risk in nursing work in mobile emergency service..... | 308 |
| 568 Trauma and Life Events: Contribution to a risk model of depressive symptoms in adolescents..... | 309 |
| 569 Prototype of litter: technologies in health in transportation of persons | 309 |
| 570 Robotic surgery: new horizons in gynecological surgery..... | 310 |
| 571 Prevalence of low back pain in children and adolescents from the Algarve region..... | 310 |
| 572 Experiences of pleasure and suffering in Brazilian mental health care services | 311 |
| 573 Psychological Impact of diagnostic exams | 311 |
| 574 The effects of smoking in the auditory system | 312 |
| 575 Validation of Scales of Chronic Wound Healing for Portugal and Spain: Project of a Shared Methodology | 312 |
| 576 MODULAR biomedical signal registration system | 313 |
| 577 Evaluating phosphate concentration throughout the production of dried and salted cod..... | 313 |
| 578 Relationship between articulatory disorders and orofacial anomalies in Elementary School..... | 314 |
| 579 Relationship between articulatory disorders and family history in Elementary School..... | 314 |
| 580 Mean Length Utterance in children (3:6 to 4 years): contribution to normative data in Portuguese language | 315 |
| 581 The economic-industrial health care complex in Brazil: challenges of contemporary health care and national development | 315 |

| | | |
|-----|--|-----|
| 582 | Characterization of children's vocal profile ageing between 0 to 9 years and identification of their normal patterns. | 316 |
| 583 | Expectation of Women by Conducting Hysterectomy | 316 |
| 584 | Is 18F-Fdg Uptake Affected by Incubation With Sodium Butyrate in Colon Cancer Cell Lines? | 317 |
| 585 | Butyrate and Irinotecan: a New Approach for Colon Cancer..... | 317 |
| 586 | Can Photodynamic Therapy Make a Difference in Retinoblastoma? | 318 |
| 587 | an Orthotopic Animal Model of Retinoblastoma..... | 318 |
| 588 | Management Competences in Nursing | 319 |
| 589 | Thermal profile of the knee and pain location in young people with and without knee pain | 319 |
| 590 | Masseter's electromyographic assessment in different consistencies' food swallowing | 320 |
| 591 | Acoustic and Temporal Analysis of swallowing sounds: use of electronic stethoscope on cervical auscultation | 320 |

TECHNOLOGICAL PLATFORMS AND SHARING CONSTRUCTION OF COMMUNICATION

| | | |
|-----|---|-----|
| 592 | Acute confusion in Portuguese Hospital..... | 321 |
| 593 | The information systems integration for a better caring and chronic patients' empowerment. | 321 |
| 594 | Information and Communication Technologies in Cerebral Palsy: What is its relevance for the development of communication and learning?..... | 322 |
| 595 | HealthCare Information System to all Health professionals - Portuguese insight..... | 322 |
| 596 | Virtual Learning Environment: development of model and script for semi in person and distance learning..... | 323 |
| 597 | Issues and specifications on a prescription system for controlling patient takes and drugs usage..... | 323 |
| 598 | Comforting Geriatric Care: Ways of being/acting of care role players..... | 324 |
| 599 | Communication Design a tool for health literacy promotion: designing information health to empower patient with Chronic Pain..... | 324 |

Subject Abstracts

013

NEW THERAPEUTICAL SYSTEMS FOR MULTIPLE SCLEROSIS: PATIENT PERCEPTION AND CHALLENGES

Maximiano Ribeiro^{1,11,a}, Sílvia Farias^{11,b}, Ana Torres^{11,c}, Carolina Sousa^{11,d}, Sofia Barros^{11,e}, Fátima Roque^{11,f}, Paula Coutinho^{11,g}

¹*Escola Superior de Saúde. Instituto Politécnico da Guarda. Portugal*

¹¹*Unidade de Investigação para o Desenvolvimento do Interior. Instituto Politécnico da Guarda. Portugal*

Introduction: Multiple Sclerosis is a chronic, progressive, autoimmune disease characterized for damage of myelin and axons. This disorder has a considerable social and economic impact. The prevalence of Multiple Sclerosis in Portugal is estimated to be approximately 50/100,000 inhabitants, according to the Portuguese Multiple Sclerosis Society. In order to minimize the problems created by this disease some treatments are being used, although the ideal treatment has not been yet developed.

Objective: The aims of this study were to ascertain the most widely used treatment for the different types of Multiple Sclerosis and to identify the most relevant parameters that may influence treatment adherence.

Methods: From September to December 2013, data of 60 patients from Portuguese Multiple Sclerosis Society were collected by an online questionnaire. Demographic, disease and therapy related data were collected and statistically analyzed.

Results: About 55% of respondents had Relapsing-Remitting Multiple Sclerosis. Interferon β was the drug most used in the treatment of all types of multiple sclerosis in monotherapy (56,7%) or in combination with other drugs (5%). 58,3% of patients mention appeal to nonpharmacological therapies such as adapted food and nutrition and physiotherapy. Difficulties related to intravenous drug administration was the most relevant factor identified by patients (50%).

Conclusions: The convenience of drug administration is a factor to take in account for the developing of new therapeutic systems due to its role in treatment adherence. Biotechnology and its tools should have an important role in the improvement/refinement of therapy in the near future.

Descriptors: Multiple Sclerosis; Survey; Treatment; Adherence; Challenges.

^a mribeiro@ipg.pt

^b silvia_farias17@hotmail.com

^c anatorres200@hotmail.com

^d ana_karolina_4@hotmail.com

^e sofiabarros_0307@hotmail.com

^f froque@ipg.pt

^g coutinho@ipg.pt

155

FOOD SUPPLEMENTS LABELS AND HEALTH CLAIMS: IMPLEMENTATION OF EUROPEAN UNION REGULATION

P. Coutinho^{1,11,a}, A. Vasconcelos^{11,b}, F. Almeida^{11,c}, M.J. Menino^{11,d}, T. Barata^{11,e}, M.F. Roquel^f, M.P. Ribeiro^{11,g}

¹Unidade de Investigação para o Desenvolvimento do Interior. Instituto Politécnico da Guarda. Portugal

¹¹Escola Superior de Saúde. Instituto Politécnico da Guarda. Portugal

Introduction: The consumption of food supplements have increased exponentially in last years, mainly as attractive adjuvants in the prevention/treatment of diseases. Commission Regulation (EU) 432/2012 of 16 May 2012 establish a list of permitted health claims made on foods, and consequently all food supplements with labels not conform must be outflow until June 14 of 2013.

Objective: The present study aimed to verify the legal compliance of the food supplements labels in different places of sale in the period following the established limit date in the EU regulation.

Methods: For different categories were analyzed a total of 187 products marketed in herbalists, Over The Counter Stores, pharmacies, supermarkets and internet, and registered the legal compliance of its labels through the registration of the compliance of legal mandatory criteria and subsequent quantitative analysis, during the period of Sept to December 2013.

Results: The results obtained show the existence of some food supplements available to consumers whose labelling are still in uniform according to the new UE Regulation. In Supermarkets have not been recorded any non-conformity on labels analyzed. Internet and herbalists were the market places with higher number of nonconformities, and in pharmacies and drugstores were registered lower number of nonconformities.

Conclusions: In accordance with the Regulation all food supplements not conform must be outflow until June 14 of 2013, what is not confirmed in our study. With this study we confirm the need to pursue the verification and improvement of effective application, accompanied by health professionals counseling.

Descriptors: Labeling; Food Supplements; Commission Regulation (EU) 432/2012 of 16 May 2012; Health claims; Nonconformities.

^acoutinho@ipg.pt

^bana-vasconcelos@portugalmail.pt

^cfernanda.pnva@gmail.com

^dmaria_menino@hotmail.com

^etbaratabarata@hotmail.com

^ffroque@ipg.pt

^gmrribeiro@ipg.pt

156

FROM MEANINGS OF SPIRITUALITY TO THE CHALLENGES OF NURSES IN FAMILY INTERVENTION

Maria Henriqueta Figueiredo^{1,a}, Zaida Charepe^{11,b}, Manuel Brás^{11,c}, Palmira Oliveira^{1,d}, Pedro Melo^{11,e}

¹Escola Superior de Enfermagem do Porto. Portugal

¹¹Universidade Católica Portuguesa. Portugal

¹¹¹Instituto Politécnico de Bragança. Portugal

Introduction: Spirituality incorporates key principles of family rituals that determine to be in family and being with others, involving the search for a sense of family continuity. As a field of family assessment and intervention requires nurses to promote their own spiritual health and acknowledge their spiritual needs.

Objective: understand the meanings of spirituality for nurses, describe their experiences of spiritual care with families, recognizing the value assigned to the spiritual dimension in assessment and family intervention and identify the expectations of nurses in the optimization of spirituality as a resource for care.

Methods: The study is qualitative, sustained on systemic thinking. The methodological approach was the Appreciative Inquiry. Participants were twenty nurses working in Primary Health Care. Appreciative Interview was used and data analysis was supported by content analysis.

Results: The following categories of analysis emerged: Meanings of spirituality, Spiritual care experiences with their families; Value assigned to the spiritual dimension in assessment and family intervention. Spirituality stands out as a multidimensional belief concept (bodily, emotional and relational), lived with families mostly in contexts of suffering and end of life. Nurses value this dimension by associating it with respect, authenticity and holism.

Conclusions: The need for improve spirituality education and sharing experiences evidenced as key resources in the optimization of care focused on the family system.

Descriptors: Family Nursing Spirituality, Appreciative Inquiry.

^ahenriqueta@esenf.pt

^bzaidacharepe@ucp.pt

^cmambbras@gmail.com

^dpalmiraoliveira@esenf.pt

^epedromelo@ucp.pt

157

**BEHAVIORS OF OUTDOOR WORKERS
CONCERNING SUN EXPOSURE**

Luís Fonseca^{1,a}, Ana Lima^{1,b}, Cátia Lopes^{1,c}, Cristina Gonçalves^{1,d}, Maximiano Prata Ribeiro^{1,II,e}, Paula Coutinho^{1,II,f}, Fátima Roque^{1,II,g}

¹*Escola Superior de Saúde. Instituto Politécnico da Guarda. Portugal*

^{II}*Unidade de Investigação para o Desenvolvimento do Interior. Instituto Politécnico da Guarda. Portugal*

Introduction: Exposure to solar ultraviolet radiations is well known as an important factor on skin cancer development. In Portugal, outdoor workers are too long exposed to the sun, and consequently to the ultraviolet radiation effects. Sun protection behaviors are important to the prevention of skin cancer.

Objective: identify the behaviors of outdoor workers, concerning sun exposure.

Methods: A cross-sectional study was performed. A questionnaire was applied by an interview to 80 subjects with outdoor activities (farmers, construction workers, life-guards and fishermen).

Results: Most of the workers (76,3%) have reported their concern about sun exposure, and 61 of the 80 subjects surveyed, have already suffered a sunburn, but just 43,8% use sunscreen protection. Hat and clothes are the protection more mentioned by the workers. From the subjects that referred to use sunscreen protection, just 6% use it over all the year. The price of sunscreens was the main factor mentioned for not using them, followed by the discomfort of their use during activities.

Conclusions: Although many general campaigns about the sun ultraviolet radiations exposition on the skin have been made, it is necessary an intervention directed to outdoor workers to improve their behaviors related to sunscreen protection. Reimbursement of costs with sunscreen protection, to these workers, must also be discussed by authorities, as an important public health measure.

Descriptors: Sun exposure; sun protection; behaviors; outdoor workers.

^a luis.fonseca023@gmail.com

^b ana.lima@outlook.com

^c catia_other@hotmail.com

^d cristinagoncalves_05@hotmail.com

^e mribeiro@ipg.pt

^f coutinho@ipg.pt

^g froque@ipg.pt

507

PERFORMANCE STATUS OF PALLIATIVE PATIENTSAna Querido^a, Maria dos Anjos Dixe^b*Escola Superior de Saúde. Instituto Politécnico de Leiria. Portugal*

Introduction: Symptoms affect daily living activities, compromising patient performance. It is common assumed that palliative patients are self-care dependent and cognitive impaired. Nevertheless, some patients keep on their living activities in spite the palliative situation, dealing with several symptoms. Evidence regarding functional performance and presence of symptoms in palliative patients cared for in different contexts/places is needed.

Objective: To characterize the performance status of palliative patients. To identify the symptoms interfering with performance status. To correlate performance status, age and the context/place of care.

Methods: This correlational study used a socio demographic/clinical questionnaire, Mini Mental State Examination (MMSE) and *Karnofsky Performance Status* (KPS). 205 palliative patients were recruited from Portuguese palliative care settings – inpatient, day units and home care. Ethical issues were attained.

Results: Patients aged between 28 - 89 years, living with illness for a mean time of 3 years and 9 months, mostly with cancer (85,40%), all scoring MMSE>25, indicating cognitive well function. Patients varied KPS from 30 (severe disable and hospitalization required) to 100 (normal). Median=70 (cares for self, unable to work); mode=80 (normal activity with effort, disease symptoms). Patients living home had better performance but the prevalence of pain was higher. There are significant differences in performance according to age and time of illness. Lower performance is correlated with age and context of care.

Conclusions: Although evidence of disease progression, patients continue their daily life functioning with good performance. Pain was determinant. Health professionals should consider symptom control to improve patient performance.

Descriptors: Palliative Patients; Performance Status; KPS; Symptom control.

^a ana.querido@ipleiria.pt^b maria.dixe@ipleiria.pt

508

GENERIC DRUGS AND BRAND NAME PRODUCTS: AN APPROACH ABOUT EXCIPIENTSAndreia Nogueira^{1,a}, Leticia Carvalho^{1,b}, Raquel Tavares^{1,c}, Maximiano Prata Ribeiro^{1,d}, Paula Coutinho^{1,e}, Fátima Roque^{1,f}*¹Escola Superior de Saúde. Instituto Politécnico da Guarda. Portugal**¹Unidade de Investigação para o Desenvolvimento do Interior. Instituto Politécnico da Guarda. Portugal*

Introduction: In general excipients are considered to be “inert”, however in certain patients under certain circumstances some of them have demonstrated some activity, with increasing reports of adverse reactions. Generic drugs are required to have the same active substances, strength, dosage form and rout of administration as the brand name product, but excipients could be different. The excipients that have recognized action or effects should be declared on the labelling of medicines, and are listed in the Guideline *Excipients in the label and package leaflet of medicinal products for human use*.

Objective: To compare generic drugs with brand name drugs in terms of excipients composition, and to evaluate the presence of excipients listed in the guideline.

Methods: Search of the Summary of Product Characteristics, in the Portuguese National Authority of Medicines and in the European Agency of Medicines websites for the 10 best-selling drugs in the Portuguese generic market. For the same active substance, it was compared the list of excipients to all medicines in the market.

Results: List of excipients was analyzed for a total of 790 medicines, and all of them contained one or more excipients listed on the guideline. There are great differences in the excipient composition between medicines, and depending on the drug, this excipients were presented on generic drug or in brand name drug.

Conclusions: Patients could be exposed to a significant amount of excipients that could have potential toxicity to some of them. So the option between generic or brand name products must have this in consideration.

Descriptors: Generic drugs; brand name drugs; excipients; adverse reactions; guidelines.

^a andreia_nogueira_19@hotmail.com^b leticia_carvalho1991@hotmail.com^c rakeltavares@hotmail.com^d mrribeiro@ipg.pt^e coutinho@ipg.pt^f froque@ipg.pt