

MEETING ABSTRACTS

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Session 1: Citizenship in health

S1

Health literacy and health education in adolescence

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Health literacy, a more complex concept than knowledge, is a required capacity to obtain, understand, integrate and act on health information [1], in order to enhance individual and community health, which is defined by different levels, according to the autonomy and personal capacitation in decision making [2].

Medium levels of Health literacy in an adolescent population were found in a study conducted in 2013/2014, being higher in sexual and reproductive health and lower in substance use. It was also noticed that the higher levels of health literacy were in the area adolescents refer to have receipt more health information. The health literacy competence with higher scores was communication skills, and the lower scores were in the capacity to analyze factors that influence health. Higher levels were also found in younger teenagers, but in a higher school level, confirming the importance of health education in these age and development stage. Adolescents seek more information in health professionals and parents, being friends more valued as a source information in older adolescents, which enhance the importance of peer education mainly in older adolescents [3].

As a set of competences based on knowledge, health literacy should be developed through education interventions, encompassing the cultural and social context of individuals, since the society, culture and education system where the individual is inserted can define the way the development and enforcement of the health literacy competences [4]. The valued sources of information should be taken into account, as well as needs of information in some topics referred by adolescents in an efficient health education.

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Session 2: Evaluation & intervention in health

S2

The effect of a walking program on the quality of life and well-being of people with schizophrenia

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Schizophrenia is a serious and chronic mental illness which has a profound effect on the health and well-being related with the well-known nature of psychotic symptoms. The exercise has the potential to improve the life of people with schizophrenia improving physical health and alleviating psychiatric symptoms. However, most people with schizophrenia remains sedentary and lack of access to exercise programs are barriers to achieve health benefits. The aim of this study is to evaluate the effect of exercise on I) the type of intervention in mental health, II) in salivary levels of alpha-amylase and cortisol and serum levels of S100B and BDNF, and on III) the quality of life and self-perception of the physical domain of people with schizophrenia. The sample consisted of 31 females in long-term institutions in the Casa de Saúde Rainha Santa Isabel, with age between 25 and 63, and with diagnosis of schizophrenia according to the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR). Physical fitness was assessed by the six-minute walk distance test (6MWD). Biological variables were determined by ELISA (Enzyme-Linked Immunosorbent Assay). Psychological variables were assessed using SF-36, PSPP-SCV, RSES and SWLS tests. Walking exercise has a positive impact on physical fitness (6MWD – $p=0.001$) and physical components of the psychological tests ([SF-36] physical functioning $p < 0.05$; [PSPP-SCV] functionality $p < 0.05$ and SWLS $p < 0.05$ of people with schizophrenia. The walking program enhances the quality of life and self-perception of the physical domain and physical fitness of people with schizophrenia.

S3

Diagnosis and innovative treatments - the way to a better medical practice

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associated with dental pain ($p=0.012$) and oral/prosthetic hygiene ($p=0.034$).

Conclusions

A high prevalence of tooth loss was found in the sample studied and also the need of improvement of the removable prosthesis is fundamental. Improvement in oral healthcare and oral hygiene habits is essential to promote better oral health and quality of life among the institutionalized elderly.

Keywords

Edentulism, institutionalized elderly, oral rehabilitation, quality of life.

P12

Therapy adherence of outpatients in the pharmacy services of a hospital unit

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The low adherence to therapy of chronic patients undergoing long-term treatment has been identified as a major factor responsible for the lack of effectiveness of prescribed treatments.

In the present study, we have conducted interviews to patients over the age of 18 that acquired their medications in a hospital pharmacy of the north region of Portugal. Compliance with the treatment regimen and self-perception of health status were assessed by applying the Morisky Medication Adherence Scale© (MMA-8-Item) and the Brief Illness Perception Questionnaire© (IPQ-B), respectively.

The association between gender and some types of disease was observed for Psoriatic Arthritis and for the incidence of breast cancer in women and lung cancer in males. Of the 11 patients, 3 reported to have undergone therapeutic changes from the beginning of treatment. These three correspond to patients with Hepatitis B and Psoriatic Arthritis.

The results of therapy adherence show 90.9 % of adherence, in which 5 of the 11 respondents showed a high degree of adherence to therapy and only 1 revealed lower levels of adherence. According to the MMA-8-Item ($n=11$) respondents do not associate the non-adherence to oblivion of taking the medicines. However, the limiting factors of adherence most mentioned were adverse effects associated with the medication and depressive states linked with the negative impact that the disease has on society.

Although this is a pilot study, our results have shown to be promising. Patients reported high adherence rates and it was verified a relationship between therapy adherence and the self-perception of health.

Keywords

Therapy adherence, health status, effectiveness

P13

Universal access and comprehensive care of oral health: an availability study

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The constitutional right to health can be considered as one of the greatest social achievements of the post-democracy period in Brazil.

After 25 years of the implementation of the Unified Health System, although undeniable advances have been observed, the guidelines for universal access and comprehensive care in oral health still remain as challenges. In this sense, we performed an availability study (AS) of oral health services with a focus on universal access and comprehensive care.

The EA consists of a set of procedures that precede the stage of evaluation for verifying the extent to which the object can be evaluated. In this study the following steps were taken: (a) description of oral health care by identifying goals and activities; (b) design of the theoretical and logical model; (c) development of an evaluation matrix; (d) identification of stakeholders in the evaluation; and (e) achieving consensus on the evaluation procedures.

The evaluative matrix of oral health care with a focus on universal access and comprehensiveness was composed of five dimensions: accessibility; availability; priority of promotion and prevention actions; articulation of promotion, prevention and recovery; and integral approach of individuals and families. For each dimension indicators were discussed related to the level of dental care: management, primary care, specialized care, urgent and emergency services and hospital care.

The EA proved to be appropriate and allowed the identification of priority areas of oral health care for future evaluations.

Keywords

Health services evaluation, access, oral health care services, Integrality in Health, oral health

P14

Is the respiratory function of children a predictor of air quality? Coimbra as a case study

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Background

Respiratory changes are increasingly present, from an early age, either because life is increasingly sedentary, or because city pollution is increasingly present. Knowing that the circuits of the children of the city of Coimbra, are apparently "clean", we assessed two groups of children, using spirometry in the search for respiratory changes denoting disease. Objective: to assess a population of children representing the municipality of Coimbra, in order to understand possible respiratory changes.

Methods

We studied children who attend the 1st grade and those who attend the 4th grade, using spirometry. The children were selected among those who had no history of disease, nor evident symptoms and presented adequate collaboration. The results were stratified to be representative of the population of the municipality of Coimbra.

Results

The results show a predominantly healthy population, with children of the 1st grade (6-7 years old), presenting alterations to small and medium airways in 7.0 % of the cases, with girls representing 4.3 % of the sample. Only in 0.4 % of the children were we in the presence of respiratory alterations of the obstructive type. In the 4th grade group (9 to 10 years), the results showed 4.0 % of obstructive alterations in peripheral airways and only in 2.0 % was obstructive respiratory alteration observed.

Conclusions

We can say that the population between 6 and 10 years old presents a good level of absence of disease, which cannot be unrelated to good air quality of the city and low level of pollution.

Keywords

Spirometry, city pollution, children