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 (DMTI) 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 (QOF), representing a public health issue.

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

Methods: Systematic review of full text studies, published from January 2006 to June 2014 that included the QOF of children/young people with DMTI, children/young people with DMTI with no other pathology and their parents, consulting CINAHL, MEDLINE, MedicLatina, Academic Search Complete, Psychology and Behavioral Sciences Collection and Scholar Google, using “quality of life”, “child*”, “diabetes”. Studies of children/young people with DMTI 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 DMTI have impaired school performance.
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 Fê is of 1660 (INE, 2011).

Objectives: To assess nutritional status of people with 75 years or more in the municipality of Alfândega da Fê; 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 Fê.

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.