

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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Results

90.6 % of the sample practices weekly physical activity and 60.9 % shows a sleep disorder, being more prevalent among the female gender. It was possible to infer that the older the children were, the less probability they had for having a sleep disorder.

Conclusions

There isn't any positive relationship between the weekly practice of physical activity and a sleep disorder. Children who practice light, moderate or vigorous physical activity can show a reduction in the quality of their sleeping patterns. Nevertheless, the results highlight a considerable percentage of children with some kind of disorder, which may signal a possible underreporting of the lack of quality sleep of this population.

Keywords

Quality of sleep, physical activity, school-aged children, learning centres, questionnaire

O185

What is the potential for using Information and Communication Technologies in Arterial Hypertension self-management?

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Background

Arterial Hypertension (HTA) is a chronic disease with high morbidity, mortality and a socio-economic impact. Information and Communication Technologies (ICT) facilitate the access to the necessary information for HTA self-management. Nowadays, there is a lack of knowledge of the utility, ease and interest expressed by people with HTA for the use of ICTs in accessing the information for the disease's self-management. Objective: to characterize both ICT's potential and HTA patients' global needs for information.

Methods

Quantitative, exploratory, descriptive and cross-sectional study using phone interviews and a stratified random probability sample of 391 patients on the National Program of Cardiovascular Disease Prevention list within a Local Portuguese Healthcare Unit.

Results

People with HTA manifest a higher information need not only to integrate self-management in their everyday life, but also to motivate the significant people to help them in their daily life and to increase their knowledge on the available resources within the community. People with a lower education level ultimately display a lower technological literacy, lower access, lower use and more difficulty in the use of information resources, preferring the use of voice and image devices. People with a higher education level and technological literacy are younger and admit to use and value more Web-Based technologies.

Conclusions

Younger and higher educated people present a higher potential use of ICTs. Although displaying a higher intent towards the use of voice devices, older and less educated people mention having significant people that may help them in accessing the health information through ICTs.

Keywords

Arterial Hypertension, eHealth, technological literacy, health literacy, Information and Communication Technologies, Self-management

O186

Exploring psychosocial factors associated with risk of falling in older patients undergoing haemodialysis

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Background

Fall rates have been found to be higher in haemodialysis (HD) patients than in the general older population. Post-dialysis fatigue, polypharmacy, dialysis related hypotension, chronic kidney disease-mineral and bone disorder, have been recognised as risk factors for falls peculiar to HD. However, little attention has been paid to the psychosocial factors related to falls risk in this population. Objectives: This study aimed to analyse the association between falls risk and psychosocial variables (anxiety, depression and social isolation) among older adults undergoing HD.

Methods

A cross-sectional study was conducted. Sociodemographic and health-related data were collected through a structured questionnaire. Risk of falling was assessed with the Five Times Sit to Stand (FTSS) test and isometric muscle force (IMF). Anxiety and depression were assessed with The Hospital Anxiety and Depression Scale. Social isolation was measured with The Lubben Social Network Scale-6 (LSNS-6). Descriptive and inferential analyses were performed.

Results

Seventy-two HD patients (mean age: 62.29 ± 14.5 ; 69.4 % male) have participated. Falls risk varied according to age, education, self-rated physical and mental health, visual and hearing impairment, and history of falls. Significant statistical differences were found between anxiety and IMF ($p = 0.011$) and between depression and FTSS ($p < 0.01$) and IMF ($p = 0.033$) scores (i.e., falls risk increase with anxiety and depressive symptoms). A significant correlation was observed between IMF and LSNS-6 ($r_s = 0.368$; $p < 0.01$).

Conclusions

The findings suggested that psychosocial factors are related with increased risk of falling among HD older patients. Fall preventive strategies should also include psychological and social support to patients undergoing HD.

Keywords

Risk of falling, haemodialysis, older adults, anxiety, depression, social isolation

O187

Development of pressure ulcers on the face in patients undergoing non-invasive ventilation

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Background

The use of Non-Invasive Ventilation (NIV) has been increasing in clinical practice, however, the evidence has shown that its implementation may lead to development of ulcers of the face. Objective: to determine the prevalence of face ulcers on the face of patients admitted in an Intermediate Care Unit (ICU) submitted to NIV and to identify the factors associated to its development.

Methods

A prospective study conducted in a ICU between September and December 2015. Inclusion criteria of: age ≥ 18 years, patients admitted to the ICU, submitted to NIV and without ulcers of the face at the time of admission, lead us to a sample of 30 participants. Data were collected through a questionnaire, the Braden and Glasgow scale.

Results

The prevalence of ulcers on the face was of 26.7 % with a mean onset time of 3.3 ± 1.1 days. Participants were mostly males (70 %), with a mean age of 74.2 ± 10.3 years. Those who have developed an ulcer showed an older average age of 76.5 years, 16.7 % were changing sensitivity, 16.7 % had the facial skin intact and dry, 26.7 % used reused masks and 16.7 % had an ulcer Grade II. There was a statistically significant positive correlation between the development of an ulcer with the number of hours of daily NIV, the number of days of NIV, days of hospitalization, and a negative correlation with the level of consciousness.

Conclusions

We observed a high prevalence of ulcers. Thus, this emphasizes the need for further research to increase knowledge to subsidize ulcer prevention interventions in patients with NIV.

Keywords

Non-invasive ventilation, nose ulcers, facial ulcers, pressure ulcers

O188

The elder hospitalized: Limiting factors of comfort

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Background

Hospitalization causes significant changes in the lives of the elderly, due to factors such as the environment, changes in routines, loss of functional capacity, among others. Therefore, it is crucial to identify the contextual factors that emerge as discomforting. Objectives: To identify the limiting factors for comfort on hospitalized elderly.

Methods

It is a descriptive study using qualitative methods of data gathering, guided by the ethnographic method. Semi-structured interviews were conducted with 20 elderly patients, audio-recorded and submitted for content analysis [1]. The patients were selected from admissions to the medical services of a Central Hospital, in Lisbon. There was participant observation in order to understand the situational experiences, based on previously structured scripts [2].

Results

Regarding the action context, the factors that emerged, that cause discomfort included environmental conditions (light, noise, equipment, colour, temperature, natural or artificial elements of the environment); quality of food; the absence of activities as well as the lack of human resources and time to care.

Conclusions

Comfort nursing care is challenged by the unpredictability of circumstances surrounding the satisfaction of multiple health needs and resources for caring. The action context, related to all its elements, can be limitative of the humanization and completeness in geriatric comfort care, which has a negative impact on the comforting experience of the elderly in hospital.

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Keywords

Elderly, hospitalization, limiting factors, comfort

O189

Physical activity and health state self-perception by Portuguese adults

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Background

According to the World Health Organization (2015) [1], physical activity translates into significant health benefits and the lack of its practice constitutes a fundamental risk factor in non-transmitted diseases. Objectives: to determine physical activity levels in adults that go (N = 150) or do not go (N = 206) to a gym and relate them with health self-perception (from mediocre to very good).

Methods

Data was collected through the International physical activity questionnaire (IPAQ) and analysed using SPSS 23 for Windows.

Results

In accordance with the minimal weekly referential of vigorous (75') and moderate (150') practice recommended by WHO, we found that 98.6 % of practitioners achieved the recommendations, against the 54.8 % of non-practitioners. Only 27.6 % of non-practitioners against 63.3 % of practitioners achieves or surpasses the weekly moderate activity referential recommended by WHO for additional health benefits (300').

In contrast with different health states of participants, some significant differences manifest ($p < .05$) in frequency and duration of diverse physical activity types, but not in the sitting time. Also, in the same analysis, divided in practitioners and non-practitioner's subgroups, no significant differences were observed ($p < .05$)

Health states Good and Very Good revealed themselves statistically in contrast ($p > .05$) of frequency and duration of moderate and vigorous activities, between practitioners and non-practitioners, with the first having advantage, the same not happening in light activities and in sitting time.

Conclusions

Results confirm recent studies [2, 3] and highlight the urgent necessity of promoting physical activity as a health and well-being promoting factor in populations.

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Keywords

Health state, physical activity, IPAQ

O190

Satisfaction with social support in the elderly of the district of Bragança

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