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09 ^{and} 10, MAY 2014

CHALLENGES & INNOVATION
IN HEALTH

Abstracts

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097

CONTAMINATION LEVELS THAT COMPROMISE THE HYGIENIC CONDITION IN THE HANDLING OF FOOD

Isabel Sousa^{1,a}, Marília Gonçalves^{1,v,b}, Rita Portelinha^{1,c}, Tânia Ferreira^{1,iv,d}, Andrea Afonso^{1,ii,e}, António Nogueira^{1,iii,f}, Bruno Pires^{1,ii,g}

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Introduction: Microbiological contamination of food is a major public health problem, affecting millions of people worldwide. Most of the contamination is associated with bad practices in the handling and processing of food, due to poor hygiene of food worker's hands or utensils and surfaces used in this manipulation.

Objective: The aim of this study was evaluate the hygienic condition of food handling in the district of Bragança, determining microbial contamination of utensils and worker's hands.

Methods: This study evaluates the hygienic condition in 421 samples of utensils and 421 samples of worker's hands, during the period 2009-2010.

Results: With respect to the worker's hands, 39% of cases showed contamination. In 57% of these samples total coliforms were identified, in 26% of them fecal coliforms, Staphylococcus aureus in 10% and finally 7% with Escherichia coli. The utensils contamination was confirmed in 30% of samples with results "not satisfactory" and 4% had results "bad". These contaminations stand out 60% of the samples with the presence of total germs, 28% with total coliforms, fecal coliforms with 9% and even 3% with Escherichia coli. It was also found that only 37% of the samples developed positively.

Conclusions: It was concluded that there is a better cleaning of utensils manipulation than the worker's hands, however the trend to improve the hygienic condition is most pronounced in the hands of these workers. The implementation of a program of rules for good hygiene practices will reduce these contaminants to lower levels.

Descriptors: food handling; food contamination; control; prevention, microbiological.

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098

RESIDUAL NEUROMUSCULAR BLOCKADE IN PATIENTS UNDERGOING SURGERY. ALTERATIONS OF MUSCLE STRENGTH AND POSTOPERATIVE RESPIRATORY MORBIDITY

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Introduction: Muscle relaxants have several aims in Anesthesia like making intubation easier or adapting patients to mechanical ventilation. Non-complete recoveries of neuromuscular functions are associated to post-operative morbidities.

Objectives: To identify the incidence of residual neuromuscular block (rNMB) and postoperative alterations.

Methods: A prospective study was carried out, in which each patient was its own control. 47 patients undergoing surgery in "Ambulatory Major Surgery Area" at our hospital were included. The primary endpoint was the presence of rNMB after patient extubation, defined as train-of-four-ratio < 0,9 using acceleromyography. Muscle strength was measured with "Collin dynamometer"®. Following variables were considered: body weight, surgery, relaxant doses, O2 saturation before/after surgery, previous strength, block reversion, strength at Post Anesthetic Care Unit (PACU) arriving, O2 saturation 30 minutes after PACU arriving, and high-flow oxygen therapy needed. Fisher Test was performed for categorical variables and Student-t Test/Mann-Whitney U Test were used for continuous variables.

Results: The incidence of rNMB in our sample was 51.1%. Patients with rNMB after extubation showed an strength decrease when they arrived to PACU (4,54N vs. 20,38N; p < 0.001). These patients needed more high flow therapy to have an appropriate O2 saturation (30,23% vs. 18.60%, p > 0.05). Moreover, differences neither in muscular strength or O2 saturation 30 minutes after PACU arriving were reported (p > 0.05).

Conclusions: rNMB is common at our hospital. Patients with rNMB had low muscular strength; they needed an O2 supplement to have an adequate O2 saturation. Neuromuscular function monitoring is essential to identify these cases and to have an appropriate use of neuromuscular blockers.

Descriptors: Neuromuscular blockade; TOF ratio; Acceleromyography; Surgery.

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