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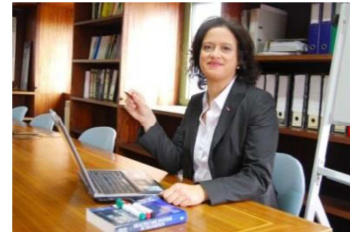
19 - 21 **NOVEMBER** ²⁰¹⁵

PS3: AGEING AND SUSTAINABILITY

Common Problems, Diverse Solutions: Models of Organization of LTC Across Europe

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Long-term care (LTC) is commonly understood as encompassing the range of services and assistance for people who, as a result of mental and/or physical frailty and/or disability over an extended period of time, depend on help with daily living activities and/or are in need of some permanent nursing care. Despite, or even because of the challenges of the ageing of the population and the need to restore an environment conducive to restoring growth and jobs, it is important not to lose sight of the fact that there is a need to ensure that people's needs are covered adequately – indeed that the “rights” and the expectations that the European social model implies are satisfied. The last decades, all across Europe, and more so over the last 5 years, have been dominated by the need to reconcile issues of rights, dignity, quality of life and autonomy with the need for fiscal austerity and public expenditure decrease. Different countries across Europe have been following different paths in pursue of this common goal. In this communication we will go through some of those paths and present key elements of each fundamental model of long-term care organization that can be found across EU countries. The purpose is to offer some critical insights that can inform the public debate about the sustainability of long-term care in Portugal.



Active Ageing

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P49: Characterization, Therapeutics and Control of Arterial Hypertension in patients of Pharmacies from Vila Nova de Famalicão

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Introduction: Arterial Hypertension (AHT) is one of the most concerning health issues worldwide, due to its importance as a risk factor for cardiovascular diseases (CVD).

Objectives: Determine the proportion of AHT, characterize the disease, therapeutics and related factors on users of 2 Pharmacies of Vila Nova de Famalicão city.

Materials and Methods: It was performed a descriptive and correlational cross-sectional study included 352 users of 2 Pharmacies from Vila Nova de Famalicão. The data was collected using a questionnaire and an automatic blood pressure (BP) measuring device.

Results and Discussion: The proportion of self-reported HTA was 34.4%, mostly in older age groups (66.7% and 82.4% for users with 62-72 and 84-95 years, respectively). Moreover, an important amount of hypertensive users didn't have their BP values controlled, with values of 38% and 49% for high diastolic and high systolic BP, respectively. Concerning the pharmacological treatment, 24.8% of the hypertensive users do not take medication, most of them due to the lack of symptoms (44.2%). Diuretics were the medicines more used in AHT therapeutics (19.9%) followed by Angiotensin-Converting-Enzyme (ACE) inhibitors (14.9%), which is according to the Portuguese treatment guidelines. Some risk factors identified as associated with AHT were the age ($p<0.001$), Body Mass Index (BMI) ($p=0.001$), CVD factor history [stroke ($p<0.001$), heart attack ($p=0.001$), dyslipidemia ($p<0.001$), diabetes ($p=0.001$)] and family history of AHT ($p<0.001$). All of them are reported in the literature as related factors with AHT and globally as CVD.

Conclusion: The AHT was more prevalent in older age groups, with high BMI and individual CVD history, being diuretics and ACE inhibitors the most used therapy.

References

1. Direção Geral de Saúde (2013). Norma nº 020/2011 - Hipertensão Arterial: definição e classificação.
2. Mancia, G. et al (2013) ESH/ESC Guidelines for the management of arterial Hypertension. *Journal of Hypertension*, 31, 1281-357.