



## PARALLEL SESSIONS: ORAL COMMUNICATIONS

### 3<sup>rd</sup> World Congress of Health Research

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## 1. ADULT HEALTH

### CHARACTERIZATION OF PATIENTS UNDERGOING NONINVASIVE VENTILATION ADMITTED IN UNIT INTERMEDIATE CARE

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**Introduction:** Non-invasive ventilation (NIV) is the application of a ventilatory support without resorting to invasive methods. Today it's considered a credible therapeutic option, with enough scientific evidence to support its application in various situations and clinical settings related to the treatment of acute respiratory disease, as well as chronic respiratory disease.

**Objectives:** Characterize patients undergoing NIV admitted in Unit Intermediate Care (ICU) in the period from October 1<sup>st</sup> 2015 to June 30<sup>th</sup> 2016.

**Methods:** Prospective study conducted in ICU between October 2015 and June 2016. In this study were included all patients hospitalized in this unit (ICU) and in that time period a sample of 57 participants was obtained. As data collection instruments we used a questionnaire for sociodemographic and clinical data and the Braden scale.

**Results:** Participants were mostly male 38 (66.7%), the average age 69.5 ± 11.3 years, ranging between 43 and 92 years. They weighed on average 76.6 kg (52 and 150), with an average body mass index of 28.5 kg/m<sup>2</sup> (20 to 58.5). With skin intact 28 (49.1%) with abnormal perfusion 12 (21.1%), with altered sensitivity 11 (19.3%) and a high risk of ulcer on the scale of Braden 37 (65%). The admission diagnosis was respiratory failure 33 (57.3%) and had different backgrounds. We used reused mask 53 (93.0%), the average time of NIV was 7.1 days (1-28), 4.8 days of hospitalization (1-18) and an average of 7.8 IPAP pressure. 11 (19.3%) of the participants developed face ulcer pressure.

**Conclusions:** The NIV is used in patients with advanced age, obesity, respiratory failure and high risk of face ulcer development.

**Keywords:** Patients. Noninvasive ventilation.

### TELEPHONE SUPPORT LINE OF RHEUMATOLOGY DEPARTMENT: A 4.5 YEARS EXPERIENCE

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**Introduction:** In many health services in developed countries, the telephone support has been used as an innovative approach to providing care and answering questions by nurses, developing especially in specific areas such as rheumatology (Brown et al., 2006).

**Objectives:** To analyze the profile of users and the main reasons of patients that uses the Telephone Support Line of Day Hospital and early arthritis consultation of the CHUC Rheumatology Department, EPE.

**Methods:** This is a retrospective descriptive-correlational study with a convenience sample of 448 calls. For continuous variables we used the t-student test, for dichotomous variables the  $\chi^2$  test and, finally, we performed a cluster analysis by the TwoStep Cluster method through the log-likelihood distance.

**Results:** Users have an average age of 44.8 years being predominantly male (58%). The cluster analysis allowed to create three groups whose profile shows that the cluster 1 (n = 96/21.4%) are formed by "older" adults that need to clarify mainly doubts about the results of auxiliary examinations tests (AET)/prescriptions and side effects/complications; the cluster 2 (n = 232/51.8%) are formed by young adults that call to change appointments and mainly to clarify doubts on the results of AET/prescriptions; finally, the cluster 3 (n = 120/26.8%) are formed by "middle age" adults that want to clarify doubts about medication and disease management.

**Conclusions:** Incoming calls cover a wide range of ages and all kinds of rheumatic diseases. This study allows us to identify in which groups it is necessary to make a more detailed educational

**Objectives:** To verify if sociodemographic variables (gender, age, grade, place of residence and cohabitation) influence the hostile behavior in children and adolescents; ascertain whether the family variables (marital status, occupation, education level, monthly income) interfere with hostile behavior in students.

**Methods:** Quantitative, cross-sectional, descriptive and analytical study involving a sample of 999 students of the 2<sup>nd</sup> and 3<sup>rd</sup> cycles of basic education, with an average age of 12.15 years (SD = ± 1:46 years). Data collection includes the questionnaire of demographic data and family context, Hostility Inventory Buss-Durkee.

**Results:** Sociodemographic variables, sex, age, area of residence and cohabitation interfered in hostile behavior in children and adolescents, have been girls, older students, residents in urban areas, who live together with parents of that shape higher levels of hostile behaviors as a whole. The marital status of the parents, their secularity and family income also interfered in the hostile behavior of the sample under study, verifying that children and adolescents whose parents have no partner (a) and have an average high/high household income reveal higher levels of hostile behaviors, particularly with regard to resentment, verbal hostility, fear, negativity and global hostility.

**Conclusions:** We hope that this study is a contribution to the prevention of hostile behavior in students, reducing the potential risks of this problem.

**Keywords:** Prevention. Hostile behaviors. Students.

## QUALITY OF STUDENTS' LIFE

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**Introduction:** Quality of Student's Life, can be understood as the perception of satisfaction and happiness, by the student, for multiple domains of life, psychosocial and contextual factors relevant structures and personal meanings. With this study, we intend to meet the Quality of Life of first-year students of Nursing degree, in center of Portugal.

**Objectives:** Evaluate the influence of personality traits on quality of life of first-year students of Nursing Degree and assess the influence of social support on quality of students' life of first year in Nursing Degree.

**Methods:** Descriptive, correlation cross-sectional, quantitative, non-experimental study. The sample consists of 69 students and they are 50 female and 19 male. Data collection was performed using a questionnaire survey with scales: Eysenck Personality Inventory Scale, Satisfaction with Social Support/Family and WHOQOL-brief.

**Results and conclusions:** In the overall sample, we observed that there is a good quality of life for the majority of respondents (69.6%) and 24.6% of respondents have the perception of regular quality of life. Verified, so that the personality traits (neuroticism and extroversion) significantly influence the quality of life of respondents at psychological level, and neuroticism exerts a negative influence and levels of extroversion exercise significant influence. Neuroticism also has a significant and negative influence on the physical, social and environmental dimensions of quality of life. The existence of intimate social support influences the quality of life on a physical level as well as at the social level, here the pair of satisfaction with family.

**Keywords:** Quality of life. Personality. Social support.

## USE OF ANTIDEPRESSANTS IN PORTO, BRAGA AND BRAGANÇA REGIONS

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**Introduction:** Depression is one of the most common mental disorders with a prevalence in the general population of 7.4%. With regard to the treatment of this disease the therapies includes the psychotherapy, changes in lifestyle and the pharmacologic therapy. **Objectives:** The present study aimed to characterize the use of antidepressants in three regions of Portugal: Porto, Braga and Bragança.

**Methods:** A cross-sectional, descriptive and correlational study was performed through application of a questionnaire to 385 individuals of the three regions (39% males and 61% females).

**Results:** The prevalence of use of antidepressants in North Portugal was 15.1% and the female the main consumers (77.6%). Porto was the region with the largest consumption of antidepressants (56.9%) while in Bragança occurred the lowest consumption (19%). The main consumers were individuals aged 38 to 47 years, followed by individuals aged over 47 years. The main reasons identified to use these drugs were depression (42.4%) following by anxiety (34.8%). Furthermore, it was found that the use of antidepressant drugs is also associated with age, sex and civil status, with p values of 0.02, 0.01, 0.02, respectively. The most commonly used antidepressants were the sertraline (18.3%), escitalopram and fluoxetine (15.3% for both). Importantly, the number of adverse reactions is alarming since that more than half of the consumers was affected by these effects (54.7%).

**Conclusions:** The study highlights that the consumption of depressants occurs mainly in coastal regions, by female and is related to adverse effects.

**Keywords:** Antidepressants. Adverse effects.

## 18. OCCUPATIONAL HEALTH

### CAREERS IN HEALTH SECTOR: ANEMPLOYMENT EFFECTS IN HEALTH PROFESSIONALS

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**Introduction:** Careers in the health sector have been losing their linearity and new types of work relations - precarious, atypical or flexible - and careers are emerging. Anemployment is a recent construct defined has the experience of work, throughout one's career, alternating precarious work and unemployment.

**Objectives:** In this paper, which is part of a larger study, we intend to explore the effects of anemployment in health professionals lives.

**Methods:** Five health professionals (2 nurses, 2 psychologists and 1 occupational therapist) participated in semi-structured interviews