

Universidade de São Paulo  
Faculdade de Saúde Pública

# RSP Revista de Saúde Pública

Volume 48  
Special Number  
May 2014



IPLeia International Health Congress

09<sup>and</sup> 10, MAY 2014

CHALLENGES & INNOVATION  
IN HEALTH

**Abstracts**

[www.rsp.fsp.usp.br](http://www.rsp.fsp.usp.br)

ISSN 0034-8910  
ISSN online 1518-8787

# RSP

# Revista de Saúde Pública

**Honorary Editor**

Oswaldo Paulo Forattini  
*In memoriam*

**Editorial board**

Carlos Augusto Monteiro (President) – Universidade de São Paulo – Brasil  
Rita de Cássia Barradas Barata – Santa Casa de São Paulo – Brasil  
Aluísio Jardim Dornellas de Barros – Universidade Federal de Pelotas – Brasil

**Associated Editors**

Ana Bernarda Ludermir – Universidade Federal de Pernambuco – Brasil  
Chester Luiz Galvão Cesar – Universidade de São Paulo – Brasil  
Daniela Riva Knauth – Universidade Federal do Rio Grande do Sul – Brasil  
Euclides Ayres de Castilho – Universidade de São Paulo – Brasil  
Everardo Duarte Nunes – Universidade Estadual de Campinas – Brasil  
Frida Marina Fischer – Universidade de São Paulo – Brasil  
Ivan França Júnior – Universidade de São Paulo – Brasil  
João Luiz Bastos – Universidade Federal de Santa Catarina – Brasil  
José Maria Pacheco de Souza – Universidade de São Paulo – Brasil  
Marly Augusto Cardoso – Universidade de São Paulo – Brasil  
Rosely Sichieri – Universidade do Estado do Rio de Janeiro – Brasil  
Oswaldo Yoshimi Tanaka – Universidade de São Paulo – Brasil  
Wilma Sousa Santana – Universidade Federal da Bahia – Brasil  
Volney de Magalhães Câmara – Universidade Federal do Rio de Janeiro – Brasil

**Editor of Comments**

Eliseu Alves Waldman – Universidade de São Paulo – Brasil

**Editor of Reviews**

José Leopoldo Ferreira Antunes – Universidade de São Paulo – Brasil

**Executive Editor**

Maria Teresinha Dias de Andrade – Universidade de São Paulo – Brasil

**Editorial Advisory Board**

A. Diez-Roux – University of Michigan – USA  
C. Borrell – Agência de Salut Pública – Espanha  
L. Rodrigues – London School of Hygiene and Tropical Medicine – UK  
M. P. Curado – International Agency for Research on Cancer – France  
A. Reingold – University of California at Berkeley – USA  
C. Victora – Universidade Federal de Pelotas – Brasil  
N. Almeida Filho – Universidade Federal da Bahia – Brasil  
M. F. Lima Costa – Fundação Oswaldo Cruz – Brasil  
M. I. Schmidt – Universidade Federal do Rio Grande do Sul – Brasil

Created in 1967, *Revista de Saúde Pública (Journal of Public Health)* is a publication of the *Faculdade de Saúde Pública* of *Universidade de São Paulo*. An inter- and multidisciplinary journal open to peer-reviewed research contributions from both national and international scientific communities. Its mission is to publish and divulge scientific production on subjects of relevance to Public Health.

Published bimonthly, in February, April, June, August, October and December.

#### INDEXES

All articles are also published in English language.

The on-line abstracting and indexing services that cover the Journal are:

Thomson Scientific (ISI); Web of Science, Current Contents/Social Behavioral Science, Social Science Citation Index; MEDLINE; Biosis; Global Health; EMBASE; HEALSAFE; Health Star; PubMed; POPLINE; Wildlife Worldwide (NISC); Scopus; SciELO; LILACS; PERIODICA.

#### FULL TEXTS

Full texts of the complete collection of the articles, from volume 1, number 1 (1967), are available for free in PDF format through the Journal's web site:

<http://www.rsp.fsp.usp.br>

<i>Contact</i>	<b>Revista de Saúde Pública</b>	Fax/Phone: (55 11) 3061-7985 / 3061-7135
	Faculdade de Saúde Pública da Universidade de São Paulo Av. Doutor Arnaldo, 715 01246-904 - São Paulo, SP - Brasil	E-mail: <a href="mailto:revsp@usp.br">revsp@usp.br</a> <b>Web site</b> <a href="http://www.rsp.fsp.usp.br">http://www.rsp.fsp.usp.br</a> <a href="http://www.scielo.br/rsp">http://www.scielo.br/rsp</a>
<i>Administrative support</i>	Biblioteca/CIR: Centro de Informação e Referência em Saúde Pública da FSP/USP	
<i>Reviewer</i>	Odinéia C. Gregio	
<i>Secretary</i>	Maria do Carmo Silva de Oliveira	
<i>Editorial and DTP</i>	<b>CABOVERDE</b> <a href="http://www.caboverde.com.br">www.caboverde.com.br</a>	

© Copyright – Faculdade de Saúde Pública da Universidade de São Paulo.  
All rights reserved.

# RSP

# Revista de Saúde Pública

**Volume 48**  
**Special number**  
**May 2014**



IPLeiria International Health Congress

09<sup>and</sup> 10, MAY 2014

CHALLENGES & INNOVATION  
IN HEALTH

## Abstracts

Congress Organization:



Financial Support:

**FCT** Fundação para a Ciência e a Tecnologia  
MINISTÉRIO DA EDUCAÇÃO E CIÊNCIA

299

**CARDIOVASCULAR RISK FACTORS FOUND IN STROKE PATIENTS**André Novo<sup>a</sup>, Leonel Preto<sup>b</sup>, Eugénia Mendes<sup>c</sup>, Helena Pimentel<sup>d</sup>*Escola Superior de Saúde. Instituto Politécnico de Bragança. Bragança, Portugal*

**Introduction:** Stroke is the second worldwide most common cause of death and major cause of disability. Over the last decades modifiable and non-modifiable risk factors have been identified with more accuracy. Early identification and treatment of modifiable risk factors can reduce the risk of stroke. In stroke patients, the identification of these variables is also important to preventing another stroke.

**Objective:** To assess the prevalence of cardiovascular risk factors in stroke patients.

**Methods:** The data were collected through electronic health records of all patients with stroke admitted to an emergency department during three years (2010, 2011 and 2012). Research protocol has been approved by an ethics committee.

**Results:** Were analyzed the electronic health records of 346 patients with ischemic stroke (78.6±9.9 years) and 96 with intracerebral hemorrhage (76.5±11.9 years). In ischemic stroke the most common risk factors were hypertension (68.2%), diabetes mellitus (27.5%), hypercholesterolemia (25.0%), atrial fibrillation (24.3%) and smoking (5.5%). We also found that 12.7% of the patients were obese. In hemorrhagic stroke the most prevalent risk factors were hypertension (53.1%), dyslipidemia (25.7%), atrial fibrillation (24.3%), obesity (18%) and smoking (7.3%).

**Conclusions:** Hypertension was more prevalent in ischemic stroke and is associated with type of stroke ( $\chi^2=7.508$ ,  $df=1$ ,  $p=0.005$ ). Atrial fibrillation also prevailed in thromboembolic events with statistical significance ( $p=0.043$ ). Only 16% of patients with ischemic stroke did not have any cardiovascular risk factor.

**Descriptors:** Prevalence; risk factors; ischemic stroke; hemorrhagic stroke.

<sup>a</sup> andre@ipb.pt<sup>b</sup> leonelpreto@ipb.pt<sup>c</sup> maria.mendes@ipb.pt<sup>d</sup> hpimentel@ipb.pt

300

**BILATERAL COCHLEAR IMPLANTATION IN A PATIENT WITH BILATERAL TEMPORAL BONE FRACTURE**Daniela Ramos<sup>l</sup>, Carlos Ribeiro<sup>l</sup>, Xavier Jorge<sup>ll</sup><sup>l</sup>*Centro Cirúrgico de Coimbra. Coimbra, Portugal*<sup>ll</sup>*Faculdade de Medicina de Coimbra. Coimbra, Portugal*

**Introduction:** Bilateral severe to profound sensorineural hearing loss resulting from traumatic brain injury can be treated effectively by placing cochlear implant bilateral (JH Chung et al, 2011; Vermeire K et al, 2012; Gediz MS et al 2010). In such circumstances, there are benefits of bilateral cochlear implantation compared to unilateral cochlear implantation, as documented in the literature (Nopp P et al, 2004; Litovsky R et al, 2006).

**Methods:** Case report of a female patient, 32 years old, victim of trampling in public way by a high velocity motorized vehicle, suffered traumatic brain injury, bilateral transverse temporal bone fracture and consequent profound bilateral sensorineural deafness. Underwent simultaneous bilateral cochlear implantation, in 6 months thereafter. Started hearing rehabilitation program in speech therapy once a week, a month after the activation of the speech processor. In audiological and speech therapy evaluation, at 4 weeks of hearing rehabilitation, the patient showed an audiometric and speech perception/discrimination performance in tasks speakerphone and the phone, very favorable.

**Conclusions:** It was a clinical case of bilateral deafness, post traumatic brain injury successfully treated using bilateral cochlear implantation.

**Descriptors:** Traumatic brain injury; bilateral cochlear implant; hearing rehabilitation.

<sup>a</sup> tfdanielaramos@hotmail.com<sup>b</sup> carlosarribeiro@gmail.com<sup>c</sup> cambombo@hotmail.com