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1. CHILD AND ADOLESCENT HEALTH

FACTORS AFFECTING THE BMI IN ADOLESCENTS ATTENDING THE 2ND AND 3RD CYCLES IN PORTUGUESE SCHOOLS FROM VISEU

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Introduction: Many studies show that the prevalence of overweight and obesity among children is rapidly increasing and developing into a major public health problem worldwide.

Objectives: To assess the Body Mass Index (BMI) in school children from 2nd and 3rd cycles in Viseu schools and identify the sociodemographic, behavioural and educational factors that are related to the BMI.

Methods: This is a quantitative descriptive and explanatory study with a convenience sample of 742 students attending schools of the 2nd and 3rd cycles in Viseu. The study was carried out by means of a questionnaire, which was produced for this study and previously submitted to the approval of the competent authority (DGE) for application in school context.

Results: It was found that some sociodemographic factors were associated with BMI, namely age, school year, practicing high competition sport, being federate in a sport or vegetarian diet. Regarding the educational factors associated with BMI these included only the seminars given at school by specialist in nutrition. Furthermore, a significant relation between BMI and SF was found, where SF represents the school sources of knowledge. Finally among the behavioural factors associated to BMI stood: learning in classes, playing in the open air, reading books and use of internet.

Conclusions: The results reinforce the need of adolescents to practice a healthy lifestyle and the role of family and school in providing the right information to help making right food choices.

Finally in the sample at study the incidence of overweight and obesity was not at all preoccupying, thus indicating that the efforts to provide a good education both at home and at school are adequate and must be carried on.

Keywords: Body mass index. School children. Food education.

QUALITY OF LIFE OF CHILDREN AND YOUNG PEOPLE WITH DIABETES MELLITUS TYPE I

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Introduction: Diabetes Mellitus type I (DMT1) has become apparent in children/young people, a current and worrisome problem due to increasing incidence and prevalence. In addition to its consequences, it interferes with the quality of life (QOL), representing a public health issue.

Objectives: Characterize the QOL of children/young people with DMT1; identify factors influencing children/young people with DMT1 QOL; check DMT1 impact in the QOL of children/young people.

Methods: Systematic review of full text studies, published from January 2006 to June 2014 that included the QOL of children/young people with DMT1, children/young people with DMT1 with no other pathology and their parents, consulting CINAHL, MEDLINE, MediciLatina, Academic Search Complete, Psychology and Behavioral Sciences Collection and Scholar Google, using “quality of life”, “child”, “diabetes”. Studies of children/young people with DMT1 and other chronic illness were excluded. 546 articles have been identified, 11 selected and seven used.

Results: Parents perceive less QOL and greater impact in the life of children/young people than them. Children/young people QOL improve with the insulin pump and severe hypoglycemic crisis and ketoacidosis decrease. Gender and age group influence children/young people QOL. Severe hypoglycemic crisis are related to the parents' fear of hypoglycemia, affecting their and their children's QOL. Young people using complementary and alternative Medicine have better QOL than those using stress relief activities. Children with DMT1 have impaired school performance.

Aim: To evaluate older patients' knowledge about their medication in order to provide data to improve pharmacist's intervention on home care visits of isolated elderly.

Methodology: Patients with 65 or more years old, living alone and integrating a social support network of the Coimbra City Council concerning the provision of meals on weekends were invited to participate in this study. A questionnaire composed by 10 questions, including specific questions to assess patient's knowledge about his medication, was applied to each senior at their home after assigning the informed consent.

Results: From a total of 28 seniors visited, 25 agreed to participate. When interrogated specifically about two medicines, 46% knew the therapeutic indication for both drugs and 27% knew the indication for only one of the drugs. When asked about 'how' and 'when' to take the medicines, only one participant distinguished the two terms; nevertheless, 82% knew when to take their drugs. Virtually all seniors were unaware to identify the possible adverse effects of the two drugs, 36% would appeal to their physician if adverse effects occurred and 9% would stop the medication. If a dose was forgotten, 27% of the participants would wait for the next dose.

Conclusions: Older people's knowledge about their medication is reduced, being useful to create strategies of pharmaceutical care to support the elderly living isolated in their homes in the management of their medication.

Keywords: Elderly. Home care visits. Medication's knowledge. Pharmaceutical care.

EVALUATION OF DRUG STORAGE CONDITIONS TO IMPROVE PHARMACEUTICAL CARE ON HOME VISITS OF ISOLATED ELDERLY

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Introduction: Multiple chronic diseases in the elderly leads to several types of medication. Older people are more prone to make mistakes and susceptible to problems related with medication. It is crucial to assure the quality of the use of medicines by this population.

Aim: To evaluate how the process of drug storage is achieved by elderly people in their homes in order to provide data to improve pharmacist's intervention on home care visits of isolated elderly.

Methodology: Patients with 65 or more years old, living alone and integrating a social support network of the Coimbra City Council concerning the provision of meals on weekends were invited to participate in this study. A questionnaire composed by 10 questions, with specific questions to assess patient's storage of medicines, was applied to each senior at his home after assigning the informed consent.

Results: From a total of 28 seniors visited, 25 agreed to participate. Different active substances stored per home varied between 2 and 41 (mean 14). An average of 9 medicines/home not being used at the moment of the interview was found, with 64% mentioning they intended to use it in the future. 62% stored their medicines in the kitchen. Medication stored was exposed to moisture (43%), heat (46%) and light (11%). 24% of the units found had no information leaflet, 12% had no outer packaging and 15% had already expired. At the end of the therapeutic, the participants referred they keep the medicines at home (40%), give them back to the pharmacy (40%) or threw them into regular trash (36%).

Conclusions: There is a need of education of the elderly concerning use, storage, management and disposal of medication. Pharmaceutical care can be useful in promoting strategies regarding rationalization of medicines home stocks.

Keywords: Elderly. Home care visits. Medication storage. Pharmaceutical care.

EFFECTS OF AN ACTIVE AGING PROGRAM ON OLD PEOPLE'S FEELINGS

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Introduction: Portugal is actually an aged country where two distinct scenarios can be distinguished. The coast, and the interior one. The regions with higher proportions of old people are the interior ones, less dense and populated where the lower proportion of people in active age is associated with lack of employment and educational opportunities leading the younger generations to leave these regions (EUROSTAT, 2014).

Objectives: To evaluate the effect of an active aging program with a group of elderly.

Method: Quasi-experimental study with a questionnaire including Mini Mental Test, and the scales of Subjective Happiness and Life Satisfaction to 9 elderly community residents and 11 living at a nursing home in the city of Bragança to whom an active aging program was implemented along four months.

Results: The community older adults had a mean age of 79.45 ± 7.93 years, all female, while the residents at the nursing home had a mean age of 83.72 ± 5.06 years, 5 men and 6 women. There were statistically significant differences between the means of scores before and after the interventions: Mini Mental Test (before: 25.7 ± 3.35 ; after: 26.75 ± 2.57 , $p = 0.038$) and subjective Happiness Scale (before: 12.05 ± 3.26 ; after: 17.95 ± 4.11 , $p < 0.001$). Although there has been an increase in the average of Satisfaction with Life scale scores after the intervention, the difference between averages did not reveal to be statistically significant (before: 17.45 ± 3.72 ; after: 19.00 ± 3.67 , $p = 0.128$).

Conclusions: Data allow us to conclude on the importance of the implementation of active aging programs among the elderly.

Keywords: Active aging. Happiness. Satisfaction with life.

NUTRITIONAL STATUS AND SOCIAL RESOURCES OF AN OLD POPULATION IN THE NORTHEAST OF TRÁS-OS-MONTES

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Introduction: Portugal shows a very pronounced aging population. It lost population in every quinquennial age group between 0-29 years. To ages over 70 years the growth was about 26%. The total of old people living in Alto Trás-os-Montes is of 56966 and in the region of Alfândega da Fé is of 1660 (INE, 2011).

Objectives: To assess nutritional status of people with 75 years or more in the municipality of Alfândega da Fé; To know social resources and to check if there are correlations between nutritional status of the elderly and clinical and characterization variables of the studied population. A proportional and probabilistic sample of 109 old people of a total of 487, mainly female (62.4%; 68) was gathered from the database of users registered at the Health Centre of Alfândega da Fé.

Materials and methods: A Correlational and cross-sectional study was designed. It was applied the Mini Nutritional Assessment (MNA) and also the Scale of Social Resources (OARS).

Results: From the total of 109 old people 28, 4% (31) are at risk of malnutrition and 71, 6% (78) present a normal nutritional status. From the total of subjects who participated in the study 40.4% (44) have adequate social resources, while more than a half 59.6% (65) have impaired social resources. We also concluded that social resources are independent from the nutritional status

($p = 0.786$). However, we have found, that the elderly who had been hospitalized had a higher risk of malnutrition ($p < 0.001$), with a significant relationship between the variables.

Conclusions: Results appeal to the attention on a more adequate nutrition in this group of age, as well as the implementation of the mechanisms for referral the elderly at risk of malnutrition and isolation to local healthcare units and social security.

Keywords: Social resources. Elderly nutritional status.

EVALUATION OF FUNCTIONAL (IN)DEPENDENCY IN INSTITUTIONALIZED ELDERLY

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Introduction: Evaluation of daily life activities is considered an appropriate and legitimate tool for evaluating the degree of functional (in)dependency in the elderly.

Objectives: To evaluate the degree of functional (in)dependence in the elderly living in a long-term institution in the North of Portugal.

Methods: Descriptive cross-sectional study conducted in a long-term residence in the North of Portugal. The sample was constituted by the totality of institutionalized elderly during the month of April 2013, a total of 67. The collection of biographical data was accomplished through the individual process of the elderly. Barthel scale was used to evaluate the degree of (in)dependence through direct observation of daily life activities.

Results: Of the total of 67 seniors, 74 were female, mean age was 83.5 years ($SD \pm 7.6$), varying between 52 and 97 years, 92.5% from countryside, 47.8% can read and write. The most prevalent chronic conditions were hypertension 58.2%, dementia 38.8% and diabetes 31.3%. The Barthel Index revealed 43.3% of the elderly with a degree of total dependence and 11.9% independent. The majority showed independence in feeding 79.1%, in the transfer from the chair to the bed 53.7% and 52.2% in ambulation. The largest proportion of dependence observed in the bath 89.6% in the dressing 47.8% and 50.7% arrange itself. Noted a large proportion of elderly with bladder and bowel incontinence 50.8%.

Conclusions: There was a low prevalence of seniors independent in all activities. The largest proportion of dependence occurred in the personal hygiene. It seems to us important that professionals sensitize seniors to the importance of self-care in health promotion and quality of life.

Keywords: Aged. Dependency. Motor activity.

PREVALENCE OF HYPERTENSION IN INSTITUTIONALIZED ELDERLY

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Introduction: The high prevalence of high blood pressure and its hard control lead the scientific community to consider this as a public health problem.

Objectives: To identify the prevalence of hypertension in elderly institutionalized in a home of senior citizens of the District of Bragança.

Methods: A descriptive cross-sectional study performed in a senior citizens home in the district of Bragança. The sample consisted of 67 elderly institutionalized during the month of March 2013. The information was obtained through the records of the individual process of the elderly during the period from 20 to 28 April. Blood Pressure (BP) was assessed to all seniors, by one of the researchers, with electronic vital signs monitor device, following the criteria of the General Directorate of Health.

Results: There was a predominance of the female gender 74%, from countryside 92.5%, and with education level read and write 47.8%. The hypertension prevalence was 58.2%, the average systolic BP was 132.6 mmHg, ranging between 90 and 175 mmHg and diastolic BP averaged was 71.6 mmHg ranging between 42 and 94 mmHg. The average heart rate was 74 beats/minute varying between 50 and 101 beats/minute. The Group of hypertensive patients registered higher prevalence in females 74.4%, with an average age of 84.4 years, 94.9% from countryside and 48.7% could read and write. Concomitantly had diabetes and dementia 35.9%, congestive heart failure 17.9% and stroke 12.8%.

Conclusions: We observed a high prevalence of hypertension which justifies the need for adopting preventive measures. The adoption of healthy lifestyles in this group is an essential component of therapy as well as prevention of hypertension.

Keywords: Aged. Hypertension. Health of the elderly.

MULTI-INDICATORS OF SUCCESSFUL AGING IN CENTENARIANS

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Introduction: The multidimensional model of successful aging (Young, Frick & Phelan., 2009) has been serving as a reference in empirical studies of successful aging over the last years (e.g., Pruchno et al., 2010) and a benchmark to assess the health and functioning of very old individuals (Philips Lifeline, 2014). By comprising bio, psycho and social domains, it constitutes a promising approach to the study of the centenarian population who tend to present several age-related losses.

Objectives: The study aims to validate a multidimensional model of successful aging in a sample of Portuguese centenarians.

Methods: 80 centenarians from the PT100 project (Oporto and Beira Interior Centenarians Studies) were face-to-face interviewed. Indicators of disease and physical impairment (physiological domain), emotional vitality and inner contentment (psychological), and engaging with life and spirituality (sociological) were collected.

Results: Structural equation modeling analysis to the hypothesized model suggests removing the social activities indicator (factor loading of 0.07). The alternative model fits well to the observed data, with $\chi^2(24) = 29.058$, $p = 0.218$, CFI = 0.949, GFI = 0.925, RMSEA = 0.052, $p = 0.048$.

Conclusions: The consideration of multi indicators of successful aging enables considering compensatory mechanisms and synergies between physical, psycho and social domains. A greater focus on psychosocial domains values the individual capacities' of adaptation, resilience, and coping, which have been tremendously advocated in the gerontological literature (Baltes & Baltes, 1990; Jeste, Depp, & Vahia, 2010).

Keywords: Successful aging. Centenarians. SEM.