



# Atención Primaria

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## PARALLEL SESSIONS: ORAL COMMUNICATIONS

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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

tions: It is impossible to provide quality care without knowing what is “normal/abnormal” and the perception of disease (experiences and experiences) of people cared for, their culture.

**Conclusions:** The ethnocentric points of view and inadequate training of health professionals appear as barriers to cross-cultural care, emerging with the desire to want to learn more and be able to recognize the other as a person in possession of untold wealth that is their culture.

**Keywords:** Transculturality. Cultural Competence. Nursing.

## ADDRESSING THE HEALTH NEEDS OF THE IMMIGRANTS LIVING IN THE COUNCIL OF SÃO BRÁS DE ALPORTEL

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The recent history of Portugal reveals major changes in the migration paradigm, making Portugal a multi-ethnic and multicultural country. The growth of international migration in modern societies has determined a progressive increase in cultural diversity. Therefore new challenges arised when assessing the needs and providing services to residents with different cultural backgrounds. To address the cultural diversity it is required adaptability and awareness from the health services, moreover in a context of economic crisis like the current one. In the current state of knowledge policies and strategies must be sensitive to cultural diversity and adapted to different contexts that come with the migratory phenomenon, in order to have an effective response to the health needs of the immigrants. The main goal of this study is to address the health needs of the immigrants living in the council of São Brás de Alportel. This is a quantitative descriptive and cross-sectional study with a snowball sampling of 89 immigrants living in the council of São Bras de Alportel. To perform the data collection it was used a questionnaire, whereas SPSS software (version 21) was used for data analysis. This study resulted in the identification of several health problems of immigrants, such as: 54% have problems in terms of accessibility to health care; 51% suffer from hypertension, diabetes or dyslipidaemia; 41% have a sedentary lifestyle and 33% are pre-obese. The results highlight the imperative need to change health policies and strategies, in order to reduce inequalities of accessibility to health care and to promote healthy lifestyles for immigrants.

**Keywords:** Immigrants. Diversity. Health needs. Accessibility.

## 12. HEALTH AND NUTRITION

### PERCEPTION OF HEALTH BENEFITS OF DIETARY FIBRE AMONG THE PORTUGUESE POPULATION

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**Introduction:** Dietary fiber (DF) has been part of human diet since ever, and its benefits for the human health have been well estab-

lished and scientifically confirmed. Among these stand improved gastrointestinal functions, prevent cholesterol, diabetes or CVD.

**Objectives:** To study the level of knowledge of people residing in Portugal about the health effects related to an adequate ingestion of DF.

**Methods:** This is a descriptive cross-sectional study carried out on a non-probabilistic sample of 382 adults residing in Portugal. The questionnaire included a section about the socio-demographic characteristics (age, gender, level of education and living environment) and another about the relation between dietary fiber and possible beneficial effects to treat and prevent diseases. The data was treated using the SPSS software (V22).

**Results:** The results allowed concluding that people were differently informed about the effects of DF in preventing and/or treating different diseases, being constipation the most recognized, followed in decreasing order by obesity, bowel cancer, cholesterol, cardiovascular diseases, diabetes and breast cancer. The results also showed that significant differences were encountered between age groups for most of the diseases evaluated, but not between genders, levels of education or living environments.

**Conclusions:** Generally, it was concluded that the participants in this study were relatively well informed about the roles of DF in preventing and/or treating various diseases.

**Keywords:** Fiber. Health. Diabetes. Cancer. Obesity. Constipation.

### MEASURING NUTRITION LITERACY ON A PORTUGUESE POPULATION

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**Introduction:** Nutrition plays a role in the prevention and treatment of chronic diseases. In order to promote healthy eating habits, and consequently reduce obesity and associated diseases, it is important that the population possesses an adequate knowledge on food and nutrition.

**Objectives:** To measure the nutrition knowledge of a Portuguese population, residing in the Lisbon area.

**Methods:** This is a descriptive and analytical study of 101 volunteers living in the Lisbon area, with ages ranging from 18 to 74 years old. The assessment of nutrition knowledge was achieved through the application of an adapted version of the Nutritional Knowledge Questionnaire. Statistical analysis was performed using the computer software PSPP, version 0.8.5. From the sum of the scores given for each variable, an average of correct answers was calculated and used as a basis for the creation of a categorized nutrition score.

**Results:** From the 101 volunteers inquired, 59 were female (58.4%) and 42 were male (41.6%). Most of the tested subjects were 18 to 24 years old (42.6%). The issues which revealed a lesser knowledge were those related to the topic fats. For example, only 27 (26.3%) of the subjects recognized dairy foods as containing saturated fats. Moreover, about 70% of the population knew the number of recommended daily fruit portions. Using the scale of literacy in nutrition (scores between 0 to 105), created for the Portuguese population, it was verified that 49.5% of the sample gave between 63 to 87 correct answers, showing a medium level of literacy in nutrition.

**Conclusions:** This study allowed not only to know the nutrition literacy of a Portuguese population but also to create a Portuguese nutrition literacy scale which can be applied to all the population after validation.

**Keywords:** Nutrition literacy. Scale. Food. Portugal.