PARALLEL SESSIONS: ORAL COMMUNICATIONS

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1. ADULT HEALTH

CHARACTERIZATION OF PATIENTS UNDERGOING NONINVASIVE VENTILATION ADMITTED IN UNIT INTERMEDIATE CARE
Matilde Martins, Patricia Ribas, Joana Sousa, Andreia Cunha, Norberto Silva, Teresa Correia
Health School of Polytechnic Institute of Bragança, Sports Sciences, Health Sciences and Human Development, Portugal; Clinic of Arrifana, Portugal; Health School of Polytechnic Institute of Bragança, Unit of the Northeast Local Health Bragança, Portugal.
Contact details: matildemartins@ipb.pt

Introduction: Non-invasive ventilation (NIV) is the application of a ventilatory support without resorting to invasive methods. Today it’s considered a credible tool in respiratory failure, and noninvasive methods have been seen as a highly effective method for the management of chronic respiratory disease, as well as providing support in the acute phase of respiratory failure.

Objectives: Characterize patients undergoing NIV admitted in Unit Intermediate Care (ICU) in the period from October 1st 2015 to June 30th 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 (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/m² (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
Eduardo Santos, Andréa Marques
Associate Research at the Portugal Centre for Evidence-Based Practice (PCEBP): a Collaborating Centre of the Joanna Briggs Institute - Health Sciences Research Unit: Nursing (UICISA: E), Nursing School of Coimbra (ESEnFC); Rheumatology department, Centro Hospitalar e Universitário de Coimbra, EPE.
Contact details: ejf.santos87@gmail.com

Introduction: In many health services in developed countries, the telephone support has been used as an innovative approach to provide care and answering questions by nurses, developing especially in specific areas such as rheumatology (Brown et al., 2006). The primary objective was 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 χ² 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
21. SAFETY AND QUALITY IN HEALTH

ATTITUDES, BARRIERS AND PRACTICES RELATED TO EVIDENCE-BASED NURSING: A DIAGNOSTIC ASSESSMENT IN THE PORTUGUESE CONTEXT

Rui Pereira, M. José Peixoto, Teresa Martins, M. Cécu Barbieri-Figueiredo, António Vaz-Carneiro

Universidade do Minho/Escola Superior de Enfermagem; Escola Superior de Enfermagem do Porto; Universidade de Lisboa, Faculdade de Medicina, Centro de Estudos para a Medicina Baseada na Evidência.

Objective: To draw an educational intervention to promote MHL about anxiety of adolescents.

Method: Conducting a focus group, for one hour, with 6 adolescents in 9th grade: 3 boys and 3 girls between 14 and 15 years, average age 14.3, who agreed to participate and whose parents provided informed consent. The focus group moderator was the investigator: a mental health nurse and there was a non-participant observer, a pediatric nurse. Audio recording was used. We used a vignette about an adolescent with anxiety and raised 12 questions about MHL on anxiety in adolescents and opinion on how to have more information.

Result: Adolescents in focus groups suggested conducting an educational intervention at school context about anxiety in adolescents using group dynamics, the issues and educational games. We draw an educational intervention with 4 sessions of 90 minutes, whose contents are in accordance with MHL concept. We used expository, interrogative, demonstrative and active methods and group dynamics, educational games and role-playing.

Conclusion: The focus group was very important because it allowed us to know the opinion of adolescents and follows a Delphi with experts. We hope this educational intervention will increase MHL about anxiety of adolescents at school context.

Keywords: Adolescents. Mental health. Health literacy. Intervention study. Focus group.

CARE QUALITY TO DEPENDENT PATIENTS OF A HEALTH CARE CENTER - CONTINUOUS QUALITY IMPROVEMENT CYCLE

Joana Silva, Patricia Sousa, Sofia Fraga, Tânia Costa

Unidade de Saúde Familiar Alves Martins.

Objective: To evaluate and ensure quality of care to registered and monitored dependent patients of a Health Care Center (HCC).

Method: Studied dimension: technical and scientific quality. Study Unit: registered and monitored dependent patients of a HCC in 2015. Type and source of data: clinical process. Evaluation: internal