A translação do conhecimento de enfermagem: Uma força para a mudança na prática clínica!

Translational nursing knowledge: A force for change in clinical practice!

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(Org.) Oliveira, Helga | Barros, Irina | Curado, Maria Alice | Fernandes, João | Gomes, José

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**RESEARCH INTO NURSING: KNOWLEDGE, ABILITIES AND ATTITUDES FOR EVIDENCE-BASED PRACTICE IN PRIMARY HEALTH CARE**

Luana Roberta Schneider; Rui Pedro Gomes Pereira; Lucimare Ferraz

In Primary Health Care (PHC), nurses develop promotion, prevention, recovering, and rehabilitation actions, as well as palliative care.1 In order to be able to develop their activities following scientific advances; they need to overcome obstacles to keep updated continuously.2 One of the main challenges is to train professionals who are competent to understand clinical studies and apply them according to the model of Evidence-Based Practice (EBP), 3 defined as an approach that associates the best scientific evidence with clinical experience and patient’s choice, developed with the purpose of decreasing mistakes and qualifying health work.4 When referring to PHC, particularly in the Brazilian nursing area, there is a scarcity of scientific research on EBP. This study aimed at discussing knowledge, abilities and attitudes of nurses in relation to research and EBP in PHC. Therefore, an investigation was carried out, having a qualitative and quantitative approach, with 44 nurses of PHC, in Chapecó, Santa Catarina, Brazil. Data was collected through questionnaire and focal group, between July and November, 2016. The questionnaire was culturally adapted to Portuguese Brazilian Language, called Questionnaire of Evidence-Based Practice and Clinical Effectiveness 5 and a Script of Secondary Questions, developed by researchers. In the focal group, there were six nurses and the script presented questions about perception of EBP, sources and obstacles to carry out scientific research. To analyze the quantitative data, the software Statistical Package for the Social Sciences (SPSS®) was used; there were also calculations of position and dispersion measurements. Qualitative information was analyzed by content analysis. The Research Ethics Committee approved the research under number 1.573.371. Results showed that nurses, in spite of recognizing the importance of research and EBP, do not have abilities to produce and make use of scientific studies. They did not feel completely able to handle information technology, accessing and interpreting the articles acutely. In their practices in PHC, clinical experience is the main sign of their actions, considering their high workload, work organization and their deficiency in academic training as the main barriers to produce and make use of scientific information. It is really necessary to reflect on the aspects that involve research and EBP, in a perspective of not blaming the nurses, but of (re) thinking the professional training process and the importance of research in graduation and in health services.

**References:**


FRAILTY SYNDROME IN ELDERLY ATTENDED IN AN OUTPATIENT SPECIALTY CLINIC

Luciane Patrícia Andreani Cabral; Clóris Regina Blanski Grden; Pollyanna Kássia de Oliveira Borges; Vanessa Regina de Andrade; Jacy Aurélia Vieira de Sousa; Carlos Eduardo Coradassi

The aging process contributes to the increase of chronic diseases and disabilities, highlighting the frailty that can be defined as a syndrome which shows many causes and is characterized by a decrease in strength, endurance and physiological function, collaborating to make the individual more vulnerable to dependence and/or death (MORLEY, et al., 2013). Studies on frailty have aroused interest in researchers in the area, health professionals and health managers, as it is a public health problem with significant repercussion on the high costs of assistance. Researchers point out that the frailty syndrome is more frequent in women (CURCIO; HENAO; GOMEZ, 2014; CHEN et al., 2015), which are more exposed to unfavorable physical, psychological and social conditions, stress factors that interfere in the state of general health and contribute to the increase of accumulated deficits throughout life. In view of the foregoing, this study aimed to evaluate the frailty syndrome in the elderly women attended in the ambulatory of a teaching hospital. This cross-sectional study was carried out with 252 elderly women who were waiting for appointment in an outpatient clinic between October 2015 and March 2016. It was applied the Edmonton Frailty Scale (ROLFSON et al., 2006) for data collection. These data were analyzed by Stata software version 12 and described by measures of frequency, mean and standard deviation (SD). The association between variables was verified through simple linear regression (Fisher tests and Student's t), significance level of p<0,05. The project received a favorable feedback from the Ethics Committee on Research in Human Beings, registry CAAE: 34905214.0.0000.0105. The results showed a predominance of married women (44.4%), low education (50%), minimum wage (68.6%), and residence with family members (51%). Regarding the frailty syndrome, 60 (23.8%) of the elderly women were considered non-fragile, 77 (30.6%) apparently vulnerable to frailty, 73 (29%) had a slight frailty, 33 (13.1%) presented moderate frailty and 9 (3.6%) presented severe frailty. There was a significant association between frailty and the variables age (p = 0.021), low level of education (p = 0.001), and residence with family members (p = 0.013). It was concluded that almost half of the sample had some kind of frailty, which shows the importance of the early