

**10th INTERNATIONAL SEMINAR
ON NURSING RESEARCH
PROCEEDINGS**

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MAIO 2016

10th International Seminar on Nursing Research Proceedings

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2016

ISBN: 978-989-97041-4-5

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A prevalência das onicomicoses nos doentes diabéticos: maximizar o conhecimento desta problemática

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INTRODUÇÃO: A problemática das onicomicoses tem sido alvo de estudo em particular nos doentes diabéticos. Há mais de duas décadas, estudos epidemiológicos, revelavam taxas de prevalência de 46% de diabéticos com alterações ungueais e 26% de onicomicose (1). Alguns ensaios clínicos demonstram que a educação do doente, por si só, não é eficaz para alcançar reduções clinicamente significativas na incidência de úlcera (2). As onicomicoses podem provocar um espessamento da lâmina ungueal e tornar-se uma dificuldade para o autocuidado, em particular nos idosos (3). O reconhecimento desta problemática não tem sido abordado com devida importância. Em Portugal, a população vê este fenómeno como um problema de estética (4) mas atualmente a onicomicose é um fator de predição na infeção, sendo responsável por 50% de todos os distúrbios ungueais. (5).

OBJETIVOS: Pretende-se identificar a prevalência desta afeção dos pés, nos doentes diabéticos e principais fatores associados.

MATERIAIS E MÉTODOS: Para esta revisão, foram efetuadas pesquisas durante janeiro e fevereiro de 2016, em Clinicalkey for Nursing, EBSCO e RCAAP. Foram conjugados os descritores MESH, definiu-se o limite temporal dos últimos cinco anos e todas as publicações sem distinção de género, idioma ou localização geográfica.

RESULTADOS/DISCUSSÃO: Da pesquisa efetuada destaca-se um estudo sobre doentes que frequentavam a consulta de Pé diabético, na Alemanha, com uma amostra de 280 doentes, dos quais 58,3% apresentaram onicomicose e destes 38.1% apresentaram infeção nas dez unhas dos pés (6). Um outro estudo observacional, avaliava os fatores de severidade da onicomicose nos doentes diabéticos tratados num Hospital de Tóquio, verificando-se uma prevalência de onicomicose de 51,3% associado à ausência de higiene diária dos pés (7). Em 2013, foi publicado o primeiro levantamento sobre dermatomicose nos membros inferiores em diabéticos portugueses. Este estudo prospetivo, com 163 doentes, revelou taxas de dermatomicoses (55,1%) em doentes com idade superior a 70 anos e onicomicose (75%) acima dos 60 anos (8). Já em 2014, foi publicado um estudo descritivo que pretendia identificar os microrganismos envolvidos nas infeções fúngicas do Pé diabético e verificou que em 82 doentes estudados, 64,1% não apresentavam a diabetes controlada e 65,9 % tinham atingimento ungueal da infeção fúngica (9).

CONCLUSÃO: Pelos estudos citados constata-se a relação entre onicomicoses e a presença de úlceras nos doentes diabéticos. Alguns destacam a importância da intervenção educacional dos enfermeiros para a prevenção de úlceras do pé diabético provocadas pela onicomicose. O conhecimento epidemiológico mais aprofundado desta realidade poderá contribuir para a sensibilização dos doentes e profissionais. Embora esta revisão apresente algumas limitações, evidenciou a necessidade de mais estudos sobre a prevalência de onicomicose em diabéticos.

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Palavras-chave: Prevalência; Feridas e lesões; Pé diabético; Onicomicose

Prevalence of onychomycosis in diabetic patients: maximizing the knowledge of this problem

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INTRODUCTION: The problem of feet nail dystrophies and onychomycosis has been the subject of study, particularly in diabetic patients. For over two decades, epidemiologic studies with numerous samples reveal prevalence rates of 46% of diabetics with ungual alterations and 26% of onychomycosis (1). Some clinical trials have shown that patient education, by itself, is not effective to achieve clinically significant reductions in the incidence of ulcers (2). The onychomycosis can cause a thickening of the nail plate and become a difficulty for self-care, particularly in the elderly (3). Some studies acknowledge that the problem of onychomycosis is still not addressed with due importance. In Portugal, the general population identifies this phenomenon as an aesthetic problem (4); however, onychomycosis is now recognized as a prediction factor for diabetic foot infection, accounting for 50% of all nail disorders. (5).

OBJECTIVES: It aims to identify the prevalence of foot disease in diabetic patients and main associated factors.

MATERIALS AND METHODS: For this review, surveys were conducted during January and February 2016, in ClinicalKey for Nursing, EBSCO and RCAAP. The MESH descriptors for research were combined and it was defined the time limit of the last five years and all publications without distinction of gender, language or geographic location.

RESULTS / DISCUSSION: This research carried out a study of patients attending the diabetic foot consultation in Germany, with a sample of 280 patients, of whom 58.3% had onychomycosis and of these 38.1% had infection in the ten toenails (6). another observational study, evaluating the severity of onychomycosis factors in diabetic patients treated in a Tokyo hospital, checking a prevalence of 51.3% onychomycosis associated with the absence of daily hygiene of the feet (7). In 2013, the first survey on dermatomycosis in the lower limbs in Portuguese diabetics was published. This prospective study, focused on 163 diabetic patients showed a higher dermatomycosis rates (55.1%) in patients aged over 70 years, and onychomycosis (75%) in patients over 60 years old (8). Already in 2014, a descriptive study which intended to identify the microorganisms involved in fungal infections of the diabetic foot found that in 82 of the examined patients, 64.1% had no controlled diabetes and 65.9% had nail achievement of fungal infection (9).

CONCLUSION: Throughout the studies cited it was identified the relationship between onychomycosis and the presence of ulcers in diabetic patients. Some studies highlight the importance of educational intervention of nurses in the prevention of diabetic foot ulcers caused by onychomycosis. Epidemiological studies allow better understanding of this reality, which may contribute to the awareness of patients and professionals. Although this review presents some limitations, it highlighted the need for more studies on the prevalence of onychomycosis in diabetic patients.

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Keywords: Prevalence; Wounds and injuries; Diabetic foot; Onychomycosis