

RSP Revista de Saúde Pública

Volume 48
Special Number
May 2014



IPLeiria International Health Congress

09 and 10, MAY 2014

CHALLENGES & INNOVATION
IN HEALTH

Abstracts

www.rsp.fsp.usp.br

228

RESISTANCE BACTERIAL PROFILE IN POSITIVE URINE CULTURES: NOSOCOMIAL INFECTION VS COMMUNITY ACQUIRED INFECTION

Renato Abreu^a, Ana Almeida Céu Leitão^b, Fernando Bellém^c, Ana Brandão^d, Ângela Lopes^e; Nadine Rodrigues^f

Escola Superior de Tecnologia da Saúde de Lisboa. Lisboa, Portugal

Introduction: Urinary tract infections are a serious public health problem, being considered as the second most common bacterial infection in humans, where most therapies are implemented empirically. This allows the development of bacterial resistance, in hospital or in the community.

Objective: We compared the profile of bacterial resistance between the two media studied, contributing to the choice of the best empirical treatment.

Methods: Data collection, characterized as descriptive observational, was made through the database of a Hospital Unit of the Central Lisbon Region. Between February 2012 and January 2013 were collected 3,837 data for urine cultures among which only 819 showed positivity. These data were statistically analyzed by SPSS version 13.0 for Windows with a significance level of 5%.

Results: urinary infections affect mainly females and *Escherichia coli*, among all isolates, was the leading cause, regardless of the source of infection. It was found that there are significant differences in the resistance patterns compared to some antibiotics for *E. coli* and *K. pneumoniae*.

Conclusions: The significant differences found suggest a higher resistance in isolates from inpatients which can mean improper use and overuse of antibiotics in hospitals. It was found through the sensitivities obtained, the Imipenem as the best empirical treatment in both local acquisition of infection, and Gentamicin for community acquired urinary tract infections.

Descriptors: Urinary tract infections; Nosocomial infection; Community-acquired infection; bacterial resistance; Empirical treatment.

^a renato.abreu@estesl.ipl.pt

^b ana.almeida@estesl.ipl.pt

^c mcleitao@estesl.ipl.pt

^d brandao_27@msn.com

^e fernando.bellem@estesl.ipl.pt

^f angelaavolopes@gmail.com

^g 2009277@alunos.estesl.ipl.pt

229

FALLS IN ELDERLY COMMUNITY RESIDENTS. AN UNDERDIAGNOSED PROBLEM

Bruno Ferreira^{1,a}, Armando Almeida^{1,b}, Tânia Costa^{1,c}, Rosa Silva^{1,d}, Patrícia Coelho^{1,e}, Paulo Alves^{1,f}, Catarina Pinto^{1,g}

¹Agrupamento de Centros de Saúde. Póvoa do Varzim/ Vila do Conde, Portugal

¹¹Institute of Health Sciences. Catholic University of Portugal. Porto, Portugal

Introduction: The main cause of injury in the elderly, in Portugal, is the occurrence of falls. Nevertheless, the phenomenon remains underdiagnosed and underappreciated by health professionals working in a community context.

Objective: Performing an accurate diagnosis about the fall risk, in very elderly community clients of a family health unit to improve decision making.

Methods: Cross-sectional study.

Results: Of the 45 individuals who agreed to participate in the study, 36 have fallen over the last year, totaling 82 falls, 8,3% with more than 4 falls and 42,8% between 2 and 4, occurred predominantly at home (71%). The Tinetti test revealed that 19.4%, 44.4% and 36.1% of the elderly had respectively, low, moderate and high risk of falling, contrasting with the fear of falling that took low expressivity. Inferential analysis revealed the existence of negative correlations among balance, number of falls at home and number of falls when performing vital activities. In 64.3% of falls was necessary help the elderly rise, resulting in 4 situations of bone fracture, one of which led to a situation of total dependence. Of the 27 environmental risk factors tracked in the house, were present on average 14. There is a positive correlation (Spearman Rho: 0.308, $p = 0.039$) between number of falls occurred in carrying out household activities and the number of environmental factors for fall risk at home.

Conclusions: The phenomenon is a real problem underdiagnosed, with serious repercussions, and is crucial improve its diagnosis to prescribe effective therapies.

Descriptors: Falls; Aged, 80 and over; Community.

^a brunoferreira.enf@gmail.com

^b aalmeida@porto.ucp.pt

^c tcosta@porto.ucp.pt

^d rcsilva@porto.ucp.pt

^e sfcoelho@porto.ucp.pt

^f pjalves@porto.ucp.pt

^g catarina_p_pinto@sapo.pt