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## NOTE PREVIEW ARTICLE

### FUNCTIONAL CAPACITY OF ADULT AND ELDERLY PATIENTS WITH VENOUS ULCERS

### CAPACIDADE FUNCIONAL DE PACIENTES ADULTOS E IDOSOS PORTADORES DE ÚLCERAS VENOSAS

### CAPACIDAD FUNCIONAL DE PACIENTES ADULTOS Y ANCIANOS CON ÚLCERAS VENOSAS

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#### ABSTRACT

**Objective:** evaluating the functional capacity of adult and elderly patients with venous ulcers in Petropolis-RJ. **Method:** observational, transversal study with a quantitative approach, participants will be adult and elderly patients with venous ulcers treated at two outpatient clinics of the city of Petropolis/RJ. Sampling shall be for convenience. For data collection will be used: I-UFF Protocol, LAWTON AIVDs Scale, the KATZ AVDs Scale and the Scale of Tinetti Index. The data will be analyzed using descriptive statistics. The research project was approved by the Research Ethics Committee, CAAE 33281614.8.0000.5245. **Expected results:** contribute to the production and the nursing care improvement in disease prevention of venous ulcers, aiming at the recovery and rehabilitation not only of the individual but the family involved in the care process. **Descriptors:** Venous Ulcer; Nursing Care; Wound Healing; Adult Health; Elderly Health.

#### RESUMO

**Objetivo:** avaliar a capacidade funcional de pacientes adultos e idosos portadores de úlceras venosas no município de Petrópolis-RJ. **Método:** estudo observacional, transversal com abordagem quantitativa, os participantes serão adultos e idosos com úlceras venosas atendidos em dois Ambulatórios do Município de Petrópolis/RJ. A amostragem será por conveniência. Para coleta de dados será utilizado: Protocolo I-UFF, a Escala de LAWTON AIVDs, a Escala KATZ AVDs e a Escala do Índice de Tinetti. Os dados serão analisados pela estatística descritiva. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa, CAAE 33281614.8.0000.5245. **Resultados esperados:** contribuir com a produção e o aprimoramento do cuidado de enfermagem na prevenção de agravos da úlcera venosa, objetivando a recuperação e a reabilitação não somente do sujeito, mas da família envolvida no processo de cuidar. **Descritores:** Úlcera Venosa; Cuidados de Enfermagem; Cicatrização de Feridas; Saúde do Adulto; Saúde do Idoso.

#### RESUMEN

**Objetivo:** evaluar la capacidad funcional de los pacientes adultos y los de edad avanzada con úlceras venosas en Petrópolis-RJ. **Método:** un estudio observacional, transversal, con abordaje cuantitativo, los participantes serán pacientes adultos y ancianos con úlceras venosas tratados en dos clínicas ambulatorias de la ciudad de Petrópolis/RJ. El muestreo será por conveniencia. Para la recolección de datos se utilizará: Protocolo I-UFF, la Escala de LAWTON AIVDs, la Escala KATZ AVDs y la Escala de Tinetti Index. Los datos se analizaron mediante estadística descriptiva. El proyecto de investigación fue aprobado por el Comité de Ética en la Investigación, CAAE 33281614.8.0000.5245. **Resultados esperados:** contribuir a la producción y la mejora de la atención de enfermería en la prevención de enfermedades de las úlceras venosas, con miras a la recuperación y rehabilitación no sólo del individuo, sino la familia participe en el proceso de atención. **Descriptores:** Úlcera Venosa; Cuidados de Enfermería; Cicatrización de las Heridas; Salud del Adulto; La Salud de las Personas Mayores.

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INTRODUCTION

The venous ulcers are approximately 80% to 90% of ulcers found in the lower limbs, and chronic venous insufficiency (CVI) is the primary cause of the rise and this is a health problem in the elderly.<sup>1</sup>

Chronic ulcers affect people worldwide, and the cost of treatment is considered high, requiring careful monitoring of patients at health institutions with multidisciplinary monitoring.<sup>2,3</sup>

Ulcers also hit both genders until the age of 40 years old and aged 65-74 predominantly affects women. Although chronic ulcers can affect young adults, it becomes more prevalent as the population ages.<sup>3,4</sup>

Public health recognizes that the global increase in the elderly population creates great challenges, since the current trend is to have an increase in chronic diseases during aging. This increase is directly related to greater disability and can compromise the independence and autonomy, as well as impair the quality of life of the patient.<sup>5,6</sup> In this context, we can see that the ratio of venous ulcers in the elderly population is worrisome because recent studies indicate that people over 60 years of age or older are more likely to develop venous ulcer. The next 20 years, the elderly population of Brazil may exceed 30 million people and will represent nearly 13% of the population at the end of this period.<sup>7,8</sup>

Old age alone favors the reduction of functional activities, and it is during the aging process that the decrease in functional capacity occurs, which ultimately compromises the performance of activities of daily living (ADLs) and instrumental activities of daily living (IADL).<sup>9</sup>

The quality of life of venous ulcer patients can suffer interference due to various complications that this type of lesion presents as physical, social, economic and emotional repercussions. In this sense we realize that there is the possibility of loss of functional capacity which is the ability of the individual to maintain competence, physical and mental skills to live independent and autonomous.<sup>7,9,10</sup>

It is essential that the patient be assisted by a multidisciplinary team, where professionals are able to observe the impact of its interventions through ongoing assessment, since the venous ulcers bring social implications, on sexuality, causing limitations and changes in quality life.<sup>11</sup>

This study is justified by the scarcity of articles that address the functional capacity

of adults and seniors living with venous ulcer, since the literature is guided in the lesion and treatments that encourage its healing, not considering the context of life in which the adult and the elderly are inserted, let alone the difficulties caused by the presence of chronic venous ulcers, so it is necessary to evaluate the functional capacity of patients with venous ulcers through its own instruments, thereby promoting an appropriation of scientific knowledge.

So on the above is intended to answer the following research question: “How functional capacity can influence self-care of adult patients and elderly people with venous ulcers?”

OBJECTIVES

- Evaluating the functional capacity of adult and elderly patients with venous ulcers in Petropolis-RJ;
- Describing the epidemiological profile of the adult and elderly patients with venous ulcers;
- Identifying the functional limitations in self-care of adults and elderly patients with venous ulcers patients.
- Analyzing the functional limitations of adult and elderly patients with venous ulcers.

METHOD

Observational study with transversal and quantitative approach to adult and elderly patients with venous ulcers treated at the Clinic School (and in the Family Health Units) of the Faculty of Medicine of Petropolis/Faculty Arthur de Sá Earp Neto - FMP/FASE and Outpatient Hospital Alcides Carneiro, both in the city of Petropolis-RJ.

The sampling process will be determined by convenience, requiring only that the participant meets the criteria for inclusion and exclusion of this research. The selection criteria will include criteria: patients with venous ulcers in one or both lower limbs for at least two months; adult patients aged from 40 years old; patients seen at the Outpatient of the School FMP/FASE and the Family Health Program units attached to it and Outpatient Hospital Alcides Carneiro. Exclusion criteria: patient with cognitive impairment; bedridden or wheelchair; patients who already have some previous functional impairment, such as: Stroke Brain Sequelae - stroke, amputation of limbs or fracture.

◆ Data collection

Data collection will be conducted by researcher with the aid of an academic nursing, Faculty Arthur Sá Earp Neto - FASE in

the months from March to June 2015, following the steps:

1<sup>st</sup>) at first the records will be consulted for survey of patients diagnosed with venous ulcers and that meet the criteria for research participation;

2<sup>nd</sup>) the patient identified with venous ulcer diagnosis, will be addressed in the corridor, where it awaits the completion of dressing, which will be invited to participate in the study after this first contact will be taken to an office where he will be guided on research and informed the about the Informed Consent (IC), after consenting to participate in the study should sign the consent form according to Resolution 466 of 2012 of the National Health Council.

3<sup>rd</sup>) after acceptance and signature of the term there will be applied the protocol I Adapted, and performed the procedures as tests of blood pressure, blood glucose Weight and Height.

4<sup>th</sup>) after the completion of Protocol I there will be held the implementation of the scales: LAWTON; KATZ and INDEX OF TINETTI.

◆ Data collection instruments

1. Protocol I Adapted - customer’s profile with venous ulcers (registered PROAP - UFF), it will be extracted through the characterization of data: demographic, socioeconomic, and clinical and health;

2. Scale of instrumental activities of daily living (IADL) - LAWTON. The IADL are the skills to manage the environment you live in and includes the following actions: preparing meals, performing housework, washing clothes, money handling, telephone use, intake of medications, make purchases and use of life carriage;

3. Scale of activities of daily living (ADL) - KATZ. The Katz index assesses independence in 06 activities: getting dressed, washing, using the toilet, mobilizing, being continent and feed.

4. Scale of Assessment of the Balance and Tinetti Gait - Index of Tinetti. The Tinetti Index is comprised of two scales. The first evaluates the balance through nine items, namely: balance sitting, standing, attempts to rise, thereby raising (first 5 seconds), the test three times (in which the evaluator slightly pushes the external of the patient, which should be feet together), eyes closed, turning 360° and sitting, while the second evaluates the progress being made following the seven items listed: start of the march, length and height of the steps, the steps symmetry, continuity of steps, direction, trunk and away the ankles.

◆ Treatment and analysis of data

The data collected will be transferred to a database created by the researcher, in a Microsoft Excel 2007 spreadsheet application in order to tabulate the data for analysis.

For data analysis descriptive statistics will be used. The data observed in the descriptive analysis will be presented in tables, expressed as mean, standard deviation, median, minimum and maximum for numeric data, and frequency (n) and percentage (%) for categorical data.

The inferential analysis will consist of the following methods:

- to comparing numerical data between two groups, the Mann-Whitney test will be used;
- for categorical data comparison (qualitative) between groups will be applied the x<sup>2</sup> test (chi-square) or Fisher’s exact test and
- to measuring the degree of association between numeric variables there will be used the Spearman correlation coefficient;

Nonparametric methods will be used if the variables presenting normal distribution (Gaussian), due to the discrete nature of the data and rejection of the Kolmogorov-Smirnov normality test. The significance determination criteria adopted will be the level of 5%.

The research project was approved by the Research Ethics Committee of the Faculty of Medicine of Petropolis, Faculty Arthur Sá Earp Neto and Hospital Alcides Carneiro (CEP/FMP/FASE/HAC), getting approval: number 730 322 and CAAE: 33281614.8.0000.5245.

EXPECTED RESULTS

It is expected, as a goal, that this study further, through strategies of nursing care, social and employment inclusion of adults and the elderly with a view to new technologies within ambulatory care, and provide contributions to the production and nursing care improvement in disease prevention of venous ulcers, through the construction or application of new technical interventions in nursing care and health to the recovery and rehabilitation not only of the individual but the family involved in the care process.

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