both in the initial and late phase of muscle contraction, with GOAJ presenting values, respectively, 49% and 36% lower than the CG.
Conclusion: Women with KOA have neuromuscular impairment in relation to women in the same age group without the disease.
Implications: The neuromuscular variables analyzed show that women with KOA have a lower ability to produce force and generate rapid nerve impulses in a short period, which may predispose these individuals to falls and contribute to the worsening of functional mobility in this population.
Keywords: Knee osteoarthritis, Muscle strength, Torque development rate

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: This work was carried out with the support of the Coordination for the Improvement of Higher Education Personnel (CAPES).
Ethics committee approval: Work approved by the Ethics Committee of Universidade Estadual Paulista, Campus de Marília, opinion number 1.503.496/2015.

https://doi.org/10.1016/j.bjpt.2024.100877

281

BIOMECHANICAL AND VISCOELASTIC PROPERTIES OF HAMSTRINGS WITH AND WITHOUT POSTURAL DEMAND IN COMMUNITY-DWELLING OLDER WOMEN: A PILOT STUDY

Luiz Henrique Cabral Duarte[1], Tamiris Beppler Martins[1], Júlya Charara Aires da Silva[1], Bianca Campos Machado Melo[1], Isis de Melo Ostroski[1], Gilmar Moraes Santos[1]
[1] *Posture and Balance Laboratory (LAPEQ). Santa Catarina State University (UDESC) - Health and Sport Sciences Center (CEFID), Florianópolis, Santa Catarina, Brazil*

Background: Hamstrings act in hip extension, knee flexion, hip and knee rotation, as well as in simple stabilization of the pelvis and lumbar spine during movement. In older adults, these functions may be compromised due to age-related changes in both muscle structure and function. Thus, the biomechanical and viscoelastic properties could be altered due to the decrease in muscle fiber size, decrease in collagen content and increase in fibrosis. Associated with these aging-related changes, postural demands such as standing for prolonged periods or maintaining an upright posture, could further exacerbate these changes, leading to increased muscle stiffness and reduced elasticity. Therefore, it is possible that the biomechanical and viscoelastic properties of hamstrings are affected by postural demands, particularly in community-dwelling older adults.
Objectives: To evaluate and compare changes in the biomechanical and viscoelastic properties of hamstrings at rest and during the orthostatic position.
Methods: Descriptive analytical cross-sectional study. Individuals aged 60 years or older, without muscle tone alterations and without conditions affecting functional mobility, were evaluated. Individuals with cardiorespiratory, metabolic, or neurological health conditions without medical follow-up were also excluded. Initially, the individuals answered an evaluation form developed by the researchers. Next, the MyotonPro (Myoton AS, Estonia) was used to assess the passive stiffness, elasticity, relaxation, and creep of the biceps femoris (BF) and semitendinosus (SMT) muscles in prone position (PP) and in the orthostatic posture (OP). Mean values for the left lower limb (LLL) and right lower limb (RLL) were calculated from the values obtained in BF and SMT. Means and standard deviations were used to describe the data and, to compare the different situations between MIE and LID, the Wilcoxon test was used with a significance level of $p<0.05$.
Results: Seven female participants were evaluated, with a mean age of 65.57($\pm$4.68) years and a mean body mass index of 29.61kg/m^2($\pm$5.81). In RLL, the passive stiffness (PP=262.31N/m$\pm$38.71; OP=286.71N/m$\pm$71.58), elasticity (PP=1.85$\pm$0.16; OP=1.63$\pm$ 0.27), relaxation (PP=23.35ms$\pm$4.38; OP=20.71ms$\pm$4.95), and creep (PP=1.45$\pm$0.26; OP=1.29$\pm$0.30) showed a significant difference between groups. In the LLL, only the elasticity (PP=1.85$\pm$0.14; OP=1.59$\pm$0.29) showed a significant difference.
Conclusion: The findings of this study indicate that maintaining the orthostatic posture would imply an increase in stiffness and a reduction in elasticity, relaxation and creep of the hamstrings, in at least one of the lower limbs.
Implications: Understanding the biomechanical and viscoelastic properties of tissues in different postures can help design and optimize training and rehabilitation programs.
Keywords: Muscle stiffness, Postural control, Older adults

Conflict of interest: The authors declare no conflict of interest.
Acknowledgments: We would like to thank the Fundação de Amparo à Pesquisa e Inovação do Estado de Santa Catarina – FAPESC (2021TR995) for supporting this research.
Ethics committee approval: Approved by CEPSH/UDESC (CAAE: (CAAE: 65601722.5.0000.0118).

https://doi.org/10.1016/j.bjpt.2024.100878

282

THE ROLE OF THE PHYSIOTHERAPIST IN PRE-ADMISSION SCREENING, PERIODIC AND DISMISSAL ASSESSMENTS OF WORKERS: CROSS-SECTIONAL STUDY

Luiz Henrique Machado dos Santos[1], Uerley Magalhães Franchi[1], Rosimeire Simprini Padula[1]
[1] *Master's and Doctoral Program in Physical Therapy, Universidade Cidade de São Paulo (UNICID), São Paulo, São Paulo, Brazil*

Background: A crucial occupational health physiotherapist's role is advising on a person's physical fitness for work. To do this, the physiotherapist working in occupational health uses tools to measure a person's physical and functional capacity and perform a series of assessments. Many physiotherapists use physical-functional measurements for this purpose. The physical-functional pre-employment evaluations aim to identify musculoskeletal injuries present in the worker or functional limitations of movements that prevent him from carrying out occupational activities, such as handling loads.
Objectives: Identify the profile of physiotherapists who perform physical-functional and complementary assessments, who work with occupational health.
Methods: This is a cross-sectional study through interviews (survey) with physiotherapists who work with physical-functional and complementary assessments in occupational health. Physiotherapists who carry out physical-functional evaluations in workers with the objective of assessment, periodic, or dismissal, were included. the recruitment and access to the questionnaire were through a "Contact Mode" survey and the link was sent through social networks and a banner in the development and pre-test questionnaire was prepared with the title and purpose of the research and types of questions, the administration of the survey carried out via the web, it was a voluntary survey, without incentives with collection from June to December 2022 with a questionnaire with 55 items and 12 pages.
Results: Of the 1210 guests with a professional profile in the occupational health field, 106 physiotherapists responded that they

evaluated workers according to the established inclusion criteria. The occupational profile characteristics of the participants prevailed the female gender being 70.8%, most qualified with specialization 69.8% and work in the area from 2 to 4 years 24.5%. 56.6% consider the use of the ICF in their evaluations, 45.3% use questionnaires to assess health and capacity, 35.8% usually request additional tests, 82.1% include evaluation of participation in work, 40.6% evaluate workers over 60 years old, 48.1% assess workers with physical or mental disabilities. They use sociodemographic information and anthropometric profiles in their evaluation forms, predominate use of pain assessment in workers on the Visual Analog Scale 76.4%. In the evaluation techniques and instruments used to measure a range of motion, a simple goniometer prevails in 58.5%. In the functional physical assessments, 72.6% use special functional tests, with the most evaluated elements being pain 98.1%, active range of motion 98.1%, edema 93.4%, tonus 88.7%, tropism 84.9%, scars 83.0%, gait and sensitivity 81.1%. The monitoring of workers is ordered weekly, monthly, quarterly, half-yearly, or annually. These assessments include admission, periodic change of function, removal or return to work, diagnosis of disability, establishing a causal link, and dismissals.
Conclusion: We identify that physiotherapists use other resources besides a musculoskeletal-based assessment to assess workers.
Implications: This study allows us to understand better how physiotherapists conduct their assessments and know some of the most used techniques and methods.
Keywords: Physical Evaluation, Occupational Health, Physiotherapist

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: This study was financed in part by the Coordenação de Aperfeiçoamento de Pessoal de Nível Superior - Brasil (CAPES) - Finance Code 001.
Ethics committee approval: Universidade Cidade de São Paulo **(**CAAE: 57459422.4.0000.0064)

https://doi.org/10.1016/j.bjpt.2024.100879

283

SOCIAL ASPECTS OF QUALITY OF LIFE IN INDIVIDUALS WITH VESTIBULAR DYSFUNCTION

Luiz Humberto Figueiredo Monteiro[1], Isabela Natalia de Souza Rêgo[1], Hugo Miranda de Souza Coroa[1], Eduarda Brito Sousa[1], Brenno Ribeiro Braz[1], Suellen Alessandra Soares de Moraes[1]
[1] *Federal University of Pará (UFPA), Belém, Pará, Brazil*

Background: Disorders of the vestibular system can cause inability to perform professional and social activities, in addition to causing physical and emotional problems. This disability caused by vestibular symptoms, whether related to emotional, functional, or physical aspects, is of great importance in the individual's social and personal context, regardless of its etiology, considerably affecting their quality of life. In the social context, individuals with symptoms arising from vestibular dysfunction such as dizziness and vertigo, avoid participating in family gatherings, visiting friends and neighbors due to fear of walking and leaving home, affecting their quality of life. The identification of social aspects in these individuals can help in choosing the most appropriate therapy. However, the investigation of social aspects of quality of life is little explored in individuals with vestibular dysfunction.
Objectives: Investigate the social aspects of quality of life in individuals with vestibular dysfunction.
Methods: This is a pilot cross-sectional study with a quantitative approach. For descriptive statistics, Jamovi version 2.3.25 was used. Inclusion criteria are age ≥18 years; both genders; complaining of dizziness or vertigo for at least 3 months; medical diagnosis of vestibular dysfunction. Exclusion criteria are lower limb amputation; ataxia; low vision or blindness; locomotion aided by devices such as a wheelchair, canes, or crutches; dizziness or vertigo that is not vestibular in origin; psychiatric disorders in crisis; underwent vestibular rehabilitation in the last 6 months; presence of chronic orthopedic disease; refusal to sign the Free and Informed Consent Form. For evaluation, a specific form for sociodemographic data and the Medical Outcomes Study 36 - Item Short Form Health Survey (SF 36) questionnaire was used, using only the score (0-100) of the "social aspects" domain, which considers the family relationship, relationship with friends or groups as a social aspect.
Results: Of the five individuals evaluated, 3 were women and 2 men, the age group had an average of 46.4 with a standard deviation of 20 years, 3 had completed higher education, 2 had completed high school, as a work activity 2 were maids, 1 civil engineer, 1 systems developer, 1 physiotherapist. Of the sample analyzed, 3 had a score of 25 points and 2 had a score of 63 points. Considering this score, most individuals had a poor social aspect, a quarter of what is considered excellent for the evaluated domain (social aspect).
Conclusion: We identified low scores in the social aspects of quality of life in individuals with vestibular dysfunction. New research whose social aspects are analyzed as a primary outcome should be encouraged.
Implications: This study suggests that people with vestibular dysfunction may have low scores on social aspects of quality of life. This research can contribute to physical therapy practice, as it highlights a relevant aspect in the functionality and health of people with vestibular dysfunction.
Keywords: Socialization, Vestibular system, Quality of life

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: I would like to thank the Federal University of Pará for incentive scientific research.
Ethics committee approval: Federal University of Pará (46775421.0.0000.0018).

https://doi.org/10.1016/j.bjpt.2024.100880

284

PSYCHOBEHAVIORAL FACTORS AND LIFESTYLE OF BRAZILIAN MIDDLE-AGED AND ELDERLY ADULTS ARE ASSOCIATED WITH PAIN

Luiza Ferreira Moreira[1], Louise Acalantis Pereira Pires Fernandes[1], Gustavo Felicio Telles[1], Leandro Alberto Calazans Nogueira[1]
[1] *Centro Universitário Augusto Motta (UNISUAM), Rio de Janeiro, Rio de janeiro, Brazil*

Background: Pain is one of the main reasons for seeking health services, and its prevalence is higher among adults and older people. In addition to generating high health costs, the presence of pain leads to a decrease in these individuals' quality of life and functionality. Understanding the factors associated with pain during aging is essential for effective prevention and treatment. Studies that explore these associations among older people are still scarce and need a sample size representative of the Brazilian population.
Objectives: Analyze the association between pain, psychobehavioral, and lifestyle factors in middle-aged adults (+50) and elderly Brazilians.