

Methods: In this cross-sectional analytical observational study, 31 women answered an online questionnaire. 'Survivors' were considered those who completed treatments (chemotherapy, radiotherapy, and/or surgery) 6 months ago or more. Sociodemographic and oncological characteristics and the International Physical Activity Questionnaire (IPAQ) were questioned. The main barriers and facilitators to the practice of physical activity were also questioned.

Results: The mean age of the women was 49.2 ± 8.4 years (30 – 69 years) and the time since diagnosis was 4.9 ± 3.6 years (1 – 17 years). BMI was 24.9 ± 4.8 (adequate) (17 – 36.7); 75% of the sample resided in urban areas, 66% had completed graduate studies, 22% had completed higher education, 72% were employed, and 22% were retired. Oncological staging at diagnosis was, classified as zero, 12.5% I, 18.8% II, 31.3% III, 9.4% IV, and 6.3% were unable to report. Surgical treatment was used in 97% of cases, 59% underwent radiotherapy, 56% chemotherapy, and 56% hormone therapy. 84.4% of women reported receiving information about physical activity considered relevant after According to the IPAQ-SF (short version), the prevalence of physical activity levels (version) was 44% high, 37% rate and 19% low, and 3617.2 ± 3859.6 MET-min/week total. The main barriers to physical activity reported were issues related to employment (28%), the duration and frequency of physical activity (22%), the feeling of fatigue (22%), and lack of motivation to practice (16%); in addition, 13 women reported not perceiving difficulties. The most prevalent facilitators were health promotion (62%) and well-being (53%), the existence of motivation to practice (37.5%), the presence of medical guidance (28%), and the ease of access to practice sites (22%).

Conclusion: The levels of physical activity found were higher than previously reported in the literature, which may be related to the characteristics of the urbanized sample with a high level of education. Although the majority received professional instruction, it is perceived that the barriers were related to daily demands and that the facilitators were the promotion of health and well-being.

Implications: Research with a larger number of women in different contexts is recommended to promote the levels of physical activity suggested in the literature.

Keywords: Physical Activity, Breast Cancer, Women's Health

Conflict of interest: The authors declare no conflict of interest.

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WORK ABSENCE IN HEALTH WORKERS - COMPARATIVE STUDY BEFORE AND DURING THE COVID-19 PANDEMIC

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Background: Several studies have focused on investigating the repercussions of the COVID-19 pandemic. However, in the health-care workers area, there is still a gap regarding the real impacts of the COVID-19 pandemic on the number of medical records, absences from work, and the main complaints of this population.

Objectives: To compare the prevalence of musculoskeletal disorders and sick leave among health professionals at a university hospital in pre and per-pandemic periods of COVID-19. Secondly, we aimed to identify the impact of the COVID-19 pandemic on the occurrence of health complaints of these professionals.

Methods: A retrospective longitudinal study was performed with database analysis from health workers at a University Hospital in Rio de Janeiro. Health-related data from the medical records of these professionals were collected. The workers should be employed at least six months before the pandemic and remain in the hospital for up to six months after the pandemic. Data analysis was based in the comparison of work on the comparison of work absences registered in the medical records of these patients. It also analyzed the occurrence of musculoskeletal pain, and health problems self-related by workers (sleep, depression, anxiety, and psychological assistance).

Results: Data from 189 professionals were included in this study. The mean age of the population was 40.9 years (SD 7.8) and 143 employees (75.6%) were women. The average workload was 34 hours per week (SD 5.8). Professionals had on average 3.8 years of working at the hospital (SD 0.62). The professionals who most presented work-related diseases were nursing technicians 56 (29.6%) and administrative assistants 21 (11.1%). There was no significant difference when comparing the mean number of work absence days in the pre-pandemic period, 10.7 days (SD 19.5), and the per-pandemic period, 13.5 days (SD 15.9) ($p=0.270$). There was also no significant difference when comparing the number of health-related diseases in the same period. However, when observing self-reports on health problems, it was identified that there was interference from the pandemic in the frequency of occurrence of sleep problems ($\chi^2=26,967$; $p=0.01$), episodes of depression ($\chi^2=63,087$; $p=0.01$), anxiety attacks ($\chi^2=67,938$; $p=0.01$) and psychological assistance ($\chi^2=92,706$; $p=0.01$).

Conclusion: There was no difference in the number of work absence days and the number of health-related diseases when comparing the pre-and-pandemic periods. However, it was observed that the pandemic interfered with the occurrence of health complaints.

Implications: The findings indicate that hospital professionals possibly needed to make the decision to work even being sick. Such behavior is also perceived in other work activities and should be more deeply explained by scientific works in the area.

Keywords: Occupational health, COVID-19, Musculoskeletal injury

Conflicts of interest: The authors declare no conflict of interest.

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ASSESSMENT OF ABDOMINAL SUBCUTANEOUS ADIPOSE TISSUE THICKNESS BY ULTRASONOGRAPHY: A STUDY OF INTRA-RATER RELIABILITY

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Background: Body fat distribution is an important risk indicator for cardiovascular and metabolic diseases. Ultrasonography (US) is a non-invasive tool without adverse effects, validated to measure subcutaneous adipose tissue (SAT) however its use is evaluator dependent. To our knowledge, there are no reliable studies that