

chapters. A few codes were added from one version to another, maintaining the original construct throughout updates.

Conclusion: The SCIM linkage to ICF showed that the aim of the assessment is the Activities and Participation component, contemplating 64% of the codes considered relevant in the literature for people with chronic SCI. The instrument briefly approaches the Body Structures and Body Functions components, reflecting 22% of this component's codes considered the most relevant for this population, showing that the assessment of this component might have to be complemented by other instruments. The SCIM IV is the most recent and the one linked to the highest number of ICF codes.

Implications: The ICF linkage to each SCIM version's items in association with the use of ICF qualifiers will help health professionals to elaborate reports for SCI patients, allowing the use of an international classification to describe functional independence and enabling communication between health professionals. Furthermore, by identifying the ICF components contemplated by SCIM versions, this paper helps health professionals plan the assessment of SCI individuals.

Keywords: Spinal Cord Injury, SCIM, ICF

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PHYSICAL ACTIVITY OF GYNECOLOGICAL CANCER SURVIVORS IN THE FIRST AND FOURTH QUARTER AFTER HIGH DOSE RATE BRACHYTHERAPY

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Background: Gynecological cancers develop in the female reproductive system and include cancer of the cervix, uterus, ovaries, fallopian tubes, vulva, and vagina. High dose rate brachytherapy (BATD) is often used in the treatment of gynecological malignancies, however, it can induce serious side effects of late onset, such as changes in the bowel, urinary tract/bladder and vagina. The practice of physical activity (PA) has positive results on the side effects of gynecological cancer and its treatment.

Objectives: To compare the level of PA in women who survived gynecological cancer in the first and fourth trimester after BATD at a reference oncology institution in southern Brazil.

Methods: Retrospective and longitudinal study based on electronic medical records of women with gynecological cancer treated at the physiotherapy outpatient clinic of the Oncological Research Center (CEPON) in Santa Catarina. The short version of the Physical Activity Questionnaire (IPAQ) was used to assess the level of PA. The collected information was stored in a spreadsheet in Microsoft the IBM SPSS program, version 20.0, was used for statistical analysis.

Variables were analyzed descriptively using simple frequency and percentages (categorical variables) and measures of position and dispersion (numerical variables). The Kolmogorov-Smirnov test was performed to verify the normality of the data. To compare the variables related to PA according to the IPAQ (PA time - minutes per day; weekly frequency; sitting time) between the first trimester after radiotherapy and the fourth trimester, the Wilcoxon test was used, with the significance level adopted as 5%.

Results: 34 participants were included with a mean age of 53.4 ± 13.5 years. Most were classified as insufficiently active in both the first (55.9%) and fourth (64.7%) trimester after BATD. In addition, an increase in sedentary behavior was identified, with greater relevance in the fourth quarter, so that the average sitting time on a weekday was 147.4 ± 102.4 minutes per day (min/day) in the first quarter to 211.8 ± 125.7 min/day in the fourth quarter ($p=0.007$); as well as the average sitting time on a weekend day, increased from 151 ± 103.5 min/day on the first day to 228.5 ± 133.3 min/day ($p=0.002$).

Conclusion: It was possible to notice that the majority of gynecological cancer survivors do not reach the PA recommendations in the first and fourth trimester after BATD. It was also found that women have sedentary behavior after treatment, especially in the fourth trimester after BATD, spending more time sitting compared to the first quarter.

Implications: The study demonstrates the importance of encouraging the practice of physical activity among survivors of gynecological cancer, especially in cancer treatment centers.

Keywords: Physical activity, Brachytherapy, Gynecological Cancer

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PHYSIOTHERAPY APPLIED TO PATIENTS IN THE VARIOUS STAGES OF PARKINSON'S DISEASE - WITHOUT IDENTIFICATION

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Background: Cellular senescence is an irreversible state of cell cycle arrest, thus being characterized by decreased cell proliferation and increased nucleus area, often acting as a tumor suppressor program. Photobiomodulation (PBM) has been used in several conditions to increase the mitochondrial response, promoting nuclear changes and cell proliferation. However, the effects of PBM on cells are still unclear.

Objectives: To verify the efficacy of photobiomodulation on cell senescence processes.

Methods: We utilized A172 glioblastoma cells transduced with H2B-mCherry by lentivirus to nuclear tagging. Treatment was done with GaAlAs Laser (850nm). Cells were divided by intensity into the following groups: C= Control, L1= $1\text{J}/\text{cm}^2$, L2= $2.2\text{J}/\text{cm}^2$, L3= $3\text{J}/\text{cm}^2$, L9= $9\text{J}/\text{cm}^2$, L15= $15\text{J}/\text{cm}^2$, L21= $21\text{J}/\text{cm}^2$, nuclear evaluation was performed at experimental times (0h, 24h, 48h and 72h). For data analysis, two-way ANOVA with the Tukey post hoc test was used. Differences were significant when $p<0.05$.

Results: PBM on intensities of $1\text{J}/\text{cm}^2$, $2.2\text{J}/\text{cm}^2$, $3\text{J}/\text{cm}^2$, $9\text{J}/\text{cm}^2$ e $15\text{J}/\text{cm}^2$ showed a lower increase at the nuclear size when