

phenomenon based on the experiences of individuals with PD: 1) Individuals with PD's perspective on their sleep; 2) Life impacts sleep quality and sleep influences quality of life; 3) Physiotherapy and sleep in individuals with PD; 4) Expectations and desires of individuals with PD regarding sleep.

Conclusion: The main sleep disturbances perceived by people with PD are hallucinations, vivid dreams, insomnia, and restless leg syndrome, which can cause feelings of worry and anxiety. The lack of quality sleep affects interpersonal relationships, cognitive aspects, the individual's disposition for daily tasks, and social participation. People with PD highlighted the beneficial sensations perceived when they undergo physiotherapy and mentioned the desire to sleep through the night without interruptions so that they can make better use of their day.

Implications: Considering the sleep disturbances experienced by people with PD, as well as the perceived consequences on quality of life, interpersonal relationships, and social participation, physiotherapy, and the need for health education on this topic stand out.

Keywords: Parkinson's Disease, Sleep, Physiotherapy

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

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CORRELATION BETWEEN FUNCTIONAL MOBILITY AND MENTAL HEALTH OF ACTIVE OLDER PEOPLE AFTER 18 MONTHS OF DETRAINING DUE TO COVID-19 PANDEMIC

Gabriela Cassemilano¹, Ana Claudia Silva Farche¹, Stefany Lee¹, Vinícius Ramon da Silva Santos¹, Laura Bonome Message¹, Anielle Cristhine de Medeiros Takahashi¹

¹ Department of Physical Therapy, Postgraduate Program in Physical Therapy, a Federal University of São Carlos (UFSCar), São Carlos, São Paulo, Brazil

Background: Physical detraining is the partial or total interruption of a physical exercise program, and it results in partial or total loss of acquired benefits, generating physiological adaptations in older people. In the context of the social restrictions imposed by the covid-19 pandemic, physical detraining may have resulted in a decline in the functional mobility and mental health of this population.

Objectives: To verify the correlation between functional mobility and mental health of active older people after 18 months of physical detraining due to the covid-19 pandemic.

Methods: This is a longitudinal study. The participants of the study were older people considered active for practicing a regular multi-component physical exercise program (MPE) and in a group for at least one year, before being interrupted due to the covid-19 pandemic. The program had a weekly frequency of three times a week, with sessions of 50 minutes each. The physical assessments were carried out in three moments, being T1: before the pandemic (March 2020), T2: after 18 months of the beginning of the pandemic (August 2021) and T3: after 24 months of the pandemic and return to face-to-face activities (February 2022). The functional mobility assessment was done by "Timed Up and Go – TUG" test and it was carried out in the three moments, while the mental health assessment was done using two components: depressive symptoms from

the "Geriatric Depression Scale - GDS" and perceived stress by the "Perceived Stress Scale - PSS", being performed only at T2. Statistical analysis was performed using the SPSS 20 software with a significance level of $p < 0.05$, after verifying the normality of the data, the Friedman test was performed to compare functional mobility and the correlation with mental health was performed using the test of Spearman with delta values between the first 18 months of the pandemic (T2-T1).

Results: forty-six older people (74 ± 6.67 age and 87% female) participated in the three moments. There was a significant worsening of functional mobility performance between T1 and T2 (8.29 [7.57-9.38] and 9.34 [8.53-10.96]), reflecting the effect of 18 months of detraining. Regarding the correlation with mental health, a positive correlation was observed with GDS ($p=0,015$; $r=0,414$) and PSS ($p=0,047$; $r=0,377$). Thus, the longer time spent performing the TUG was associated with a higher presence of depressive symptoms and perceived stress in the 18 months of the pandemic.

Conclusion: The pandemic had negative effects on functional mobility that lasted even after 18 months of its beginning, and worst functional mobility was correlated with worsening mental health.

Implications: With the end of the pandemic, the resumption of physical exercise programs for the older people is important, so that there is a recovery of functional mobility, but it is also necessary that these programs also pay attention to mental health issues in this population.

Keywords: Functional mobility, Mental health, Older adults

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

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TRANSLATION AND VALIDATION OF THE ROTTERDAM TRANSITION PROFILE TO BRAZILIAN PORTUGUESE

Gabriela Rovai¹, Camila Araújo Santos Santana¹, Marina de Brito Brandão², Ana Carolina de Campos¹

¹ Federal University of São Carlos (UFSCar), Physical Therapy Department, Child development analysis laboratory, Postgraduate Program in Physical Therapy, São Carlos, São Paulo, Brazil

² Federal University of Minas Gerais (UFMG), Department of Occupational Therapy, Postgraduate Program in Rehabilitation Sciences, São Carlos, São Paulo, Brazil

Background: Recently, individuals with cerebral palsy (CP) have been reaching adulthood in greater proportions, making it relevant to understand the process of transition to adulthood, as well as the levels of autonomy in participation (AIP) of adolescents and young people with CP, which is little explored due to the lack of appropriate instruments, mainly for the Brazilian population. In this sense, the Rotterdam Transition Profile (RTP) is an instrument used to categorize AIP levels.

Objectives: This study aimed to translate and validate the RTP construct and content for use in Brazil.

Methods: The study's translation and validation process followed the methodology and sample size established and recommended by the literature. The translation was performed by 3 professionals fluent in English and the version obtained in Portuguese was back translated into English, to be reviewed by the authors of the instrument. The construct validity of the RTP was investigated by a panel of 8 professionals, who received an online form containing

instructions and the translated version of the RTP. At the end of this stage, 30 young adults aged between 13 and 35 years (mean=25; SD=6.9 years), diagnosed with CP and with a good cognitive level, provided data for content validation, in addition to sociodemographic information.

Results: After two rounds of review with the authors, the final version translated into Portuguese was obtained and construct validity was established with agreement among professionals to change 3 items of the instrument. Content validity was demonstrated with suggestions for additional modifications to 2 of the same 3 items also pointed out during construct validity. In the end, changes were made to items 1 (education and employment) and 8 (care demands). The internal consistency analysis was considered good (Cronbach's alpha 0.820).

Conclusion: The Brazilian Portuguese version of the RTP was considered adequate and clear.

Implications: The instrument will support transition planning for person-centered care, highlighting the strengths and challenges faced by young people with CP during the transition to adulthood.

Keywords: Cerebral palsy, Evaluation instrument, Measurement properties

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

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INSPIRATORY MUSCLE STRENGTH AS A PROTECTIVE FACTOR FOR MORTALITY IN PATIENTS WITH HEART FAILURE

Geisa Nascimento de Andrade¹, Juliana Araújo Nascimento¹, Edimar Alcides Bocchi², Fátima Cruz², Antonio de Padua Mansur², Naomi K. Nakagawa¹

¹ Physical Therapy Department, University of São Paulo Medical School, São Paulo, SP, Brazil

² Heart Institute (InCor), University of São Paulo Medical School, São Paulo, SP, Brazil

Background: Chronic heart failure (HF) is commonly associated with inspiratory muscle weakness (IMW). However, few studies have investigated risk factors for IMW in patients with HF and systolic dysfunction (left ventricular ejection fraction (LVEF) \leq 40%).

Objectives: This longitudinal study aimed to: (1) analyze whether clinical factors, functional capacity measures, and biomarkers of inflammatory and cardiovascular disease were associated with IMW in patients with HF; (2) to analyze associations between IMW, functional capacity and the outcome death in 36 months of follow-up.

Methods: This longitudinal study. Patients with HF, NYHA functional class I-II-III, LVEF \leq 40% consecutively recruited at a referral cardiac tertiary center were evaluated. At baseline, we evaluated patients regarding clinical data, smoking history, peripheral muscle strength using a dynamometer, functional capacity using the six-minute walk test (6MWT) and treadmill cardiopulmonary test (CPT), quality of life using the Minnesota Living with Heart Failure (MLHF) questionnaire and plasma levels of cardiovascular biomarkers. Through analysis of medical records and phone calls, we followed these patients for 36 months for the main outcome, death. Statistical analysis compared the survivor and death groups using the Wilcoxon test for continuous variables and Fisher's exact test was used for categorical

variables. To identify predictors of mortality in these patients, a logistic regression was performed. P values <0.05 were considered significant.

Results: Sixty-nine patients were evaluated. They had 58 ± 10 years, LVEF $30 \pm 7\%$ and 71% were male. Six patients died during the 36-month follow-up. Compared with survivors, patients in the death group had lower predicted inspiratory muscle pressure (IMP) (80 ± 23 vs $57 \pm 22\%$, $p=0.015$), lower oxygen consumption (VO_2) at the point of respiratory compensation (20 ± 5 vs 15 ± 1 mL/Kg/min, $p=0.020$), higher troponin I plasmatic values (453 (244 - 596) vs 804 (674 - 1085) pg/mL, $p=0.022$), higher Galectin-3 plasmatic values (1168 (806 - 2092) vs 2756 (2021 - 6514), $p=0.020$) and worse quality of life according to the MLHF ($p=0.048$). Most patients in the death group had IMW (83%), with a significant difference ($p=0.018$) compared to the survivor group, in which only 31% of patients had IMW. Predicted IMP was the only protective predictor of mortality in these patients (OR 0.958 (0.920 to 0.998), $p=0.027$).

Conclusions: Predicted IMP proved to be an independent protective predictor of mortality in patients with HF and reduced LVEF.

Implications: In physiotherapeutic care for patients with HF and reduced LVEF, the assessment of inspiratory muscle strength and identification of IMW is an important measure to guide conducts and identify the severity of patients.

Keywords: Heart failure, Inspiratory muscle weakness, Functional capacity

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

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CORRELATION BETWEEN OCCUPATIONAL PROFILE, ABSENTEEISM AND WORK ACCIDENTS IN MUSCLE, SYNOVIA AND TENSION DISORDERS

Gilvane de Lima Araujo¹, Elamara Marama de Araujo Vieira¹

¹ Master's Program in Physiotherapy, Federal University of Paraíba (UFPB), João Pessoa, Paraíba, Brazil

Background: Absenteeism and accidents at work are considered a public health problem due to the socioeconomic and functional repercussions imposed on the worker and the country. The characteristics of the work environment can increase occupational risks and, consequently, the incidence of work absenteeism and accidents.

Objective: To identify which occupational characteristics are associated with absenteeism and work accidents in work-related muscle, synovial, and tendon disorders.

Methods: We performed an observational study. We obtained the data through the National System of Medical Assistance - SINAM (DATASUS) considering the notifications resulting from muscle disorders (M60-M63), synovial and tendon disorders (M65-M68) in Brazil between the 2006 and 2022 years. The analyzes correlated absenteeism and work accidents with the occupational profile, with the following variables: (1) repetitive movements; (2) stressful environment; (3) time for breaks; (4) working hours longer than 6h/day; and (5) more than one employment relationship. We assessed the normality of all variables using the Shapiro-Wilk test. In the absence of normal distribution, we used the Spearman Correlation test. All