anterior, posteromedial, and posterolateral reach directions. The averages of three attempts were recorded for each direction, for each lower limb. After normalizing each reach distance by the length of the lower limb, the composite score and the average between the right and left composite scores were obtained. To assess ankle mobility, the Weight-bearing lunge test was performed, recording the average angle of three attempts for each lower limb. To compare results according to sex, the Student's t-test or Mann-Whitney test was used, taking into account the distribution of data. Conclusions were taken at a significance level of 5%.

Results: The sample consisted of 75 participants, most female (69.3%; n=52), aged between 18 and 55 years (mean 32.3 ± 7.0), and average time of experience in the modality of 39.8 ± 25.6 months. The average YBT-LQ composite score between the right and left sides was 103.0 ± 9.1 among men and 100.9 ± 12.2 among women, and there was no statistically significant difference between groups (p> 0.05). Concerning ankle mobility, the average between the right and left sides of dorsiflexion range of motion in the Weightbearing lunge test was 48.2 ± 6.3 among men and 48.9 ± 7.3 among women, with no statistically significant difference between groups (p>0.05).

Conclusion: The performance in dynamic balance and ankle mobility of recreational FF practitioners was similar among adults of both genders.

Implications: These results can guide sports professionals in identifying normative values for balance and ankle mobility for practitioners of FF without injuries. Prospective studies are needed to determine whether these tests can predict FF-related injuries. *Keywords:* Postural balance, Range of motion, Dorsiflexion

Conflict of interest: The authors declare no conflict of interest. **Acknowledgment:** Not applicable.

Ethics committee approval: The study was approved by the Federal University of Mato Grosso do Sul (UFMS) Ethics Committee (protocol number 5,393,287, CAAE: 4294642000000021).

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BODY IMAGE AND SEXUAL DISSATISFACTION OF WOMEN ASSISTED IN A BASIC HEALTH UNIT

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Background: The female body suffers from standards imposed by society determined by the media or social networks, generating a continuous desire for bodies incompatible with reality. This desire can generate low self-esteem, causing women to feel dissatisfied with their own appearance. This is an important factor in sexual satisfaction, because women dissatisfied with their body and appearance may be ashamed to expose it to their partners, making sexual intercourse uncomfortable. It is necessary to understand the existing relationship between body and sexual dissatisfaction due to the scarcity of studies, assisting in the care of the health of the woman. *Objectives*: The objective of this study was to verify the relationship between body and sexual satisfaction of women assisted in a Basic Health Unit (BHU).

Methods: Epidemiological, observational, cross-sectional study, conducted in a UBS in the city of Guarapuava - PR, with women enrolled in the Women's Comprehensive Health Program. Inclusion criteria were women aged 18 to 59 years who agreed to the Informed Consent Form. In September 2021, 1,811 women were

enrolled in the Comprehensive Women's Health program, and the sample calculation with the StatCalc application of the Epi Info 7.2.4 program totaled 326 eligible women. Data collection was performed by applying a questionnaire during the period from October 02, 2021 to February 15, 2022, containing: sample characterization; lifestyle: women's health: sexual performance: body satisfaction. The dependent variable was sexual dissatisfaction, by the questionnaire Sexual Quotient - Female Version (QS-F), validated by Abdo, (2009). The independent variable was body image, collected by the Stunkard Silhouettes Scale, validated by Scagliusi, (2006). Data analysis was performed using the Statistical Package for the Social Sciences - IBM SPSS Statistic v.19 for Windows®. The association analysis between variables was performed using Pearson's Chisquare and ANOVA tests (statistical significance 5%, p-value<0.05). The reference category of the independent variable "body image" was the response "satisfied".

Results: Among the 326 women eligible for the study, there were 269 in this study, considering the losses and refusals. The mean age was 33.52 ± 10.15 , mostly white (74.0%), with a partner (74.3%), working (63.8%), with children (79.0%), sexually satisfied (79.5%) and dissatisfied with their bodies (81.8%). Of these women, 20.6% were sexually dissatisfied. Statistical association was found between sexual dissatisfaction and mean age (<0.05), children (<0.001), menopause (<0.001), and body dissatisfaction (<0.05). There was a higher prevalence of sexual dissatisfaction in women dissatisfied with their bodies.

Conclusion: It was possible to conclude that there is a relationship between body image and sexual dissatisfaction in women who are assisted in a UBS.

Implications: These findings may help in the planning of actions to women's health in the Primary Care setting.

Keywords: Sexuality, Personal Satisfaction, Women's Health

Conflict of interest: The authors declare no conflict of interest. **Acknowledgment:** Not applicable.

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IMPACT OF DYSMENORRHEA ON THE LEVEL OF SELF-PERCEPTION OF THE PELVIC FLOOR IN NULLIPAROUS YOUNG WOMEN

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Background: Dysmenorrhea, originated by a difficult menstrual flow, is a source of gynecological chronic pelvic pain in the lower abdomen or lumbar region, which can last the entire menstrual period and cause dysfunctions in the pelvic floor (PF). Despite the high prevalence of PF dysfunctions in the female population, women have limited knowledge about their perception and, consequently, about the health of this region.

Objectives: To evaluate the effect of dysmenorrhea on the level of self-perception of the pelvic floor in young nulliparous women.

Methods: A descriptive, observational, cross-sectional study was conducted with a convenience sample of nulliparous women. Women aged 18-30 years were selected, who had had their first sexual intercourse and never got pregnant. Participants were assessed for the same examiner using the socio-clinical questionnaire, visual analogue pain scale (VAS) and the pelvic floor self-perception