were made to evaluate gait. Kinematic data were obtained by Foot Switches (Noraxon®) pressure sensors, positioned bilaterally on the calcaneus and at the base of the hallux. The gait variables collected were support time; swing time; stride time; double support time and gait speed. For statistical analysis, the Multivariate Analysis of Covariance test (MANCOVA) was applied, using the co-variable gait speed. A significance level of p < 0.05 was adopted.

Results: MANCOVA showed differences (p < 0.001) between the group with KOA (KOAG) and the control group (CG). In the KOAG group, the time of support, striding and double support was longer, representing, respectively, 17%, 8% and 33% higher in relation to the CG. The study showed that the KOAG had a shorter swing time and an 11% reduction in gait speed.

Conclusion: Women with KOA had an average speed 16% lower than the safe gait speed thresholds indicated in the literature (between 1.2 and 1.4 ms⁻¹) and alterations in the kinematic gait parameters, which can be interpreted as a strategy for reducing pain and joint overload on the knee while performing the task.

Implications: The study shows that women with KOA present a decrease in gait speed and alterations in the movement pattern that can negatively contribute to the level of functional mobility. Rehabilitation strategies for this population should include, in addition to resistance exercises, sensorimotor exercises to improve the gait pattern of this population.

Keywords: Functionality, Walking, Speed

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

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FUNCTIONING OF WOMEN IN THE POSTOPERATIVE PERIOD AFTER BREAST CANCER SURGERY

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Background: Functioning results from complex interactions between different domains of life, such as "health conditions", "body function and structure", "activity and participation", and "personal and environmental factors". Women undergoing surgery for breast cancer are expected to suffer from some degree of functioning impairment, whether due to alterations in structural components of the ipsilateral upper limb or psychological and social harm. In this context, understanding which domains of functioning are most affected and to what extent these changes can impact the lives of these patients is crucial for designing public health policies and effective rehabilitation protocols particularly tailored to this population.

Objectives: To assess the functioning/disability of women who underwent surgery as a treatment for breast cancer using the World Health Organization Disability Assessment Schedule (WHODAS 2.0), which is an instrument developed by the World Health Organization that assesses functioning in six domains: cognition, mobility, selfcare, interpersonal relationships, participation, and activities of daily living.

Methods: We conducted a descriptive observational study in Fortaleza/CE with women between 18 and 80 years old without cognitive impairment and diagnosed with breast cancer, evaluated 3-12 months after surgery. We collected sociodemographic and clinical data and applied the WHODAS 2.0 (36-item version). The scores from WHODAS range from 0 to 100 for each of its six domains and total score — the higher the score, the greater disability.

Results: The study included 29 women (average age: 55.97). The mean of the WHODAS scores was 21.53 (with a 14.26 standard deviation). The most affected domains were domestic activities (30.34 \pm 21.73) and participation (30.60 \pm 20.62), while the least affected were self-care (10.34 \pm 12.45) and activities of daily living (13.36 \pm 9.18).

Conclusion: The rehabilitation process after surgery for breast cancer should especially consider domestic activities and women's social participation as therapeutic goals.

Implications: The reported indicators can serve as a basis for outlining care protocols and monitoring the rehabilitation evolution of these patients.

Keywords: Breast neoplasms, Disability assessment, Cancer survivors

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EFFECTS OF DANCE THERAPY ON FUNCTIONALITY AND AUTONOMY IN ACTIVITIES OF DAILY LIFE OF CHILDREN WITH AUTISM SPECTRUM DISORDER

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Background: Autism Spectrum Disorder (ASD) is a disorder that encompasses a wide range of behavioral and cognitive disorders. Due to deficits in perceptual-motor skills, these individuals often experience episodes of addiction in various aspects of functionality. In this sense, an integrated therapeutic approach is necessary, which takes into account the sensorimotor nuances appreciated by ASD

Objectives: To analyze the effects of dance on functionality and autonomy, in activities of daily living, of children with Autism Spectrum Disorder.

Methods: This is a Blind Follow-up Randomized Clinical Trial, carried out at the Varginhense Foundation for Assistance to the Exceptional, in Varginha/MG. Children aged between 5 and 10 years old, diagnosed with ASD only, excluding comorbidities, were included. Sociodemographic and clinical variables were collected to characterize the sample. Subsequently, the children were assessed using the Childhood Autism Rating Scale and the Pediatric Assessment of Disability Inventory by Adaptive Computerized Testing (PEDI- CAT). Then, the sample was randomized into two groups: the Experimental Group (EG), submitted to dance therapy and multidisciplinary treatment, and the Control Group (CG), accompanied only by multidisciplinary care. There were 14 dance therapy sessions (twice a