288
CORRELATION BETWEEN DYSMENORRHEA AND ANAL INCONTINENCE IN YOUNG NULLIPAROUS WOMEN
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Background: Dysmenorrhea is one of the most frequent gynecological conditions, characterized by colicky pain that affects the lower abdomen. Many systems can be affected during the menstrual period. It is known that the different phases of the menstrual cycle influence the motility of the small and large intestine, even evolving with a delay in the intestinal transit time.

Objectives: To correlate the symptom of dysmenorrhea with the function of anal continence in young nulliparous women.

Methods: A descriptive, observational, cross-sectional study was carried out with a convenience sample of young nulliparous women. Women aged between 18 and 30 years who had never been pregnant were selected. The participants were evaluated by the same examiner using the socio-clinical questionnaire, visual analogue pain scale (VAS), Bristol scale and Jorge & Wexner fecal incontinence scale (domains: solid stools, liquid stools, flatus, use of protector, lifestyle change). Data were analyzed according to the distribution of normality of the sample and presented as means and standard deviation of the variables and compared the groups with and without dysmenorrhea as a function of fecal continence using the t-test for independent samples. Data were analyzed using the Statistical Program for Social Sciences (version 23) considering a significance level of 5%.

Results: Participated in this study 69 nulliparous young adult women with a mean age of 21.86 ± 3.16 years. Dysmenorrhea had a prevalence of 65.21% (n=45) and the majority had regular menstrual flow. The level of pain from dysmenorrhea was low, with a mean VAS of 3.59 ± 1.6 points. Most of the sample reported normal bowel function with a defecation pattern between 5 and 7 times a week, without the need to use medication to defecate. The appearance of the stools also denoted a normal evacuation, with the majority of the sample did not have anal incontinence. In the comparison between the groups with and without dysmenorrhea, there was no statistically significant difference for anal incontinence. However, in the group with dysmenorrhea had higher values for anal incontinence. There was also no correlation between the presence of dysmenorrhea and the domains of anal incontinence.

Conclusion: Dysmenorrhea is prevalent among young nulliparous women. Intestinal functioning presented good performance. Dysmenorrhea did not interfere with the anal continence of the sample studied, however clinically a worsening of anal incontinence was observed in the group with dysmenorrhea.

Implications: In scientific terms, it is known that dysmenorrhea influences intestinal functioning, but also that, although there was no statistical significance, if the sample is increased, it can probably be shown that dysmenorrhea interferes with anal continence. In clinical terms, this study is relevant because it presents the importance of evaluation dysmenorrhea and anal continence in young nulliparous women, considering that both conditions are common in the population.

Keywords: Women's health, Dysmenorrhea, Fecal Incontinence

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289
PREVALENCE OF MENTAL HEALTH CONDITIONS IN EDUCATION WORKERS DURING THE COVID-19 PANDEMIC – LONGITUDINAL STUDY
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Background: Education was one of the sectors most affected by the pandemic due to the emergency suspension of face-to-face activities. The educational sector had to adapt quickly to remote teaching, in conditions that are not always favorable in terms of resources to carry out classes, work overload, and excessive use of screens. Therefore, feelings of anguish, anxiety and stress were frequent, mainly due to sudden and radical changes in daily life and uncertainty about the duration of this period. In addition, fear, alarm, stress, and depression were also common in the period. Thus, education professionals may have shown an increase in the prevalence of mental health problems, because of difficulties related to work during the pandemic.

Objectives: To identify the prevalence of diagnosed mental health conditions in workers in the education sector during the COVID-19 pandemic through quarterly assessments over 12 months.

Methods: Longitudinal study, derived from the IMPAC cohort. Education workers who participated in the baseline (June 2020 to September 2020) and quarterly follow-ups for 12 months were included, using an electronic form with sociodemographic, occupational, and medical diagnoses questions.

Results: 450 education workers participated in the baseline; being 63.6% female; 71.4% white; 66.8% with income greater than six minimum wages; 31.1% with working time greater than 16 years; 44% had increased workload during the pandemic; 97.1% in home office; 52.9% had children at home; 18.7% were contaminated at some point by COVID-19 until the second year of the pandemic; 52% did not use medication, and of those who did, 25% used two or more medications. Anxiety was the health condition with the highest increase in cases: 8.0% (3rd month of the pandemic); 9.8% (6th month); 12.0% (9th month) and 23.8% (12th month of the pandemic). In sequence, burnout with 0.4% (3rd month); 0.8% (6th/9th month) and 14.3% (12th month). Insomnia diagnoses had a prevalence of 1.1% (3rd/6th month); 1.2% (9th month) and 11.9% (12th month of the pandemic). Finally, the diagnosis of depression had a prevalence of 5.5% (3rd month); 4.9% (6th month); 4.3% (9th month) and 7.1% (12th month).

Conclusion: Anxiety, burnout, insomnia and depression were the most prevalent mental diagnoses and had a significant increase after 12 months of follow-up among education workers, especially between the 9th and 12th months of follow-up.

Implications: As a result of the COVID-19 pandemic, working conditions in the education sector are tolerable, causing a scenario of shocks. Our results support the need to care for workers' mental health, especially in relation to anxiety, burnout, insomnia and depression.

Keywords: COVID-19, Mental health, Occupational Health