

Research with Human Beings, Ministry of Health (COEP/MS No.: 3529376).

<https://doi.org/10.1016/j.bjpt.2024.100721>

125

## TREATMENT FOR CHRONIC BACK PAIN AND MULTIMORBIDITY AMONG BRAZILIAN ADULTS: WHERE ARE WE IN RELATION TO THE RECOMMENDED GUIDELINES?

Érica de Matos Reis Ferreira<sup>1</sup>, Thaís Cristina Marqueline Caldeira<sup>1</sup>, Déborah Carvalho Malta<sup>1</sup>, Edmar Geraldo Ribeiro<sup>1</sup>, Rafael Zambelli Pinto<sup>1</sup>

<sup>1</sup> Universidade Federal de Minas Gerais (UFMG), Escola de Fisioterapia e Terapia Ocupacional, Belo Horizonte, Minas Gerais, Brasil

**Background:** Chronic back pain (CBP) is a worldwide public health problem. CBP generates negative impacts on the lives of individuals and costly expenses for the health system, including those directed at treatments for CBP. However, the impact of multimorbidity on the treatment of CBP is still unclear.

**Objectives:** To identify the types of treatments commonly reported by adults with CBP with and without multimorbidity.

**Methods:** Cross-sectional study with data from Brazilian adults ( $\geq 18$  year) who self-reported CBP ( $n=18930$ ) in the National Health Survey 2019. Treatments for CBP were identified through the dichotomous yes/no answer: physical therapy; exercises regularly; uses medication or injections; makes use of acupuncture, medicinal plants and phytotherapy, homeopathy, meditation, yoga, tai chi chuan or some other integrative and complementary practice; and regular follow-up with a health professional. Descriptive statistics were reported and associations between the two groups were confirmed using adjusted logistic regression models and confidence intervals (95% CI). Sociodemographic variables such as age, sex, schooling, income and health insurance were used as covariates in the analysis.

**Results:** Adults with CBP and multimorbidity (69.4%) had higher prevalence and association for physical therapy (14.2% vs. 7.9%; adjusted OR (ORa)= 1.61, 95%CI: 1.33- 1.94), use of medication or injections (47.8% vs. 36.5%; ORa= 1.38, 95%CI: 1.22-1.56), and follow-up with a health professional (29% vs. 17.5%; ORa= 1.51, 95%CI: 1.29-1.78) compared with adults without multimorbidity. There was no difference between groups for use of acupuncture, medicinal plants and phytotherapy, homeopathy, meditation, yoga, tai chi chuan or some other integrative and complementary practice and regular exercise due to CBP.

**Conclusion:** The study revealed that most adults with CBP do not undergo physical therapy or regular exercise, with the use of medication or injections being the most used intervention, especially among adults with multimorbidity. Health education strategies, encouraging the practice of regular exercise and greater access to physiotherapy are fundamental for changing this scenario.

**Implications:** The study reinforces the need for health education strategies, encouraging the practice of regular exercise and greater access to physical therapy.

**Keywords:** Back pain, Treatment, Brazil

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

**Acknowledgment:** The study was supported by the Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (CAPES).

**Ethics committee approval:** Brazilian Committee on Ethics in Research with Human Beings, Ministry of Health (COEP/MS No.: 3529376).

<https://doi.org/10.1016/j.bjpt.2024.100722>

126

## EFFECTS OF A MAT PILATES PROTOCOL ON THE POSTURAL BALANCE OF ELDERLY PEOPLE: A RANDOMIZED CLINICAL TRIAL

Érica Mercês Macêdo de Santana<sup>1</sup>, Thaís da Silva Neri<sup>2</sup>, Lídia Mara Aguiar Bezerra de Melo<sup>1</sup>, Patrícia Azevedo Garcia<sup>2</sup>, Fabiana Dias Marques<sup>3</sup>, Pedro Henrique de Almeida Oliveira<sup>2</sup>

<sup>1</sup> Faculdade de Educação Física, Universidade de Brasília (UnB), Brasília, Distrito Federal, Brasil

<sup>2</sup> Faculdade de Ceilândia, Universidade de Brasília (UnB), Brasília, Distrito Federal, Brasil

<sup>3</sup> Centro Universitário Estácio, Brasília, Distrito Federal, Brasil

**Background:** The aging process is accompanied by a progressive loss of systems functioning that can lead to balance deficits. The Pilates method has been shown to be effective in improving balance in the elderly, as it promotes improved muscle strengthening in practitioners.

**Objectives:** To verify the effects of a 15-week Mat Pilates program on the postural balance of the elderly.

**Methods:** This is a randomized controlled clinical trial that evaluated the postural balance (Mini-BESTest) of 58 elderly people, randomized into two groups called Control Group/CG ( $n=29$ ) and Pilates Group/GP ( $n=29$ ), who performed an exercise program based on the Pilates method, consisting of thirty sessions.

**Results:** There was a significant improvement in the average Mini-BEST score in the Pilates Group ( $25.48 \pm 1.90$ ) after the intervention. The t-statistical analysis indicated a significant difference between the Pilates and Control groups after the intervention ( $t = 4.58$ ) but not before the intervention ( $t = -0.38$ ), suggesting that Pilates had a positive effect on functionality and balance compared to the control group.

**Conclusion:** A program composed of thirty sessions of Mat Pilates, spread over 15 weeks, was enough to demonstrate a significant improvement in the balance of the elderly.

**Implications:** This method proved to be safe and effective, with satisfactory results and low financial cost, requiring only the use of a mat for body practice.

**Keywords:** Pilates, Postural Balance, Elderly

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

**Acknowledgment:** We thank the support of the Faculty of Physical Education (UnB) and the volunteers who participated in this research.

**Ethics committee approval:** The research was approved by the Faculty of Health Sciences-UnB under opinion number: 5.287.203.

<https://doi.org/10.1016/j.bjpt.2024.100723>

127

## PHYSIOTHERAPY CARE IN LABOR IN A USUAL RISK MATERNITY: A DESCRIPTIVE STUDY

Ester Pereira Dezan Martins Gonçalves<sup>1</sup>, Caroline Baldini Prudencio<sup>2</sup>, Alessandra Harumi Arakaki Carvalho<sup>3</sup>, Gesilani Júlia da Silva Honório<sup>1</sup>, Angélica Mércia Pascon Barbosa<sup>3</sup>

<sup>1</sup> Programa de Pós-Graduação em Fisioterapia, Centro de Ciências da Saúde e do Esporte da Universidade do Estado de Santa Catarina (UDESC), Florianópolis, Santa Catarina, Brasil

<sup>2</sup> Universidade Júlio de Mesquita Filho (UNESP) – Campus de Botucatu, Botucatu, São Paulo, Brasil

<sup>3</sup> Faculdade de Filosofia e Ciências – Universidade Júlio de Mesquita Filho (UNESP) – Campus de Marília, Marília, São Paulo, Brasil