Results: 100 participants were included, 52% of whom were female, with a mean age of 60 years. The mean BMI of the participants was 29.64 with a mean pain intensity of 9.5 by the specific domain of the WOMAC questionnaire and Stair Climb Test performance of 22.79 seconds. The final regression model (Table 1) indicated that sex (p = 0.029), age (p = 0.001), BMI (0.004), and pain by the specific domain of the WOMAC (p = 0.003) may explain 42% of the variability in Stair Climb Test performance.
Conclusion: The present study demonstrates that there is an association between sex, age, BMI, and painful symptoms in the performance of the Stair Climb Test, which may be potential factors that interfere with the performance of subjects with KOA.
Implications: Understanding the influence of such factors helps in the interpretation of the performance of patients with knee osteoarthritis in the stair climb test.
Keywords: Knee osteoarthritis, Rheumatology, Physiotherapy

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: São Paulo Research Foundation (FAPESP).
Ethics committee approval: Not reported.

https://doi.org/10.1016/j.bjpt.2024.100970

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SUBGROUP ANALYSIS IN SYSTEMATIC REVIEWS OF PHYSICAL THERAPY INTERVENTIONS PUBLISHED IN HIGH IMPACT JOURNALS: A METAEPIDEMIOLOGICAL STUDY

Reinaldo Oliveira Cunha[1], Felipe Viana Gama[1], Paula Gabrielly Oliveira Demes[1], Beatriz Ramos de Sá[1], Fernanda Gabriella de Siqueira Barros Nogueira[1], Areolino Pena Matos[1]
[1] *Curso de Fisioterapia, Universidade Federal do Amapá (UNIFAP), Macapá, Amapá, Brasil*

Background: Systematic reviews (SRs) publications focusing on physical therapy rehabilitation have significantly increased. SRs are known to present the highest level of scientific evidence, thus constituting the most reliable type of research to be used in clinical decision-making in healthcare. In these studies, subgroup analysis is usually used as a statistical control technique to investigate sources of heterogeneity and explore treatment effects in individualized subgroups. However, the analyses recorded in the protocol are not always reported in published SRs, with complete absence, partial reduction in the number of analyses, and even the inclusion of new subgroups not protocolled.
Objectives: To evaluate the frequency with which physical therapy intervention SRs, published in high-impact journals, perform subgroup analyses that are previously reported in protocols or add post-publication unplanned analyses.
Methods: The Rayyan software was used by two independent authors to select all SRs published between March 2020 and August 2022 in the 10 highest impact rehabilitation journals according to the Journal Citation Reports (JCR). Disagreements were resolved by an experienced third reviewer. Subgroup analysis described in the protocol and reported in final publications were compared using descriptive statistics.
Results: 3,032 records were identified, of which 2,927 were excluded for not meeting the inclusion criteria. 105 SRs published in journals with impact factors ranging from 4.76 to 10.71 (JCR, 2021) were included. Of these, 60 (57.1%) reported subgroup analyses that were consistent with what was recorded in the protocol; 29 (27.6%) did not report any of the previously registered analyses, and 16 SRs (15.3%) added unplanned analyses in the protocol, with an average of 1.6 new subgroup analyses included in the final publication.
Conclusion: The findings indicate that 43% of SRs present significant discrepancy between the subgroup analyses planned in registered protocols and those reported in published SRs, even in high-impact scientific journals. Thus, it is essential that SRs conducted in the physical therapy preserve as much as possible in the final text, the subgroup analyses planned in their respective protocols, making their results more reliable and accurate for researchers and clinicians in the field.
Implications: This study has the potential to highlight shortcomings in the methodological strategies used in SRs in the physical therapy field and, consequently, raise awareness for greater care in the planning and execution of studies that are more transparent and faithful to previously registered protocols, as well as greater caution in interpreting SR results, even if they come from sources considered to be reliable.
Keywords: Evidence-Based Practice, Systematic Reviews as Topic, Rehabilitation

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: To Grupo de Estudos em Saúde Baseada em Evidências - GESBE, of the Universidade Federal do Amapá - Unifap.
Ethics committee approval: Not applicable.

https://doi.org/10.1016/j.bjpt.2024.100971

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MOTOR AND FUNCTIONAL EVALUATION OF CHILDREN EXPOSED IN THE INTRAUTERINE PERIOD TO THE ZIKA VIRUS

Renan Maués dos Santos[1], Letícia Costa Miranda[1], Karen Adriana Pastana Marques[2], Consuelo Silva de Oliveira[1], Carlos Alberto Marques de Carvalho[1], Suellen Alessandra Soares de Moraes[1]
[1] *Federal University of Pará (UFPA), Belém, Pará, Brazil*
[2] *University of Southern California, California, United States of America*

Background: The Zika virus (ZIKV) is an arbovirus of the Flaviridae family, which brought many repercussions for causing microcephaly in newborns (NBs) of mothers who became ill during the gestational period. Neurological findings and alterations presented in the neuropsychomotor development of these children characterized Congenital Zika Virus Syndrome (SCZ), including delay in motor, cognitive, and speech development, visual and auditory alterations, epilepsy, and cerebral palsy. Among the main neurological findings are described severe microcephaly with cortical atrophy and malformations. So far, it is known that the delay in the NPMD of children will depend on the degree of CNS injury and in what gestational age period the infection occurred. In this sense, the earlier the intervention measures are applied to these children, the smaller the impacts on their development and future lives.
Objectives: To evaluate the motor and functional characteristics of children exposed in the intrauterine period to ZIKV.
Methods: Cross-sectional study with 16 children aged between 6 and 36 months of both sexes, residents of Pará state, exposed to ZIKV infection during pregnancy and evaluated by the Zika Project Physiotherapy team, developed at the IEC. Strength was assessed by Medical Research Council (MRC) scale and muscle tone using the modified Ashworth scale (ASW). In addition, the Gross Motor Function Classification System (GMFCS), the Mini-Manual Ability Classification System (MACS), developed to assess the ability to handle objects during activities of daily living, and were apllied the Pediatric Assessment of Disability Inventory (PEDI).

Results: In muscle strength, 11 children (68.75%) shown preserved strength. Regarding muscle tone of MMSS and LL, all were characterized as normotonic. On the GMFCS scale, of the 16 children assessed, 10 (62.5%) had level 1; Two (12.5%) had level 2; Three (18.75%) had level 5, and 1 (6.25%) was not specified. Of the 16 participants evaluated by the MACS scale, 10 (62.5%) obtained grade 1; 4 (25%) achieved grade 5, and 1 (6.25%) was not specified. Furthermore, the lowest averages obtained through the PEDI scale were in the Self-Care item (21.68) and in the Social Function item, whose average was 9.56.
Conclusion: Children exposed to ZIKV during pregnancy, despite preserved tone and strength, have impaired gross motor function and poor performance in activities involving social function and self-care.
Implications: Research shows that exposure to ZIKV during the gestational period requires attention and care for the early detection of motor deficits and oriented instructions to improve self-care and socialization.
Keywords: Physiotherapy, Neurology, Zika virus

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: The Federal University of Pará, which offers extension scholarships and strengthens scientific research in the state.
Ethics committee approval: Evandro Chagas Institute (seem CAAE 68067217.0.0000.0019)

https://doi.org/10.1016/j.bjpt.2024.100972

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E-HEALTH SELF-MANAGEMENT PROGRAM FOR WORKERS WITH (RISK) OF LOW BACK PAIN

Renata Firme[1], João Paulo Leal Borges[1], Maria Luiza Caires Comper[1]
[1] *Federal University of Southern Bahia (UFSB), Itabuna, Bahia, Brazil*

Background: Low back pain is an important health problem in the world, with a high prevalence among workers. It is a complex condition that can be influenced by several biological, psychological, social, cultural, and occupational risk factors. Symptoms of pain and physical-functional disability resulting from low back pain directly affect participation at work. Therefore, interventions to manage low back pain must be carried out at all levels of care, including approaches compatible with the occupational context and with the characteristics of the workers. Pain self-management through educational interventions is an approach capable of meeting this need. In this case, workers must have access to knowledge of their own pain experience (self-assessment) and to content and information related to the neurophysiology of pain and the factors that modulate it (pain education). The use of an application to deliver the pain education program seems to be an innovative, easily accessible solution capable of generating significant learning in the worker so that he can assess and intervene in his health status.
Objectives: Develop a self-management program (pain assessment and education) to be delivered in digital format (E-Health) through an application for mobile devices focused on the prevention and/or control of low back pain in workers.
Methods: The project will be carried out in 3 stages. Step 1 focuses on the conceptual and structural development of the self-management program; step 2 is aimed at developing the prototype of the mobile application to be used to deliver the program; and, finally, step 3 is intended to assess the acceptability and viability of the prototype. Each step has its own method that follows guidelines and criteria established by international and national recommendations.
Results: The conceptual framework of the self-management program adopted a model that articulates three intervention approaches for the prevention and control of low back pain. Each approach has self-assessment tools and specific content. The first approach is aimed at preventing low back pain in the occupational environment. The second and third approaches are aimed at controlling acute and chronic low back pain, respectively. Choosing these approaches allows the self-management program to be centered on each worker's individual pain or occupational exposure experiences. Fliplet (https://fliplet.com/) was chosen as the platform that would host the developed application, called Back Education and Management For Workers APP. A brief detail can be viewed at the link: https://drive.google.com/drive/folders/1vgolIYUhdv42E8KVghPYflUL486bqlzr?usp=sharing
Conclusion: The self-management program developed for the management of low back pain in workers seems to be a useful tool for self-assessment of pain and for access to knowledge and educational guidelines.
Implications: We believe that the program will be able to contribute to the production of data and analysis of information collected in the databases; and that its effects are able to generate in the worker the ability to assess and intervene on his health status with reliable information. This will help minimize barriers that limit management in workers with (risk) low back pain.
Keywords: Self-management, Backache, Workers

Conflict of interest: The authors declare no conflict of interest.
Acknowledgment: Not applicable.
Ethics committee approval: UFSB (Federal University of Southern Bahia).

https://doi.org/10.1016/j.bjpt.2024.100973

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PROFILE OF OLDER PEOPLE ACTIVE AT WORK DURING THE COVID-19 PANDEMIC: REMOBILIZE STUDY

Renata Gonçalves Dantas[1], Monica Rodrigues Perracini[1,2], Juleimar Soares Coelho de Amorim[1], Rosimeire Simprini Padula[1]
[1] *Programa de Mestrado e Doutorado em Fisioterapia, Universidade Cidade de São Paulo (UNICID), São Paulo, São Paulo, Brasil*
[2] *Programas de Mestrado e Doutorado em Gerontologia, Faculdade de Ciências Médicas, Universidade Estadual de Campinas (UNICAMP), Campinas, São Paulo, Brasil*

Background: The number of workers over 50 has increased, which creates a need to understand the impact that the extension of working life can have on health, ability to work, and well-being. In addition, we must consider that the isolation caused by the period of the COVID-19 Pandemic may have been a negative factor for the physical and emotional functions of these older adults, resulting in time off work.
Objectives: To describe the profile of older adults active at work during the COVID-19 Pandemic.
Methods: We analyzed data from the REMOBILIZE study, which involved a cohort study of older adults (60 years or older) living in 22 states in Brazil, during the COVID-19 pandemic, for an 18-month follow-up period. Data collection was performed through a questionnaire using the SurveyMonkey online platform. Participants were recruited using social networks (Facebook and Instagram) and WhatsApp. Older adults who were bedridden and who lived in long-term care facilities were excluded from the study. Data collection was carried out between May 18, 2020, and December 30, 2021, and for this analysis, we used only the information collected at baseline (May to July 2020).