

EPIDEMIOLOGICAL PROFILE OF PATIENTS SERVED IN THE PHYSIOTHERAPY DEPARTMENT OF THE CLINIC SCHOOL: AN OBSERVATIONAL STUDY

PERFIL EPIDEMIOLÓGICO DOS PACIENTES ATENDIDOS NO DEPARTAMENTO DE FISIOTERAPIA DA CLÍNICA ESCOLA: UM ESTUDO OBSERVACIONAL

Laís Vasconcelos Vilaronga - vilarongalais@gmail.com

Graduated in Physiotherapy, Faculdade Adventista da Bahia, Member of the Adventist Laboratory of Neuromodulation and Neuroscience (LANN-FADBA), Cachoeira, Bahia, Brazil.

Taiane Pereira Dias Gonçalves - tayanedyas123@gmail.com

Graduated in Physiotherapy, Faculdade Adventista da Bahia, Member of the Adventist Laboratory of Neuromodulation and Neuroscience (LANN-FADBA), Cachoeira, Bahia, Brazil.

Bruna Gabriela de Souza Martins - bruna.gabriela07@outlook.com

Graduated in Physiotherapy, Faculdade Adventista da Bahia, Member of the Adventist Laboratory of Neuromodulation and Neuroscience (LANN-FADBA), Cachoeira, Bahia, Brazil.

Waldison da Silva Marques - fisiowaldison@gmail.com

Graduated in Physiotherapy, Faculdade Adventista da Bahia, Member of the Adventist Laboratory of Neuromodulation and Neuroscience (LANN-FADBA), Cachoeira, Bahia, Brazil.

Lucas Dos Santos Moreno - lucassmoreno98@gmail.com

Graduated in Physiotherapy, Faculdade Adventista da Bahia, Member of the Adventist Laboratory of Neuromodulation and Neuroscience (LANN-FADBA), Cachoeira, Bahia, Brazil.

Tiago Da Silva Lopes - tslopes.physio@gmail.com

Doctor in Medicine and Health from the Federal University of Bahia (UFBA), Member of the Neuromodulation Assistance and Research Center (NAPEN), Brazil.

Abstract: Introduction: In clinical school environments, knowledge of the clinical and sociodemographic profiles of patients enables professionals in training to better plan protocols and therapeutic strategies, enabling individualized treatment, seeking to 72

identify and address the main complaints of each patient. **Objective:** The research proposes to trace and understand the clinical and sociodemographic profile of patients treated in the last 4 years in the physiotherapy sector of the teaching clinic of Faculdade Adventista da Bahia - FADBA, performing a balance of the profile of this public to enable an improvement in the care of the respective sectors. **Methodology:** This is a descriptive, retrospective, documentary study with data collection from the medical records of all patients seen only in the Physical Therapy sector during the period from January 2018 to January 2021. **Results:** A total of 578 medical records were collected included, 54.5% women and 45.2% men. It was observed that 41.3% of patients had pain as their main complaint, with a high demand for care in the pediatric sector 48.4%. **Conclusion:** We conclude that it is necessary to know the predefined profile of patients seeking care in the respective sector, in order to have guidance and improvement in the requirements that impose the quality of care specifically for each demand.

Keywords: Epidemiological profile; Physiotherapy; Clinic School.

INTRODUCTION

In recent times, it has been identified in national and international literatures a huge growth in how the development of society and its conditions are organized in the field of health related to its local population¹. Idealizing and intending actions in health requires a certain detailed deepening of the living conditions of people who live in certain regions, taking into account the determining and conditioning factors of the health and disease process and its implications².

The impact of a health service can be measured by its ability to meet the basic needs of the population in which it is inserted³. In this way, managers, whether in the public or private sphere, need to have knowledge about the reality of the local population taking into account social issues and not only in financial return⁴. Thus, it is essential that there is an interest in knowing the clinical and sociodemographic profile of patients, enabling an adaptation of health practices, becoming a necessary task in service evaluations and allowing health planning⁵.

In school clinic environments, knowledge about the clinical and sociodemographic profile of patients enables professionals in training a better planning of protocols and therapeutic strategies⁶. However, so far, few of these services have sought to characterize in a robust way the profile of their patients, unlike larger services such as hospitals⁷, and perhaps for this reason little is known about important information, such as more prevalent diagnosis and complaint, referral sector, care protocols and clinical discharge rate.

In this context, the fact that so far there are no documentary records on the clinical and sociodemographic profile of the population of patients treated at the school clinic of the Adventist College of Bahia (FADBA) the present work has relevance because it can generate data that can help the Physiotherapy service have a strategic planning that can generate scientific, institutional and social impacts. The objective of this study is to trace the clinical and sociodemographic profile of the patients treated in the last 4 years in the Physiotherapy sector of the school clinic of FADBA.

METHODOLOGY

This is a descriptive, retrospective, documentary study with data collection from the medical records of all patients treated during the period from January 2018 to January 2021 at the FADBA Physiotherapy Clinic in the municipality of Cachoeira - BA, where it is intended for practical care provided by students in their last year of training, under the supervision of professionals. The study was developed according to the precepts of Resolution 466/2012, approved by the Research Ethics Committee of the Adventist College of Bahia by opinion No. 45506221.9.0000.0042.

Despite the inclusion criteria, all medical records of adult and pediatric patients in the departments of Neurofunctional Physiotherapy, Cardiorespiratory and Orthopedics that were attended at the School Clinic were included in the present study. As exclusion criteria, medical records that were not properly described in the clinical diagnosis were excluded. Sociodemographic data were collected, such as gender, age group, race, marital status, occupation and municipalities. Data from the main complaint and clinical diagnosis were also collected, and these are the reason for the care.

The risk factors were related to the breach of anonymity secrecy, and these were considered minimal risks. The researchers minimized these risks by encoding patient information and storing the database on a single password-protected computer. The benefits of this study consisted in the fact that its results have the potential to provide documentary substrates that help the managers and physiotherapists of the Clínica Escola to improve the services of care to patients in the Physiotherapy sector.

The collected data were tabulated in the Microsoft Excel software and analyzed in the Statistical Packages for the Social Sciences (SPSS) software version 22.0. Quantitative descriptive variables were presented by mean and standard deviation while categorical descriptive variables were expressed by absolute and relative frequency.

RESULTS

A total of 816 medical records referring to physiotherapeutic consultations were analyzed in the period corresponding to the first half of 2018 until the first semester of 2021 and 238 of these were excluded due to incomplete data, totaling 578 medical records included in the present study being represented by Table 1.

Table 1 presents the sociodemographic characteristics of patients treated in the Physiotherapy department between the period from 2018 to 2021.

Table 1- Baseline characteristics of patients treated in the Physiotherapy sector, (n=578).

SOCIODEMOGRAPHIC CHARACTERISTICS		
Variable	N	%
Sex		
Feminine	315	54,5
Masculine	261	45,2
Age, Years (M±DP)	143,17±1010,55	
Marial Status		
Single	269	46,5
Married	186	32,2
Divorced	26	4,5
Widower	39	6,7
Not informed	58	10,0
Race		
Whie	102	17,6
Brown	197	34,1
Yellow	34	5,9
Black	137	23,7
Not informed	108	18,7
Profession		
Autonomous	124	21,5
Retiree	92	15,9
Public Servant	5	0,9
Educator	27	4,7
Health Profissional	23	4,0
Trader	56	9,7
Student	115	19,9
Not informed	136	23,5

Municipalities		
Cachoeira	188	32,5
Cachoeira do Paraguaçu	1	0,2
Conceição da Feira	22	3,8
Cruz das Almas	14	2,4
Governador Mangabeira	15	2,6
Maragogipe	7	1,2
Muritiba	62	10,7
Salvador	2	0,3
Santo Amaro	3	0,5
São Félix	17	2,9
São Gonçalo	1	0,2
Valença	2	0,3
Not informed	244	42,2

Source: Elaborated by the authors (2022).

Table 2 presents the distribution of origin, that is, who referred the patient to Physiotherapy, the sectors that were sought for the care and the main complaint, that is, the reason why the patient sought the Physiotherapy service at the School Clinic. The sector that obtained the greatest demand was the area of Orthopedics followed by that of Neurofunctional, having as its main complaint chronic pain, this having a significant value when compared to the other complaints that were cited by the patients. Finally, most of these patients came through medical origin.

Table 2 - Distribution of origin, sectors and main complaint of patients treated in the Physiotherapy sector, (n=578).

DISTRIBUTION OF PROCEDENCE, SECTORS AND MAIN COMPLAINT.

Variable	N	%
Origin		
Doctor	75	13,0
Physiotherapist	1	0,2
Spontaneous	65	11,2
Not informed	437	75,6
Sectors		
Cardiology	31	5,4
Neurofunctional	17	2,9
Ortopedics	147	25,4
Pediatrics	280	48,4
Not informed	103	17,8
Chief Complaint (QP)		
Pain	239	41,3
Edema	3	0,5
Adaptation com prosthesis	1	0,2
Difficulty performing ADLs	17	2,9
Difficulty closing your hand	1	0,2
Loss of strength	22	3,8
No trunk control	5	0,9
Difficulty crawling	2	0,3
Limb asymmetry	2	0,3
No cervical control	6	1,0
Vision loss	1	0,2
Don't walk	8	1,4
Decreased movements	2	0,3
Difficulty transferring	1	0,2
Don't sit	3	0,5
Don't speak	2	0,3
Tumor	22	3,8
	7	1,2
	10	1,7

To lose weight	1	0,2
Instability	92	15,9
Shortness of breathe	65	11,2
Difficulty walking		
Stiff limbs		
Imbalance		
Difficulty holding objects		
More than one QP		
No informed		

Source: Prepared by the authors (2022).

Table 3 presents the characteristics of the clinical diagnoses referring to patients who were treated in the Physiotherapy sector between the years 2018 and 2021.

Table 3 - Baseline characteristics of the clinical diagnoses found in the Physiotherapy sector, (n=578).

CHARACTERIZATION OF CLINICAL DIAGNOSIS		
Variable	N	%
Cardiovascular	36	6,2
Hipertensão Arterial Sistêmica, Diabetes, Fibrilação atrial, Arritmia, Infarto, valvopatia, Angina, Insuficiência cardíaca, entre outros. Cardiovascular Systemic arterial hypertension, diabetes, atrial fibrillation, arrhythmia, heart attack, valvular heart disease, angina, heart failure, among others.		
Neurological	165	28,5
Neurological Stroke, TBI, Parkinson's, Spinal cord injury, Tetraplegia, Cerebral palsy, Hydrocephalus, Delay in NPMD, Prematurity, Microcephaly, Patau syndrome, among others.		
Orthopedic	317	54,8
Fracture, Ligament/meniscus injury, subluxation, Osteoarthritis, Arthritis, Edema, Herniated disc, Bursitis, Tendinitis, Chondromalacia patella, Backer's Cyst, Fibromyalgia, Carpal Tunnel Syndrome, among others.		
More than one Diagnosis	22	3,8

Cardiovascular and Orthopedic, Neurofunctional and Orthopedic,
Cardiovascular and Neurofunctional.

Not informed

38

6,6

Source: Prepared by the authors (2022).

In Table 4 is the distribution of the general sample attended in the Physiotherapy sector at the School Clinic of the Adventist College of Bahia, this population is distributed through the clinical diagnoses and age group, and the physiotherapeutic care between the years 2018 to 2021 and age group of the population of the present study.

Table 4 - Distribution of clinical diagnoses and physiotherapeutic care performed twice a week between age group and years respectively, (n=578).

DISTRIBUTION BETWEEN CLINICAL DIAGNOSIS AND AGE GROUP					
Variable	Clinical Diagnosis				
Age Group	Cardiovascular	Neurologic	Orthopedics	More than one Diagnosis	Not informed
0 a 11	1	65	25	9	5
12 a 18	0	10	10	0	1
19 a 35	8	11	81	2	12
36 a 59	11	36	132	7	15
>60	16	43	69	4	5

DISTRIBUTION OF PHYSIOTHERAPEUTIC CARE BETWEEN YEARS AND AGE GROUP					
Variable	2018	2019	2020	2021	Not informed
Age Group					
0 a 11					
12 a 18	30	26	17	32	0
19 a 35	6	5	9	1	0
36 a 59	17	26	45	24	2
>60	36	31	75	53	6
	25	19	55	38	8

Source: Prepared by the authors (2022).

DISCUSSION

When analyzing the data collected in the clinical records of both sexes, it was found that 79

their plurality was composed of female individuals, in the same way it was found in a study⁸, where these data highlight the resistance of men who hardly seek health services, it is understood that this occurs due to social paradigms, where the man, when seeking a necessary support, may end up being associated with 'frailty', even though morbidity and mortality in males is significant⁹. It was observed that in the present study, among the areas of Physiotherapy, there was the greatest demand in the Orthopedics sector, these results are similar to a study¹⁰, showing that Physiotherapy is well known in the area of Orthopedics.

In relation to the main complaint, pain had a greater predominance, these results are corroborated with a study¹¹, where the authors comment that more than half of the patients referred to the physiotherapy sector present pain as the main complaint, and this has a direct impact on the functionality and quality of daily life, results expected, because pain in Brazil has an important socioeconomic impact on public health in the contemporary¹². Social Security data in 2007 indicate that 20% of the benefits granted for absence from work were intended for patients with chronic pain, thus becoming an arduous challenge for health professionals when treating these patients¹³, having said that, we observed that there is no specific sector for the demands related to the pain clinic in the school clinic to welcome these patients in a specific way. In relation to this, in a study¹⁴, the authors report that the prevalence of pain has been higher in women, compared to men, due to hormonal variations and lower tolerance to pain, these findings corroborate the population studied in the present study.

Another important factor, the higher average age was observed, in a study¹⁴, the authors comment that pain increases progressively and proportionally as age advances, and may also be interconnected to work activities because most are active workers.

Among the limitations for the construction of this study, we can mention the lack of information in the medical records, such as the description of the field of clinical diagnosis, thus making it impossible to include these medical records in the research. It is emphasized that the present medical records were completed by academics of the 9th and 10th semesters of physiotherapy where they performed an outpatient supervised internship at the present school clinic. Although many patients arrive at the clinic without this clinical diagnosis, but who have the complaints very clear and properly informed in the medical records, we can make the functional diagnosis and be able to treat the problem itself. As we are also first contact professionals, we do not need the clinical diagnosis, initially, to attend patients.

CONCLUSION

In this research it was possible to observe and describe the characteristics of the profiles that include the patients treated in the physiotherapy sector, thus, there was a prevalence of

female individuals, active workers, with orthopedic dysfunctions, reporting 'pain' as the main complaint. With these results, a better definition of complaints and search for care was obtained, allowing the understanding of the cases of higher frequency attended by physiotherapy. In this way, it is necessary to know the profile called as clinical of patients who seek care in the respective sector, in order to have a direction and improvement in the requirements that impose the quality of care in specific for each demand. New research is suggested that aims to find strategies for treatment and prevention directed to the individual condition of each patient.

However, the present study achieved the proposed objective and thus was able to demonstrate the importance of the conservation of medical records and the properly complete filling of the fields. Since through these data it is possible to trace the clinical and sociodemographic profile of patients, thus contributing to a consequent improvement in the physiotherapy care sector in the face of the disorders that affect the regional population.

REFERENCES

1. Buss PM, Pellegrini Filho A. A saúde e seus determinantes sociais. *Physis* [Internet]. 2007;17(1):77–93. Disponível: <https://doi.org/10.1590/S0103-73312007000100006>. Acesso em: 07 ago 2024.
2. Vianna LAC. Módulo político gestor: Processo saúde-doença: Especialização em Saúde da Família [Internet]. São Paulo: Unifesp; 2012. 21 p. Disponível em: https://www.unasus.unifesp.br/biblioteca_virtual/esf/1/modulo_politico_gestor/Unidade_6.pdf. Acesso em 02 de mar 2021.
3. Programa Saúde da Família. *Rev Saúde Pública* [Internet]. 2000;34(3):316–9. Disponível em: <https://doi.org/10.1590/S0034-89102000000300018>. Acesso em: 07 ago 2024.
4. Domingos PSA, Rossato EM, Bellini A. Levantamento do Perfil Social, Demográfico e Econômico de Pacientes Atendidos na Clínica de Odontologia do Centro Universitário de Araraquara – Uniara. *RBM* [Internet]. 2014;17(1):37-50. Disponível em: <https://revistarebram.com/index.php/revistauniara/article/view/3>. Acesso em: 07 ago 2024.
5. Pimentel Ítalo RS, Coelho BC, Lima JC, Ribeiro FG, Sampaio FP de C, Pinheiro RP, et al. Caracterização da demanda em uma Unidade de Saúde da Família. *Rev Bras Med Fam Comunidade* [Internet]. 2011;6(20):175-81. Disponível em: <https://rbmfc.org.br/rbmfc/article/view/95>. Acesso em: 07 ago 2024.
6. Nassri MRG, Silva AS, Yoshida AT. Levantamento do perfil socioeconômico de pacientes atendidos na clínica odontológica da Universidade de Mogi das Cruzes e do tratamento ao qual foram submetidos: clínica endodôntica. *Rev. Rev. Sul-Bras. Odontol.* 2009;6(3):272-8. Disponível em: <https://www.redalyc.org/pdf/1530/153012880008.pdf>. Acesso em: 05 mar 2021.
7. Pelissari AS, Vanalle RM. Qualidade em serviços de saúde – A percepção do cliente externo: estudo de caso de um hospital de Vitória/E.S. In: *Anais do 10o Congresso Brasileiro De Custos* [Internet]; 15-17 out 2003; Guarapari, ES. Disponível em:

<https://anaiscbc.emnuvens.com.br/anais/article/view/2536/2536>. Acesso em: 10 mar 2021.

8. Ghisleni MM, Silva VCC, Santos MV. Perfil epidemiológico dos pacientes atendidos na área de ortopedia e traumatologia da clínica-escola de fisioterapia Univates. Destques Acadêmicos [Internet]. 2014;6(3):117-25. Disponível em:

<http://www.univates.br/revistas/index.php/destques/article/view/422/414>. Acesso em 28 fev. 2023.

9. Pereira LP, Nery AA. Planejamento, gestão e ações à saúde do homem na estratégia de saúde da família. Esc Anna Nery [Internet]. 2014;18(4):635–43. Disponível em:

<https://doi.org/10.5935/1414-8145.20140090>. Acesso em: 08 ago 2024.

10. Arantes MS, Manfrim PB, Klebis LO, Silva EAL, Carmo EM, Chagas EF. Perfil de usuários do serviço de fisioterapia em uma unidade básica de saúde. Rev Colloquium Vitae.

2016;8(especial):180-5. Disponível em:

https://www.researchgate.net/publication/317051568_PERFIL_DE_USUARIOS_DO_SERVICO_DE_FISIOTERAPIA_EM_UMA_UNIDADE_BASICA_DE_SAUDE. Acesso em: 08 ago 2024.

11. Marques WS, Moreno LS, Vilaronga LV, TPD, Oliveira EC, Lopes TS. Avaliação do nível de conhecimento sobre neurofisiologia da dor em fisioterapeutas: um estudo transversal. Rev. Bras. Saúde Funcional [Internet]. 2022;10(3). Disponível em:

<https://adventista.emnuvens.com.br/RBSF/article/view/1548>. Acesso em: 07 ago 2024.

12. Lima-Costa MF, Firmo JOA, Uchôa E. A estrutura da auto-avaliação da saúde entre idosos: projeto Bambuí. Rev Saúde Pública [Internet]. 2004;38(6):827–34. Disponível em:

<https://doi.org/10.1590/S0034-89102004000600011>. Acesso em: 07 ago 2024.

13. Lima MAG, Trad LAB. A dor crônica sob o olhar médico: modelo biomédico e prática clínica. Cad Saúde Pública [Internet]. 2007;23(11):2672–80. Disponível em:

<https://doi.org/10.1590/S0102-311X2007001100015>. Acesso em: 07 ago 2024.

14. Sá K, Baptista AF, Matos MA, Lessa I. Prevalência de dor crônica e fatores associados na população de Salvador, Bahia. Rev Saúde Pública [Internet]. 2009;43(4):622–30. Disponível em:

<https://doi.org/10.1590/S0034-89102009005000032>. Acesso em: 07 ago 2024.