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Poster Session

CASE REPORTS AND EXPERIENCE REPORTS

01. ANALYSIS OF THE IMPACT OF THE TYPE OF DELIVERY ON THE NEWBORN MICROBIOTA: AN AGGREGATIVE REVIEW

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INTRODUCTION: Microbiota or human microbiome are terms used to represent a collection of microorganisms belonging to a part of the body, such as skin, hair, oral cavity, airways, gastrointestinal and urogenital tracts. Briefly, it is the first line of defense against pathogens, aids digestion and matures the immune system (BELKAID, 2015). The microbiota formed by contact with the mother's vagina in the newborn varies, mainly, according to physiology, culture and environmental factors such as gestational age versus birth date, maternal diet and lifestyle before, during and after delivery (this includes if the baby's lifestyle too), and the type of delivery (GREGORY et al, 2015). Babies born through normal delivery are soaked in the maternal vaginal flora from the very first moment outside the uterus, which constitutes the main difference from cesarean delivery. This review assesses the impact of the type of delivery on the child's postpartum life, on the immunological maturation and development of chronic diseases such as allergies, asthma, diabetes and obesity..

OBJECTIVES: To produce an aggregative literature review on the impact of the type of delivery on the newborn microbiota.

MATERIALS AND METHODOLOGIES: Databases such as Scielo, PubMed, academic google and health journals were used to collect scientific articles on topics related to intestinal microbiota and type of delivery, maturation of the immune system in perinatal life according to type of delivery, microbiota and starter culture and impact on nutritional status up to 2 years according to their type of delivery. **DISCUSSION:** The discussion is developed about the type of delivery that the newborn comes to be born interferes with the formation of its microbiota. When born through a normal delivery, the newborn goes through the mother's vaginal flora, causing him to have the first contact with some microorganisms that are located in the vaginal region. A newborn born by cesarean section, on the other hand, has his first contact with microorganisms that are present on the mother's skin, especially in the abdominal region where the incision and passage of the newborn occur. Brazil has increasingly increased the number of cesarean deliveries, now occupying the second position in the ranking made by the UN, which is of great concern to researchers who already relate the increase in this delivery to the increase in diseases the newborn goes through the mother's

vaginal flora, making him have the first contact with some microorganisms that are located in the vaginal region. A newborn born by cesarean section, on the other hand, has his first contact with microorganisms that are present on the mother's skin, especially in the abdominal region where the incision and passage of the newborn occur. **CONCLUSION:** Studies have shown that vaginal delivery favors the formation of a good microbiota for the newborn. When passing through the entire vaginal canal, the newborn is bathed by microorganisms present in the vaginal flora, having the development of its own microbiota, with some microorganisms present in the region where it travels during normal delivery.

KEY WORDS: Microbiota, Parturition, Newborn.

02. ASSOCIATION BETWEEN MAJOR DEPRESSIVE DISORDER AND POST-OPERATIVE HEART SURGERY MORTALITY: A REVIEW

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INTRODUCTION: Major depressive disorder is an important risk factor for death from cardiovascular disease, and this association is attributed both to biological dysregulation and altered health habits.

OBJECTIVE: To research the relationship between depression and prognosis after cardiac surgery. **METHODOLOGY:** Articles were searched in EMBASE, Academic Google and PUBMED databases, in Portuguese and English, published from 2016 to 2021. The descriptors used were "depression", "cardiac surgery" and "mortality". 4 articles met the description. **RESULTS:** Drudi et al (2018)

investigated the association between depression, frailty and mortality, analyzing the presence of depressive symptoms post transcatheter myocardial revascularization (ART) and surgical (SARV) procedures, including the follow-up after 6 and 12 months. Their analysis showed that depression is highly prevalent among elderly people with aortic stenosis undergoing both procedures, being present in 1 in 3 patients. They also observed an association between depression and increased mortality from all causes in the short and medium term after adjustments for clinical and geriatric risk factors. Bucker et al (2019) analyzed a group of 141 patients who had heart transplantation and depression assessed, on average, 5 years after transplantation, using the Beck Depression Inventory (BDI) scale. Demonstrating increased mortality in patients with a high BDI score compared to patients without this disorder. Furthermore, clinically

significant depression was also an independent predictor of mortality in the multivariate analysis. The assessment of the cognitive-affective and somatic subscales showed that neither of them was an independent predictor of mortality. Duerinckx et al (2021) evaluated the correlation between depressive symptoms scanned 1 year after heart transplantation with long-term mortality in 190 patients. Identifying that a BDI score > 10 increased the risk of death by 2.95 times, with each added 6 points on the scale, the risk elevated by 31%. Geulayov et al (2018), applied the Hospital Anxiety and Depression Scale (HADS) before and 1 year after coronary artery bypass graft surgery in patients who were followed up in the long term. They found a higher proportion of women with high scores on the HADS. Furthermore, high HADS scores before and after surgery were associated with increased all-cause mortality during the 11-year study. On the other hand, preoperative anxiety symptoms influenced overall mortality and postoperative symptoms predicted higher mortality in women. **CONCLUSION:** Evidence indicates that depressive symptoms are predictive of long-term mortality after cardiac surgery. The review presented may encourage similar research in Brazil, seeking the early identification and treatment of major depressive disorder among patients undergoing cardiovascular surgery.

KEYWORDS: Cardiac surgery; depression; mortality.

03. ATYPICAL ANGINA PECTORIS IN PATIENT WITH COVID-19: A CASE REPORT

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INTRODUCTION: Infection by SARS COV-2 has brought different symptomatic manifestations, mainly respiratory. Many cases related to cardiac manifestations have been reported, including cases of acute coronary disease, Heart Failure and Arrhythmias. This article reports a cardiac manifestation in a patient after the infection with the new Coronavirus. **OBJECTIVE:** A case report of an obese patient with subclinical hypothyroidism who contracted the new coronavirus and evolved with subjective cardiac alterations. **METHODS:** Case report of a patient from medical records, together with an interview and report of the information described. A total of 7 articles were selected from Scielo, Pubmed and Lilacs platforms, including a guideline from the Brazilian Society of Cardiology, a case report and 4 research articles. **RESULTS:** A 30-year-old male patient, Grade 1 obese (BMI=31 kg/cm²), personal history of subclinical hypothyroidism and COVID-19 infection in May 2020. Patient reports constant and constriction, non-exertion-related and non-ventilation related retrosternal pain, on the 16th day of infection. In the first 7 days without respiratory symptoms, in the following 7 days the patient presented fever, cough, adynamia, tiredness, headache. On the 16th day, the patient had a syncope while taking a shower, and was admitted to a hospital service. Computed tomography (CT) performed, showed involvement of <10% of both lungs; CT angiography (Pulmonary Thromboembolism (PTE) protocol) Negative; Negative Ultra Sensitive Troponin and Transthoracic Echocardiography without alterations. With an increased anticoagulant dose (0.5 mg/kg 12/12), the patient was discharged. The patient developed tachycardia (140-150 bpm on small efforts, such as taking a shower), retrosternal pain, constant, without fever. Dizziness on small movements, and was again referred to the hospital for tests. Cardiac magnetic resonance imaging indicating minimal

pericardial effusion and anterior and anteroseptal hypokinesia of the left ventricle (LV). CT of coronary arteries without calcification or reduction in the caliber of the arteries. HOLTER, Electrocardiogram and Two-dimensional Echocardiogram with color Doppler without alterations. The patient was discharged, using Carvedilol (25g 12/12), with persistent precordial pain, dyspnea and limitation to great efforts. Repeat examinations are scheduled one year after the onset of cardiac symptoms. **DISCUSSION:** The current literature has shown many case reports of cardiomyopathy associated with SARS COV-2 infection. According to current guidelines, heart disease has shown greater morbidity and mortality in infected patients. Our patient did not have a myocardial or any other significant disease of the heart, with normal parameters such as ejection volume and mass of the ventricle. Also, Carvedilol, as a drug choice for Angina pectoris, did not alleviate all the patient's pain. **CONCLUSION:** It is an Atypical angina, not related to breathing and exertion, with minimal pericardial effusion, without any other significant clinical finding.

Key words: Atypical angina, Cardiomyopathy, COVID 19.

04. BILATERAL COMPLETE URETERAL DUPLICATION IN A WOMAN WITH RECURRENT URINARY TRACT INFECTION (UTI): CASE REPORT

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INTRODUCTION: The ureters are bilateral thin tubular structures (3 to 4 mm) that connect the kidneys to the urinary bladder, carrying urine from the renal pelvis to the bladder. The muscle layers are responsible for the peristaltic activity that the ureter uses to move urine from the kidneys to the bladder. **CONTEXT AND OBJECTIVE:** Thus, we present a clinical case of a patient with bilateral complete ureteral duplication, associated with frequent episodes of urinary tract infection, which was approved by the Research Ethics Committee of the University Center of Patos de Minas (UNIPAM) under protocol number 4,982,290. **CASE EXPOSURE:** This is a female patient, 18 years old, with frequent episodes, since the age of 14, of urinary tract infections and complaints of feeling of incomplete bladder emptying, under treatment with a urologist. At 15 years of age, he was diagnosed with bilateral complete ureteral duplication, by means of computed tomography of the total abdomen, with subsequent intravenous administration of contrast. **EVOLUTION:** It is reported that after infections, the presence of constant vaginal discharge is intensified, in large quantities, with a strong odor, however, without burning. **DISCUSSION:** Bilateral complete ureteral duplication is most often associated with vesicoureteral reflux, ectopic ureterocele, or ectopic ureteral insertion, all of which are more common in women, as well as persistent urinary tract infections, which is often treated with antibiotic therapy prophylactic. **FINAL CONSIDERATIONS:** Many of the ureteral morphological changes can be evaluated using computed tomography, due to its most modern technological advances, it has contributed in recent years to a better characterization of morphological changes, being essential in the diagnosis of congenital anomalies, better guiding clinical and therapeutic decisions surgical procedures and acting as an essential tool in the identification of associated complications.

KEYWORDS: Uretes, Anomalies, Urinary Tract, UTI.

05. BREAST CANCER IN YOUNG WOMENSILVA, J.C. N.^{1*}, PEREIRA, A. M. ¹, PEREIRA A. M. ¹, VIZOTTO, I. D. ¹, SILVA, A. R.²¹Universidade Brasil. ²Faculdade de Medicina de Catanduva

INTRODUCTION: Breast cancer (CM) most often affects women over 50 years of age who have already entered menopause, on the other hand, the number of young women who get sick represents a small portion of all cases. It is estimated that 2 to 5% of cases occur before the age of 35. The studies are still divergent, however, what is known is that most of the time in young women the CM is associated with a worse prognosis, as they may present in their clinical and pathological association a more biologically aggressive disease. In young women, CM tends to be hereditary, with mutations such as brca 1 and 2 genes. Because it is of a less favorable prognosis, treatments tend to be more aggressive, while malignant diseases of secondary causes are more common. **OBJECTIVE:** This study aims to review the scientific literature on Breast Cancer in Young Women. **METHODOLOGY:** This work is a review of bibliographic literature. The data extracted in the research were from the US National Library of Medicine (PubMed) and Scientific Electronic Library Online (SciELO) with the descriptors: Breast Neoplasms, Young Adult, Adolescent and Immunophenotyping, according to the Descriptors in Health Sciences (DeCS). A total of 235 articles were found and after inclusion and exclusion criteria, 6 articles were used. Those used for inclusion: articles in English, Portuguese, or Spanish, between 2009 and 2021, and that were available in full and for free online access. **DISCUSSION:** The clinical characteristics of breast neoplasms in younger women differ from those that arose later, so age in the diagnosis of breast cancer remains the most important variable in determining prognosis. These tumors in patients under 40 years of age have a higher histological degree, an unfavorable immunohistochemical profile, and a high mortality rate compared to older women, and are more often classified as a triple-negative breast cancer (TNBC), i.e., estrogen receptor (RE), progesterone receptor (PR), and human epidermal growth factor receptor-2 (HER2-) negative. In addition, young women are more likely to have local recurrences, be diagnosed at a more advanced stage, and have a 5-year survival worse compared to their older premenopausal counterparts. **CONCLUSION:** Breast carcinomas of young women have more aggressive clinical, pathological, and molecular characteristics, when compared to women over 50 years of age. This large-scale genomic analysis illustrates that breast cancer that arises in young women is a unique biological entity driven by the unification of oncogenic signaling pathways, is characterized by lower hormonal sensitivity and greater expression of HER-2 / epidermal growth factor receptor (EGFR) and justifies additional studies to offer this group of women better prognoses and preventive and therapeutic options.

Keywords: breast neoplasms, young adult, adolescent, immunophenotyping.

06. CHANGES IN EATING HABITS AND LIFESTYLE OF CHILDREN AND ADOLESCENTS IN QUARANTINEHITZSCHKY L.B¹; MIOTO E.B¹; NAKAMURA; G.S.G¹; ROSSI, P¹; YEUNG, W.K.C¹; NAUFEL, H.G¹.¹Universidade de Mogi das Cruzes.

INTRODUCTION: The COVID-19 pandemic has impacted different spheres of human life worldwide. In children, the disease in its symptomatic form is uncommon, and when it occurs, it usually has a

mild clinical picture, although more severe cases have been reported in the scientific literature. In this light, disease prevention measures were implemented in order to contain the spread of the virus. As a result, more than 2.6 billion people have been subjected to home confinement. Such circumstances motivated individuals in quarantine, including children and adolescents, to change their lifestyles and eating habits. **OBJECTIVE:** To identify the main changes in eating habits and lifestyle in children and adolescents in quarantine at national and international level. **MATERIALS AND METHODOLOGY:** this is a narrative review carried out according to research involving changes in eating habits and lifestyle of children in quarantine. The electronic databases used were: Scientific Electronic Library Online (SciELO) and PubMed, and Europe PubMed Central. The keywords used were: covid-19, children, sedentary behavior, dietary intake; physical activity; obesity; behavior changes; quarantine; food habits. Inclusion criteria: national and international journals published between 2018-2021 and that studied individuals in the age range: 1 month to 21 years of age. Exclusion criteria: articles that do not establish any relationship with the proposed topic, that did not meet the inclusion criteria and review articles. These were analyzed by 5 researchers and discussed later. **DISCUSSIONS AND RESULTS:** there was an increase in the weight of children and adolescents; decreased time and frequency of physical activities; increased consumption of high-calorie and unhealthy foods; increased sleep time; change in sleep pattern; visual impairments; increased screen time; behavioral and psychological changes; increased consumption of healthy foods; decreased compliance with World Health Organization (WHO) movement guidelines; relationship between caloric and unhealthy eating and weight gain; increased screen time and anxiety and visual impairments; existing contradiction between BMI and the risk of a more serious infectious condition of COVID-19; similarity between changes in eating habits and lifestyle during the pandemic between children and adults. **CONCLUSION:** Based on the changes found, it is recommended that policies be created that mitigate the high mitigation restrictions, ensuring more open spaces for children to move. The importance of participating in the distance learning program, conducting PE online and the relevance of parents in structuring a healthy routine for the child, with rules for the use of screens, is highlighted.

Keywords: COVID-19; kids; teenagers; eating habits, lifestyle.

07. COMPARISON OF THE KNOWLEDGE OF LAY PEOPLE ABOUT BASIC LIFE SUPPORT IN A 10-YEAR PERIODALMEIDA, L. P. ¹; RAVAGNANI, A. R. ¹; RIBEIRO, B. O.¹; SOUZA, M. R. P¹.¹Universidade de Mogi das Cruzes.

INTRODUCTION: Deaths related to diseases of the cardiorespiratory system correspond to approximately 31% of deaths in the world. From this current context, it is known that sudden cardiac arrest (SCA), define as the absence of the heart's effective mechanical activity and that Basic Life Support (BLS) actions are essential to reverse this clinical condition with minimal sequelae. The justification for this is the direct relationship between time and the preservation of myocardial and cerebral functions, as well as the reduction of morbidity and mortality rates and the influence on prognosis. The stages of the BLS include an acknowledgment of the arrest, the absence of thoracic movement and air noise during breathing, and cardiopulmonary resuscitation (CPR) maneuvers. Two studies show that good care in an extra-hospital environment decreases the

chances of neurological sequelae and deaths resulting from SCA by two to three times. However, only about 30% of these victims are effectively assisted, since few individuals know how to correctly recognize and provide the first care. **OBJECTIVE:** To assess whether the lay population is qualified to perform the first aid to a SCA victim. **MATERIALS AND METHODOLOGY:** Selection of articles in the Scielo database based on the keywords: Basic Life Support; First Aid; Cardiorespiratory Arrest. Of these, two publications with an interval of 10 years were chosen to assess whether there was an increase in the level of knowledge of the laity about the procedures of Basic Life Support. **DISCUSSION:** Through these data, a descriptive-exploratory study in which 385 people over 18 years of age were interviewed about their knowledge of BLS. Of these, 75.8% knew to verify the presence of respiratory movements correctly, however, only 16.4% fully knew the maneuvers to facilitate breathing and only 9.9% answered correctly to the question about the ventilation technique. Another survey with university employees showed that 67.7% of respondents did not know the meaning of BLS, being somewhat more evident in men, black, with completed higher education, with up to three minimum wages and post not related to teaching. This study also pointed out that 61.5% of this population does not feel properly oriented to perform the procedures. This study demonstrated the need for greater orientation of the population in relation to CPR techniques, and it is more appropriate to start teaching at school. **CONCLUSION:** If a SCA occurs in an extra-hospital environment, the first measures will be taken by laymen, in most cases, they have no training on BLS at the level of course or graduation. In this scenario, it is important that the population is able to carry out this care, since they are the first to reach the victim. From the elaboration of this review, it is identified the need to reinforce the dissemination of the importance of Basic Life Support of SCA victims to the adult population in general, since the two articles analyzed, one from 2009 and the other from 2020, demonstrate that there has been no progress of this knowledge in more than a decade.

08. COVID-19 AND PREMATURETY: A NARRATIVE REVIEW

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INTRODUCTION: In December 2019, a new type of coronavirus, called SARS-CoV-2, which causes COVID-19 and the current pandemic, was detected. This virus can cause severe lung diseases, mainly affecting people with comorbidities, immunocompromised and pregnant women. One of the possible complications in pregnancy is prematurity (a baby born with less than 37 weeks of gestation), and this condition can have a considerable impact on children's life, as a preterm child is clinically fragile and can develop several health problems and severe complications. Considering this scenario, researchers have been trying to establish a possible relationship between SARS-CoV-2 infection during pregnancy and preterm birth. **OBJECTIVE:** To analyze if there is, until this moment, a relationship between the cases of pregnant women with Covid-19 infection and premature births. Describe the consequences to the children of mothers infected by COVID-19. **MATERIALS AND METHODOLOGY:** Articles from the Scielo and PubMed databases were analyzed for this narrative review. The descriptors "covid" and "premature" were chosen in Scielo, and in Pubmed the descriptors were "Preterm Birth" and "COVID-19" with full free publication filter, resulting in 29 articles. After the titles and abstracts were analyzed, five articles were selected and used in the results and discussion.

Review articles or articles that did not address the topic covid and/or prematurity were not included in the analysis. **DISCUSSION AND RESULTS:** Nowadays, a possible correlation between cases of pregnant women with COVID-19 and prematurity has been studied, as children in this condition are more susceptible to developing various diseases and, in the future, may have impaired neuropsychomotor development. Among the five articles that fit into this narrative review, one points to the existence of a relationship between maternal infection by COVID-19 and premature birth; one claims that there is no relationship; and two articles describe that the pandemic had consequences on child development and monitoring of the health of these children. A survey found prematurity rates of 26.4% among newborns of infected mothers. While in another study there was no correlation between infection and prematurity. Considering that, the existence of a relation between maternal infection by COVID-19 and premature birth cannot be affirmed. **CONCLUSION:** From this narrative review, a correlation between the cases of pregnant women with COVID-19 and prematurity cannot be concluded. However, the articles analyzed show that the absence of guidance, interrupted care, delayed vaccinations, financial difficulties, reduced social support and emotional stress during the COVID-19 pandemic caused damage to the development of premature babies, highlighting the importance of pregnant women to maintain their protective measures against the coronavirus and follow up with prenatal care and childcare after the child's birth. Considering that the topic analyzed is very recent and studies are still being carried out, the proposed analysis is based on articles published until this moment, which does not exclude the possibility of evidence in future studies.

KEYWORDS: SARS-CoV-2; Premature Birth; Child Development

09. COW'S MILK PROTEIN ALLERGY: FROM DEFINITION TO TREATMENT

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INTRODUCTION: Cow's milk protein allergy, the most common cause of allergy during the first year of life, with an increasing prevalence of 2.5% in children, is an abnormal immune response, mediated by antibodies and/or cells, being: IgE mediated, unmediated IgE or mixed type reaction. According to the pathophysiological mechanisms involved, adverse reactions to food can be classified as immunological or non-immunological, and are described as a multifactorial pathology. The non-immunological reactions depend mainly on the ingested substance (for example: bacterial toxins present in contaminated food) or on the pharmacological properties of certain substances present in food. Immunologic reactions depend on individual susceptibility. **OBJECTIVES:** To describe the definition, classification, pathophysiology, diagnosis, and treatment of cow's milk protein allergy, in view of its increasing prevalence. **MATERIALS AND METHODOLOGY:** For this study, searches were conducted in 2 bibliographic databases - PubMed and SciELO. From these platforms, a systematic review of the collected data was carried out, using scientific articles from the last 5 years, in Portuguese and English versions. Concomitantly, the research was based on the 2018 Brazilian Consensus on Food Allergy (Part 1 and 2). **DISCUSSION:** Cow's milk protein allergy is determined by genetic inheritance (40-80% increased risk) linked to dietary factors (early weaning, vitamin D insufficiency, reduced consumption of omega-3 polyunsaturated fatty acids) and behavioral factors (higher incidence in children of

pregnant women who smoke and/or alcohol during pregnancy). The diagnosis is validated from the clinical history, prick test and specific IgE serum dosage (ImmunoCAP® System). In some situations, oral provocation test and atopic food contact test are performed. The clinical manifestations were shown to vary according to the immunological mechanism involved: IgE mediated - urticaria, angioedema, flushing, bronchospasm, nasal coryza, oral allergy syndrome, diarrhea, and anaphylactic shock (the latter with a frequency of 10%, with greater severity in asthmatics); mixed reactions: atopic dermatitis, asthma, eosinophilic esophagitis, eosinophilic gastritis/gastroenteritis; non-mediated IgE - herpiform/contact dermatitis, gastroesophageal reflux, Helner's syndrome, food protein-induced enterocolitis/protocolitis syndrome. As for treatment: exclusion diet, use of hypoallergenic antihistamines (IgE mediated reactions) and systemic corticosteroids. Currently, oral and sublingual immunotherapy are areas of active investigation. **CONCLUSION:** Although 80% of patients with Cow's milk protein allergy in the first year of life develop tolerance by five years of age, there is a need for early diagnosis so that hypersensitivity is identified, treated, and comorbidities are avoided. Moreover, prevention is extremely valuable: use of hydrolyzed or partially hydrolyzed formulas (when exclusive breastfeeding is not possible), and introduction of solid foods not delayed beyond 4-6 months of age.

KEYWORDS: Milk hypersensitivity; Classification; Diagnosis; Behavior.

10. FAILURE TO ADHERE TO THE TREATMENT OF SYSTEMIC ARTERIAL HYPERTENSION IN FAMILY HEALTH UNITS

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INTRODUCTION: Systemic arterial hypertension (SAH) is a pathology defined by high levels of systemic blood pressure (above 120/80 mmHg) and is considered a setback in primary care, as it is associated with metabolic and functional changes in target organs. **OBJECTIVE:** Analysis and identification of possible causes of failure to adhere to the treatment of SAH among people over 60 years enrolled in the territory of the Airport II Family Health Unit (FHU). **METHODOLOGY:** Observational cross-sectional study based on the analysis of data through the application questionnaire in a group of 30 people aged 60 years or more, carriers of SAH, attended at the Family Health Unit Aeroporto II in Mogi das Cruzes. Results: The prevalence was observed among the following groups of elderly people carriers of SAH: patients between 61 and 70 years, white, women, people with a low education level sedentary and who have an incorrect diet. The medication forgetfulness was the main cause of treatment interruption. Diabetes was the most prevalent disease associated with SAH among patients. **DISCUSSION:** The failure of SAH treatment can be related to several factors, among them most are behavioral and are associated with habits acquired during life, such as unhealthy eating and sedentary lifestyle. The low education level of the population in question also harms the treatment, as it makes it difficult to understand the disease and the care to be taken. **CONCLUSION:** The effectiveness of the treatment of SAH is closely linked to healthy habits and understanding about the disease.

Key words: Systemic arterial hypertension; Treatment; Elderly.

11. IMPACT OF RESPONSIBLE SELF MEDICATION OF ANALGESICS AND ANTI-INFLAMMATORY ON DIFFERENT POPULATIONS

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INTRODUCTION: Self-medication is the consumption of medication without a proper medical prescription. Its practice can cause individual and collective problems, since it increases the costs of the health system and can cause injuries due to the erroneous consumption of the medicine. Self-medication is due to the combination of easy access to medicines, not prescribed by the doctor, added to the purchasing power of patients, especially anti-inflammatory and analgesics, which can lead to drug abuse and, therefore, more recurrent in populations of countries more developed. Several drugs are freely marketed, without the need for a prescription, this factor linked to the "marketing" of drugs, can contribute to self-medication and harm to the patient. Elderly people may be more susceptible to the polypharmacy process (daily consumption of 4 or more medications), especially due to senescence, which contributes to the higher consumption of medications, ranging between 2 and 5 per day, which is a reason for warning since it may pose health risks. **OBJECTIVE:** Analysis of the impact of self-medication on the population. **METHODOLOGY:** This is a literary review, using filters: Portuguese and English, complete and corresponding to the last 5 years. The platforms Scielo, Medline, Academic Google and Lilacs and the descriptors "Self-medication", "Analgesics" and "Anti inflammatory" were used. A total of 4,731 articles were identified and, after the filters, 104 were identified, after reading the titles and abstract 10 were selected at the end of the research, which covered the subject, 05 articles in English and 05 in Portuguese. **RESULTS AND DISCUSSION:** Polypharmacy can vary between populations. In the selected studies, the age range ranged from 11 to 69 years, from different countries and ethnicities. Some surveys have shown a higher prevalence of self-medication in the female population. There was no report of a higher prevalence of self-medication in the male population compared to the female population in the studies. Much of the population studied practiced self-medication, especially the elderly, which could cause long-term damage such as gastric ulcers, kidney and liver problems. **CONCLUSION:** The use of over-the-counter medications entails unnecessary social and economic harm. The most used anti-inflammatory and analgesics are acetaminophen and dipyrone. The use of such medications must follow medical advice.

Keywords: Self-medication, Analgesics and Anti-inflammatories.

12. LACK OF EFFECTIVE TREATMENTS FOR SPORADIC CREUTZFELDT-JAKOB DISEASE: A SYSTEMATIC REVIEW

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INTRODUCTION: Prion Diseases, or Transmissible Spongiform Encephalopathies (TSE), are rare and fatal diseases that affect the Nervous System and are caused by the accumulation of the abnormal protein, Prion Scrapie (PrPsc). The modified form of a protein in brain tissue called Normal Cellular Prion (PrPc) is called PrPsc. PrPc is converted to its altered form, PrPsc, which causes it to accumulate in brain tissue, causing spongiform lesions that result in death. Several disorders are found in the TSE group, with Creutzfeldt-

Jakob Disease (CJD), in its sporadic form, being the most common and prevalent. **OBJECTIVE:** Identify possible treatments for Sporadic CJD. **METHODOLOGY:** Systematic literature review, using the following descriptors: "Sporadic Creutzfeldt-Jakob disease" and "Treatment" in the Pubmed and Cochrane platforms. A total of 330 articles were identified and after applying the filters: Articles in English and opting for clinical trials, 4 were selected. **RESULTS:** CJD is the most common form of prion disease, with an annual incidence of 0.5 to 1 case/million. Its sporadic form represents 85% of CJD cases, being lethal in the absolute number of cases. Several studies are being carried out in order to improve the quality of life and increase the survival of patients with CJD. Four clinical trials were carried out, 2 evaluating Quinacrine and 2 Doxycycline, but without satisfactory results compared to the control group. **DISCUSSION:** The studies carried out with the two drugs did not have favorable results regarding survival and quality of life, although they were well tolerated by patients. Other drugs are being tested, with good results in vitro, and some in clinical trials, such as Flupirtine in a randomized double-blind clinical trial, which reduced cognitive deficits and dementia in patients with CJD by a consequent decrease in apoptotic neuronal deterioration caused by PrPsc. Even with the observed results, it is necessary to formulate larger trials, with a larger number of patients. **CONCLUSION:** Sporadic Creutzfeldt-Jakob Disease has a fatal and rapid progression. In this sense, many medications were analyzed with the aim of extending the patient's survival or regressing the disease. Some studies showed good results in vitro, using quinacrine and doxycycline, but unfavorable results in clinical trials.

Keywords: Sporadic Creutzfeldt-Jakob disease. Treatment, Prion

13. NEURAL PLASTICITY AND PHYSICAL EXERCISE

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INTRODUCTION: The Central Nervous System (CNS) is composed of a neural network with specialized cells that receive and transmit nerve impulses at all times. When an injury occurs, this neural network becomes disorganized and the CNS starts a process of regeneration and reorganization of these cells, called neural plasticity, where, in the presence of this injury, it uses this capacity to try to recover the lost functions. Studies show that the brain and some excitable tissues are malleable and change their response according to their interaction with the environment and that physical exercise can induce the plastic effect in the CNS, which may have a beneficial effect. **OBJECTIVE:** The objective of this work is to emphasize the importance of regular physical exercise and how much it can help positively in neural plasticity and also in the quality of life of individuals. **METHODS:** Literature review on the importance and benefits of physical exercise and neural plasticity. For the preparation of this work, a survey of scientific articles published in the last 10 years (2011-2021) was carried out on the SCIELO, BVS, and scientific journals platforms. **RESULTS:** Twenty articles were selected that specifically corresponded to the intended theme and that were used to compose this review. **DISCUSSION:** Plastic changes occur in the brain after an injury to compensate for the loss of some function in impaired areas, and may occur in regions other than the cortex, and may occur in regions such as the thalamus and brainstem. Cellular mechanisms may be responsible for this plasticity through an intensification or decrease of synapses. However, these processes can take place over several periods, but not always mutually. Studies show that the practice of regular physical exercise can induce neural plasticity in motor areas,

such as the basal ganglia, cerebellum and red nucleus. This increase in cellular and synaptic plasticity mechanisms promoted by physical exercise contributes to a beneficial effect by reducing degeneration and promoting recovery from brain damage. Another mechanism in which physical exercise is involved is the action of neurotrophic factors, which is associated with increased release and synthesis of some factors, such as the Brain Derived Neurotrophic Factor (BDNF), which can have its levels increased under the effect of a single exercise session. BDNF exerts several effects on the central nervous system, such as neuron growth, differentiation and repair. It is produced throughout life in order to preserve essential functions such as memory and learning. It is believed that the elevated BDNF level may be related to better brain health and its decrease with some illnesses such as depression, schizophrenia, Parkinson's disease and so on. Studies show that regular physical exercise increases BDNF production resulting in improved memory, executive functions and overall health. **CONCLUSION:** Our brain is constantly undergoing changes, thus there is a need for specific studies to better understand the topic and consequently the plastic changes during the reorganization and recovery of nervous functions in human beings.

14. OMEGA-3 IN THE TREATMENT OF GESTACIONAL HYPERTRIGLYCERIDEMIA: CASE REPORT

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INTRODUCTION: During pregnancy, increased levels of triglycerides, cholesterol and phospholipids are common, due to the metabolic demand during pregnancy and the hormones involved in it. Familial gestational hypertriglyceridemia (FGH), however, is usually associated with obesity and gestational diabetes and has an increased risk for acute pancreatitis, pre-eclampsia and preterm birth. Aiming at reducing the levels of fatty molecules, omega-3, an essential polyunsaturated fatty acid, has been shown to be effective in the treatment of this pathology according to literature, reducing the risks surrounding the mom and her baby. **CASE EXPOSURE:** Patient, pregnant woman, with a family and personal history of hypertriglyceridemia, was followed up with a gynecologist-obstetrician and referred to a neurologist due to the diagnostic hypothesis of FGH. She underwent treatment with docosahexaenoic acid (DHA) and eicosapentaenoic acid (EPA), with positive follow-up of her condition and cesarean section without complications. **CONTEXT AND OBJECTIVE:** FGH has serious implications for the woman and the fetus, and may lead to serious and irreversible pathologies. The traditional therapy used for the treatment of this condition can bring risks to the gestational development, therefore, omega-3 appears as an alternative to reduce serum levels of triglycerides and risks during and after pregnancy. Thus, the case report aims to assess the clinical relevance of omega-3 in the treatment of FGH and encourage discussions on the use of alternative treatment. In addition, discuss the possibility of introducing triglyceride tests in the prenatal routine. **EVOLUTION:** The patient had pre pregnancy triglyceride values of 376 mg/dL. In the medical attempt to control, she started using supplementation with 250 mg of DHA and 50 mg of EPA, 1 tablet a day. In the first trimester of pregnancy, the patient was prescribed 200mg of DHA in 1.2g capsules. Although the request for triglycerides is not part of routine prenatal exams, in the second trimester of pregnancy, the values of vitamin D and thyroid stimulating hormone (TSH) requested, could

not be evaluated by the laboratory, due to the lipemia presented in the test results. Then, with this incidental finding, new tests collected attested triglyceride values equal to 1131 mg/dL. With this result, there was a referral to the nutrologist, who prescribed a low-calorie and low-fat diet and increased the supplementation to 2180 mg of DHA and 2970 mg of EPA. The next exam showed a triglyceride value equal to 596 mg/dL, without further increases until the end of pregnancy. The other values of LDL, HDL and VLDL remained unchanged during the 3 gestational trimesters. **DISCUSSION:** In the 26th week of pregnancy, the patient presented a condition classified as severe with FGH, with a triglyceride value of 1131 mg/dL, thus having a high risk of developing acute pancreatitis and other complications already mentioned. Thus, supplementation with 2180 mg of DHA and 2970 mg of EPA was introduced, since the traditional treatment for this pathology is with fibrates and inadvisable for pregnant women due to the high incidence of adverse events. Supplementation with omega-3 was successful in reducing triglyceride levels and preventing serious and irreversible pathologies. **CONCLUSION:** Based on the case reported, it is possible to conclude that supplementation with omega-3 was effective in the treatment of FGH, reducing serum triglyceride levels and preventing the occurrence of acute pancreatitis, pre-eclampsia and preterm birth. Thus, further studies and discussions about the use of alternative treatment to reduce triglycerides during pregnancy are necessary.

Keywords: hypertriglyceridemia; pregnancy; ômega-3; prenatal care.

15. PENECTOMY: A LITERATURE REVIEW IN THE SCIELO DATABASE

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INTRODUCTION: Penectomy is characterized as penile amputation surgery, which can be partial, total or emasculation. It is a non-preserving treatment for different cases of deep cancers, penile necrosis and burns, emphasizing that early diagnosis, especially in cases of cancer, when there is a better prognosis, the tumor can be treated with antibiotics or chemotherapy, without need for removal of the penis. In addition, it can be used to remove the organ in sex reassignment surgeries, preceding vaginoplasty. **OBJECTIVE:** It is expected to observe the correlation of data obtained in the previous study, with articles available in the literature, presenting articles on the various reasons for performing penectomy. **MATERIALS AND METHODOLOGY:** The study is characterized as a literature review without any type of intervention by the researchers. Thus, only the analysis of data contained in academic articles on penectomy in humans will be carried out, in the SciELO database, in Portuguese, Spanish and English. The number of articles that refer to penectomy on the SciELO platform is 19, with 1 article per year of publication being excluded, 3 articles for dealing with penectomy in animals, 1 article for dealing with another surgical technique, leaving 14 for analysis. **DISCUSSION AND RESULTS:** Of the 14 articles analyzed, 11 had some type of cancer, including squamous cell carcinoma of the penis (the most reported cancer - 7 articles), penile melanoma (2 articles), sarcoma (1 article), leiomyosarcoma (1 article), it was observed that conservative therapeutic methods are the most chosen, however, due to late diagnosis and the infiltration of cancers in patients, physicians resorted to penectomy in order to obtain greater therapeutic success and avoid recurrences. In addition to the articles that cited cancer; 2 mentioned necrosis and 1 mentioned burn. **CONCLUSION:** the research on penectomy, initially, sought to search

in the literature for the presence of articles on this surgical procedure in the process of sexual reassignment, but no article was found about it, showing an important and current gap for the performance of studies. The number of articles about cancers shows the importance of an early diagnosis, for a better prognosis and therapy that maintains the patient's quality of life, even though it is a cancer of low incidence. As for necrosis and burns, when not associated with cancer, it shows a deficiency in the search for a medical evaluation and also the application of safety standards, thus aggravating cases that could be treated without penectomy, or even do not exist.

KEY WORDS: Penectomy, Penile câncer, Penile necrosis, Penile burn.

16. PHYSICAL ACTIVITY AT OLD AGE: A NARRATIVE REVIEW

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INTRODUCTION: With the growing increase in the elderly group, greater attention to preventive medicine is needed, since in this age group there is an increase in the predisposition to Chronic Non-Communicable Diseases (NCDs), which are the main cause of morbidity and mortality in the world and about 80% of these pathologies could be avoided with changes in behavioral factors. According to the World Health Organization's health promotion guidelines, the practice of physical exercise is more relevant to the promotion of a healthier lifestyle and a better quality of life. However, there is still an increase in physical inactivity in the elderly group, which predisposes to the emergence of disabilities and, therefore, reduces the quality of life and favors the growth of CNCDs. **OBJECTIVE:** To relate the incidence of diseases in the elderly who practice and do not practice physical activity. **MATERIALS AND METHODOLOGY:** This is a narrative review article, with a survey carried out in national and international journals published from 2016 to August 2021, available in the PubMed database. The following descriptors were used: physical exercise, aging, life style and elderly, with the help of the Boolean marker AND. The inclusion criteria for the selection of articles were: they are national and international journals published in the established period, that are published in the database and that deal with the benefits of physical exercise in the quality of life of the elderly. Those who did not establish any relationship with the proposed theme, did not meet the selection criteria and those that were not found in full were excluded from the research. 119 articles were analyzed, selecting 19 articles to be part of this review after the relevance test, as they met the established criteria. **DISCUSSION AND RESULTS:** The regular practice of physical exercise is essential for the maintenance of health, functional independence and quality of life in old age. Healthier behaviors lead to improvements in aspects of physical and emotional well-being, describing improved confidence in exercise and greater independence. Furthermore, physical training is recommended to improve sleep quality and modulation of low-grade systemic inflammation in the elderly, and to increase muscle strength. In addition to reducing risk factors for dementia, motor impairment, sarcopenia, mortality rate from cardiovascular disease, changes in fasting serum insulin and the rate of increase in body fat. **CONCLUSION:** It is concluded from this narrative review that the practice of physical exercise is essential for the elderly in order to improve their muscle strength, mobility and quality of life, in addition to reducing inflammation, body fat and the risk of common diseases

in old age. The importance of further studies on the influence of physical activity related to other diseases that have not yet been studied is also highlighted. It is essential to implement public policies that encourage the practice of physical exercise for the elderly in order to promote healthy aging.

KEYWORDS: Physical Exercise; Aging; Quality of life

17. POSTPARTUM HEMORRHAGE IS THE SECOND MAIN CAUSE OF MATERNAL MORTALITY IN BRAZIL: HOW TO CHANGE THIS REALITY?

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INTRODUCTION: Postpartum Hemorrhage (PPH) is the second main cause of maternal Mortality in Brazil, and is responsible for 140.00 deaths every year worldwide. The PPH is an important direct obstetric death cause, and is classified as a blood loss beyond 500 mL in the first 24h after the child's birth in vaginal delivery, and 1L in case of C-section. Considering that is usually a preventable death cause, it is concerning that PPH represents a high morbidity and mortality in Brazil, characterizing a scenario that needs to be understood and changed. **OBJECTIVES:** Understanding possible causes of the high mortality due to Postpartum Hemorrhage in Brazil, and suggesting possible management ways to solve this problem. **MATERIALS AND METHODOLOGY:** Narrative literature review, based on official documents, one from Pan American Health Organization and World Health Organization, and another from Oswaldo Cruz Foundation with the Ministry of Health, and articles available on Scielo platform. The research on Scielo was carried out using the keywords "Postpartum Hemorrhage" and "Maternal mortality", with the s of publication in Brazil in the last 20 years, resulting in 65 articles. A total of 5 references were chosen. **DISCUSSION AND RESULTS:** Based on this literature review, it was possible to observe that the high mortality caused by PPH in Brazil has multifactorial causes, from the insufficient training of the multidisciplinary team to the inadequate hospital structure. Previous identification of risks and diseases can avoid hemorrhage or reduce its severity, indicating that prenatal care is essential and agility in the diagnosis and correct management of PPH by the medical team is critical for maternal survival. It is also necessary that the hospital has an appropriate infrastructure; otherwise, postpartum women have a higher mortality chance. The PPH is identified usually based on the visual estimation of blood loss by the compresses used during the delivery and/or the patient clinical manifestations, and its main causes are known by the mnemonic of the 4 T's: Tone, Trauma, Tissue and Thrombin; generally, conservative management is the first option in PPH for uterine atony, based on uterine massage and uterotonic medications (oxytocin, methylergonovine or misoprosthol). If they're not effective, invasive non-surgical (intrauterine balloon tamponade) or conservative surgical techniques (B-lynch compression suture) are chosen, and in last case, hysterectomy. Nowadays, some public policies and guidelines were created in Brazil to reduce maternal mortality, like the "Estratégia Zero Morte Materna por Hemorragia Pós-Parto" and "Rede Cegonha" policy, but were not sufficient to change this scenario, because they still need to be widespread and integrated. **CONCLUSION:** It is possible to infer that the high maternal mortality by Postpartum Hemorrhage can be attributed to the lack of adequate infrastructure in hospitals, including supplies (blood bank, medication, etc.), and training of the multidisciplinary team in many Brazilian regions, being necessary financial investments in these

factors, and ensuring a prenatal care to every woman. A fast and efficient management is decisive to stabilize the patient's clinical condition and to preserve maternal life. Every woman has the right to an integral healthcare in every phase of life.

KEYWORDS: Postpartum Hemorrhage, Maternal Mortality and Women's Health.

18. SELECTION OF SURGICAL APPROACH IN THE CORRECTION OF ABDOMINAL AORTIC ANEURYSM ASSOCIATED WITH HORSESHOE KIDNEY: OPEN OR ENDOVASCULAR REPAIR

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INTRODUCTION: The Abdominal Aortic Aneurysm (AAA) is a focal and permanent dilatation of the abdominal aorta, with an increase of at least 50% of the normal artery diameter, or when the diameter of the affected segment is greater than or equal to 3cm. Its screening process is important because there is a high mortality rate with its rupture and a low mortality rate after elective surgical correction. The majority of AAAs are infrarenal and the common iliac arteries are often involved. The horseshoe kidney (HK) is the most common fusion abnormality in the population and affects 0,25% of it. The degree of renal fusion is variable and the majority is fused by the lower poles of the kidneys. The isthmus and its outstanding characteristics are: ectopias, malrotation and vascular alterations. Before any intervention procedure, a good functional evaluation of the renal isthmus is necessary, as it may contain a functioning parenchyma or correspond to fibrous tissue. The Association of AAA and HK occurs in about 0,12% of AAAs and play an important role in preoperative planning, with a lot of factors to be considered in the treatment. **OBJECTIVE:** Analyse the surgical techniques used to correct AAA associated with HK and demonstrate the difficulties to choosing one of them based in the literature. **METHODS:** This is a literature review using articles from SciELO, PubMed, Lilacs and Google databases, in addition to the use of bibliographical references, such as the books: C. J. Brito, Cirurgia Vascular, Endovascular e Angiologia e Sobotta, Atlas de Anatomia Humana. **DISCUSSION:** AAA repair in open surgery corresponds to several types of approach. The transperitoneal approach promotes good exposure of the kidneys and aneurysm and the possibility of reimplantation of arteries of more than 2mm in diameter from the anomalous renal irrigation directly into the body of the prosthesis or by making the Carrel patch, but the renal isthmus makes the aneurysm exposure inadequate. The retroperitoneal approach avoids manipulation of the isthmus and the urinary tract, but hinders and limits access to the right common iliac artery. The endovascular approach, on the other hand, has the advantage of avoiding anatomical complexity, but due to the highly variable renal vascularization, with the placement of an endoprosthesis, renal arteries important for the supply of the renal parenchyma may be excluded, with a greater risk of postoperative renal infarctions and consequent loss of kidney function. **CONCLUSION:** No ideal technique for correction has been established, and the lack of literature is a great difficulty. In the few cases reported in the world, there is a great diversity of techniques used and each case must be analyzed in a unique way, in order to receive the best surgical approach.

Keywords: Abdominal Aortic Aneurysm, Horseshoe Kidney, Endovascular Surgery.

19. THE DOWN SYNDROME THE MOST FREQUENT OPHTHALMOLOGIC CHANGES ASSOCIATED: A LITERATURE REVIEW

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INTRODUCTION: Down Syndrome (DS) corresponds to one of the most common genetic disorders in humanity, being characterized by an error in the distribution of cell chromosomes during gametogenesis, resulting in trisomy 21. Among the various phenotypic characteristics, ocular alterations are of greater importance in the sense of the study, with a higher occurrence of small, oblique eyes with oblique eyelid folds upwards and existence of an epicanth. They are also more susceptible to: refraction errors such as hyperopia; strabismus; crystalline accommodation; cataract and keratoconus. **OBJECTIVE:** the present study proposes a bibliographic review whose objectives are: to analyze and correlate Down syndrome with the main ocular alterations found, and to compare these alterations in individuals with Down syndrome with individuals without genetic disorder. **METHODOLOGY:** The research was a study conducted in an analytical, qualitative, cross-sectional and bibliographic way through the review of articles from the Scielo and Pubmed databases, and among the key words used are: "ophthalmology down syndrome syndrome" (14 results); "Down syndrome and ophthalmology" (329 results); "Down syndrome" (688 results); and "down syndrome" (30,701 results). Twenty-three articles were selected in Portuguese and English. No additional filters were included. Moreover, the inclusion criteria evaluated were to contemplate content that added to the discussion about the theme "Down syndrome and eye changes". **DISCUSSION:** Down syndrome is associated with ophthalmologic symptoms that are not addressed in an integrative manner, such as refractive errors, anatomical anomalies and the variety of visual disturbances. The literature study showed a higher prevalence of refraction errors - such as myopia, astigmatism, hyperopia and strabismus - in patients with the syndrome, especially in preschool and school ages. In relation to eye pathologies, cataracts, keratoconus and blepharitis are the most common. There was also a higher incidence when relating to typical individuals of DS. In addition, there were some anatomical anomalies of higher occurrence in down carriers: in cases of anatomical obstruction of the lacrimal pathways, there is a greater presentation of bilateral epiphore symptoms. **CONCLUSION:** The prevalence of ophthalmologic alterations associated with Down syndrome was shown by the articles. This interferes in the way of living of these individuals, so it is essential to meet their needs to better insert them into the social spheres. In addition, it is important to identify the most frequent pathologies to improve knowledge about it, and in order to treat them early and avoid complications.

Key words: Syndrome. Down. Alterations. Disorders. Ocular.

20. THE RELATIONSHIP BETWEEN CLIMATE CHANGE AND THE INCREASE OF DIARRHEAL DISEASES IN BRAZIL.

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INTRODUCTION: Diarrheal diseases are characterized by a reduction in the consistency of the fecal bolus and/or by a greater number of bowel movements per day, which leads to dehydration and

electrolyte imbalance, which can lead to death. It is observed that climate change has a minor influence on the incidence and spread of diarrheal diseases, and that these diseases have more impact in underdeveloped countries, such as Brazil. Complex to the vast national territory, the relationship between diarrheal diseases and climate change involves a particular dynamic that influences the health situation of Brazilians. **OBJECTIVE:** To study the correlation between diarrheal diseases and climate change. **MATERIALS AND METHODOLOGY:** Literature review study, using Capes Journal and Academic Google platforms. In Capes Journal, the following descriptors were used: "Diarrheal Diseases", "Climate" and "Hospitalizations"; and in Academic Google, the descriptors were used: "Diarrheal Diseases", "Climate", "Hospitalizations" and "Climate Changes". A total of 307 articles were identified and, after applying the filters (articles in Portuguese between 2011 and 2021) and reading the titles and abstracts, 4 articles were selected. **DISCUSSION:** Infectious diarrheal diseases are caused by pathogens such as viruses, bacteria and protozoa, and their main physiological effects are dehydration and malnutrition. Rotavirus is considered the most common viral etiological agent that affects children and young people. Among the most observed bacterial causes are: Escherichia coli and Salmonella and Shigella species. Parasitic infections present species of Giardia and Entamoeba histolytica. Climate change can have an impact on human health, as the effects of heat waves encourage bacterial multiplication in food and water, combined with poor population hygiene, increasing the number of cases. It is estimated that diarrhea ranks first among diseases that are caused by environmental and climatic factors, and that 94% of the burden of diarrheal diseases is attributable to environmental conditions, resulting in more than 1.7 million deaths per year. According to the World Health Organization, diarrhea is the second leading cause of death in low-income countries. In Brazil, diarrheal diseases pose a serious public health problem, with high rates of deaths from these diseases being recorded, especially in children under 1 year of age and, mainly, in the North and Northeast regions of the country. It is evident that the spatial patterns of periods with the highest number of hospitalizations for diarrheal diseases in Brazil are mostly associated with variation in the distribution of precipitation between regions. **CONCLUSION:** From the analysis of the articles, it is inferred that diarrheal diseases are related to climate variability. Heat pockets favor the multiplication of pathogenic microorganisms in food and water. Such factors are enhanced by precipitation and greater social vulnerability. Thus, due to the Brazilian climate being tropical, the high summer temperatures and humidity provide an ideal environment for the proliferation of protozoa, viruses and bacteria. Thus, poor sanitation of the population, meteorological variations and precipitation contribute to the increase in cases of diarrheal diseases in Brazil.

KEYWORDS: Diarrheal Diseases. Climate. Climate Changes. Admissions

21. THE USE OF PROBIOTICS IN THE HEALING OF SKIN INJURIES: LITERATURE REVIEW

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INTRODUCTION: The stratum corneum is a shield against external aggression and a biological barrier, full of microorganisms that make up the skin microbiome. These microorganisms, play a key role in the healthy functioning of the skin. Disruption of this skin barrier causes

a mismatch in the skin microbiome, and the prolonged inflammation that can occur after a skin lesion can result in delayed wound healing. Probiotics and other therapies have been studied as alternative treatments for various skin diseases. According to the Food and Agriculture Organization of the United Nations, probiotics are defined as "live microorganisms that, when administered in adequate amounts, confer benefits on the health of the host". One of the main benefits of probiotics for dermatology is the modulation of the inflammatory response and limitation of the pathogen's colonization, thus contributing to the healing of skin lesions. **OBJECTIVE:** The main objective of this article is to elaborate an overview of the use of probiotics in skin lesions, seeking to assess their effectiveness in healing. **MATERIALS AND METHODOLOGY:** The present study is a bibliographic review based on a systematic review of data obtained in the literature, with the following keywords "probiotics"; "skin"; "healing"; "microbiota". Publications containing studies with animals were excluded from this study, and only those involving human beings were selected. **DISCUSSION:** By analyzing the data obtained in TABLE 1, diabetic patients who used oral probiotics with *Lactobacillus* species showed significant reductions in the length, width and depth of the ulcer, in addition to a decrease in the levels of inflammatory markers when compared to patients who did not use the use of these probiotics. Topical applications of *L. plantarum* for the treatment of diabetic foot caused a reduction in the bacterial load and induced the healing of diabetic ulcers through the regulation of IL-8 and recruitment of phagocytic cells and fibroblasts. On the other hand, topical applications of *L. plantarum* in chronic ulcers of non-diabetic patients led to a reduction of more than 90% in the area with chronic ulcers. Patients with second and third degree burns who made the topical use of *L. plantarum* had results as effective as the application of silver sulfadiazine in reducing the risk of infection and bacterial load, while promoting the granulation tissue and wound healing. **CONCLUSION:** Bacterial infection impairs the healing process. Traditional treatment protocols involving antibiotic therapy do not eradicate bacteria, especially those in the form of biofilm, making it necessary to use new therapeutic modalities. Although studies on the effects of probiotics on wound healing in human studies are scarce, especially in the long term, through this study it was possible to verify that the use of probiotics combined with traditional treatment protocols for the lesions presented, resulted in a significant improvement in parameters of the following lesions: diabetic foot ulcers, chronic ulcers from nondiabetic patients and burns.

KEY WORDS: Probiotics; skin; healing; injuries; microbiota;

22. USE OF ERITOCOXIB IN SPORTS INJURIES: AN INTEGRATIVE LITERATURE REVIEW

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INTRODUCTION: Ankle sprains are one of the most frequent conditions in emergency orthopedic consultations, mainly corroborated by sports injuries. One of the fundamental criteria to verify the evolution of the treatment is the reduction of pain, both during walking and with active and passive mobilizations. For this, adequate analgesia is necessary, for which non-steroidal antiinflammatory drugs (NSAIDs) are usually prescribed, especially in cases of grade I and II sprains. Although it is a matter of debate, its use can be beneficial in the first days after a muscle or tendon injury

in the context of sports practice. **OBJECTIVE:** To explain the evidence on the use of erythocoxib in sports injuries. **MATERIALS AND METHODOLOGY:** This is a descriptive research of the integrative literature review type. The bibliographical research was exploratory in nature, starting from the identification, selection and evaluation of works and scientific articles considered relevant to provide theoretical support for the classification, description and analysis of results. The search was carried out in August and September 2021. Studies published in the period between 2017 and 2021 were considered, using the following keywords: "erythocoxib"; "sports injuries"; "orthopedics"; "NSAID", "athletes". **RESULTS AND DISCUSSION:** Although the inflammatory process that originates from tissue damage is initially part of the healing process, this inflammation can lead to decreased healing. NSAIDs act by competitively inhibiting cyclooxygenase (COX), an enzyme linked to the biotransformation of arachidonic acid into prostaglandins. While the COX-1 isoform is constitutively expressed in several tissues, COX-2 is expressed as a consequence of induction by stimuli such as pro-inflammatory cytokines, lipopolysaccharides and mitogens. Eritocoxib is a COX-2 selective NSAID, whose antiinflammatory efficacy has been confirmed in clinical studies with patients with different conditions associated with pain, and its 100% bioavailability after oral administration allows the indication of a single daily intake. It is interesting to note that erythocoxib is one of the drugs suggested by the International Olympic Committee (IOC) for the management of sport-associated acute pain, as well as for the return to physical activity on the same day. In addition, under the concept of sports injury, the IOC defines new or recurrent musculoskeletal discomforts that arise during sports practice or in the context of training. The IOC report adds that selective COX-2 inhibitors, such as erythocoxib, do not worsen bleeding in the case of bleeding lesions. **CONCLUSION:** Therefore, its use is considered a treatment with good tolerability, and although it is generally prescribed for patients with chronic pain, the drug also seems to be extremely effective in people with acute pain associated with injuries resulting from sports practice.

KEYWORDS: Erythocoxib; Lesion; Orthopedics; NSAID

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