

## 128 - PREVALENCE OF CHRONIC PAIN IN ELDERLY WOMEN AND ITS RELATIONSHIP WITH QUALITY OF LIFE

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### 1 INTRODUCTION

The current changes of the morbi-mortality profile if have configured as a universal trend that engloba countries developed and in development, where Brazil meets inserted. In this, the aged ones represent about 10% of the general population where of the 169,5 million Brazilians, 15,5 million are with 60 years or more with sufficiently optimistical projections pointing with respect to a growth of this etário group for 18 million up to 2010 (INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA, 2009).

Preoccupying fact is that, while in the developed countries this growth if gave of subtle and gradual form, waterleaf the socioeconômica and cultural resilience, in Brazil the phenomenon occurred brusquely collating itself with a scene of social inequalities, economic fragility, without structural modifications that correspond to the demands of the new emergent etário group (PEREIRA et al., 2006).

In parallel to the profile longo of the population meets the increase of the prevalence of chronic-degenerative illnesses as art roses, osteoporosis between as much others, frequently followed of chronic complaint of pain, being distinguished of origin to articulate, that more with passing of the time become constant (SANTOS et al., 2006).

This reality echoes through some studies epidemiologists who incorporate the phenomenon as part of the routine of the aged Brazilians (MORENO, 2004; DELLAROZA; PIMENTA; MATSUDO, 2007), being able to be evidenced through studies as of Barr (2002), Chiba (2002) and Andrade, Ferreira and Sousa (2006) when affirms that the high prevalence, of pain, in the aged population comes to be normally associated the chronic clutters, being distinguished the artrites and osteoporoses.

Still under the same volume Pereira (2003), still alert that pathologies, current in the aging, comumente tend to aggravate the function and to threaten the functional capacity, mainly they have atreladas the pain complaint, compromising demasiadamente its quality of life.

The fact is demasiadamente preoccupying since chronic pains, beyond being current associates the negative images, citing itself as example the drawn out suffering, psychic upheavals and medicine abuse, under the optics of Andrade, Ferreira and Sousa (2006), is one of the main pointers of factors that limit the function, where literature already comes pointing, it has some time, its impact in the activities of daily life, as well as influences, it of this in the high indices of functional inability, in a bigger fragility as they also point studies as of I castrate, it Castro, Silva e Silva (2008).

At the same time where it has made it difficult the adhesion the therapeutically ones adjusted since studies also have demonstrated that, in if treating to chronic patients with pains, the adhesion the therapeutically ones offered is sufficiently low, clamant for the presentation of interventions that perfect the adhesion and, perhaps, improve the control and the treatment of the same one (KURITA; PIMENTA, 2003; SOARES; SILVA, 2009).

Had its increasing importance, the Agency of Research and Quality of Life in Public Health and the American Society of Pain they had started to consider it as the fifth vital signal, so important how much pulse, temperature, breath and arterial pressure, deserving to be measured, to be evaluated and to be registered in the same surrounding physician where also other vital signals are evaluated (SOUZA, 2002).

Considering itself here that chronic pain can be a predisponent factor the depletion of the quality of life of our aged ones, the objective of this study was to evaluate the taken care of chronic index of pain in aged in a center of convivência of aged in the city of São Luis, and which the relation of this with the loss of the quality of life of the same ones, in intention to create intervention alternatives and to consider action politics in the area of the health, being searched to take care of the demands of this population that it ages.

### 2 METHODOLOGY

This study it was developed respecting the norms established in resolução196-96 of the national advice of health of 10-10-1996 with regard to the accomplishment of research in human beings, with the number protocol 0075/2008 UCB/VREPGPE/COMEP/PROCIMH where the volunteers as well as the institution where if she carried through the research, of common agreement, had signed a term of free and clarified assent.

One was about a field research, of exploratório, quantitative, transversal character, and analytical for it analyzes of the parameters pain and quality of life.

The place chosen for the research was the center of integral attention the health of the aged one, located in the Street Salvador de Oliveira, squares N, house 12, Loyal Small farm, Filipinho, in the city of Is Luis-Harm.

In a composed universe for women above of 60 years, carriers or not of chronic pain, the elect metodológicos criteria for the study had been a random election of the sample through the drawing of 100 fichas of aged taken care of in the place constituting a amostral group of 64 aged ones with age enter the 60 78 years, what it constitutes the base for the operacionalizações of the research in itself.

All were tied with the place of the study and characterizing the universal accomplishment (universe of the research) it was the fact of that the women taken care of in this center had come of some parts and quarters of the city of Are Luis-Maranhão.

The freqüentadoras of the center had been enclosed all that had wanted to participate voluntarily of the study and that they had obeyed the following criteria of inclusion: Women above of 60 years, regular freqüentadoras of the center, with cognitiva capacity and interest to trustworth answer the questionnaires and tests used in the study.

How much to the exclusion criteria they had been considered: Women below of the established etária band, and/or that they did not possess cognitive capacity to still answer with fidedignidade the questionnaires and tests used in the study or the ones that if denied to answer to any one of the questionnaires or any of the item had composed that it.

The research was carried through by means of three avaliativas stages, each one with its especificidades, namely:

1ª Stage: Interview for presentation and explanation of the study and signature of the TCLE;

2ª Stage: Application of the tests divided in two phases:

a) Application of the test of pain for visual analogical scale of eleven points that consists of a line straight line, of 10 cm, that it represents continuous pain, anchored for the words without pain and worse pain. In it if it requests that the participant marks in the line the place that represents the intensity of the pain felt at that moment. The observer measures, in centimeters, in the distance enters the extremity anchored for the words without pain and the mark made for the patient, who corresponds to the intensity of its pain (ANDRADE; FERREIRA; SOUSA, 2006).

b) Application of the questionnaire (WHOQOL-OLD) of the world-wide organization of health.

3ª Stage consisted in analyzes of the data: The survey, the consolidation, the tabulação and the analysis of the data, had been carried through an analysis statistics in the 0 variable pain and quality of life where if it used descriptive and inferenciais statistical techniques, through the use of the test t-Student, of the test qui-square (for tables of contingencies 2x2), to the level of 5% of significance (a value-p < 0,05 are a significant result indicating the decision of if rejecting the hypothesis null (Ho), for each test applied in this work.

### 3 RESULTS AND DISCUSSION

Pain is alert, common symptom of in the diseases related to the aging and with negative impact in the life of the people. In being thus, the present study it objectified to analyze the correlation enters these two 0 variable pointing with respect to the following results:

Table 1 - Distribution of the frequency of the signal pain, considering its manifestation with complaint; absence or bearable pain, without complaint; according to etária band of the investigated women.

Signal of pain	Etária band the 60 70 years	f (%)	Etária band Bigger of 70 years	f (%)	(p)
Without pain, with bearable pain, without complaint	07	10,94	06	9,37	<0,0001
With pain and complaint	38	59,37	13	20,32	

In Table 1 the referring results to the age of the samples and index of pain had been signaled, in which if it perceived that of the 64 analyzed women, 51 presented pain complaint. They had been definitive greeters frequencies in patients with pain complaint, in the etária band that understands the 60 70 years and greeters of 70 years, respectively (N=38; 59.37%); (N=13; 20,32). In analysis statistics, carried through with test Qui-square of a sample for waited results different indicative of the pain signal and its relation with the etária band p< was established one; 0, 0001, therefore we can affirm that a relation of highly significant dependence between the etária band and the presence or absence of the pain signal exists, in the investigated women.

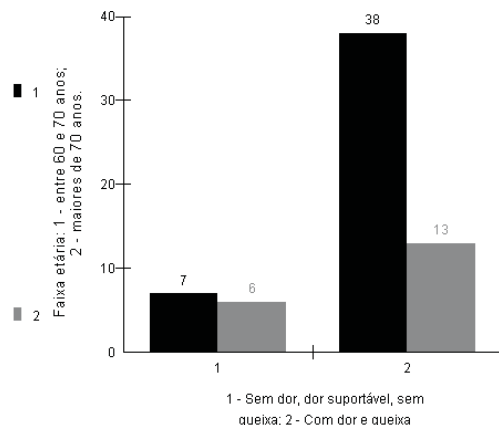


Figure 1- Distribution of the frequency of the signal pain, considering its manifestation with complaint; absence or bearable pain, without complaint; according to etária band of the investigated women

The High prevalence of pain in the aged population according to Andrade, Ferreira and Sousa (2006) generally meets associated the chronic clutters, particularly musculoesqueléticas illnesses that contribute for the increase of the algicas complaints in this etário group. This could be perceived during the present study since all the analyzed women who had presented pain complaint had related it esquelético origin muscle. The results alert for the fact of that Pain in aged individuals is a serious problem, that needs to be mensurado, diagnosis and treated.

In studies as of Lacerda et al. (2005) chronic pain was configured in a frequent diagnosis in aged, the related factors generally mentioned to the process of unsuccessful aging or characteristic pathologies of this etária band. Another more recent study of Soares e Silva (2009) also detects the high prevalence of pain in this population and the interference of this in the loss of the functional autonomy of individuals with raised age more. These data are concomitant with our findings that had pointed with respect to a significant index of the pain presence since of 64 evaluated women 51 they had presented this complaint.

Authors as Dellarozza, Pimenta and Matsudo (2007) alert through its findings that chronic pain, as an illness and a symptom cannot also have consequence in the quality of life. Factors as depression, disability and functional, dependence, social removal, changes in the sexuality, alterations in the familiar dynamics, economic disequilibrium, hopelessness, feeling of death and others, meet associates the chronic case of pain. When applying the same questionnaire of used quality of life for the related author we come across in them with the following findings:

Table 3 - Distribution of the frequency of women, as facetas and established minimum amplitude (equal it props up it 16) of the protocol (WHOQOL-OLD, 2005), its relation with the etária band of the investigated population.

Facetas	F25	f (%)	F26	f (%)	F27	f (%)	F28	f (%)	F29	f (%)	F30	f (%)	(p)
<b>Etária band/</b>													
<b>Amplitude</b>													
<b>60—70 years old</b>													
< 10											13	20,3	<0,0001
10 a 15	20	31,2	27	42,2	17	26,6	15	23,4	18	28,2	21	32,9	
15 a 20	25	39,1	18	28,1	28	43,7	30	46,9	27	42,2	11	17,2	
> 20													
<b>≥70 years old</b>													
< 10			01	1,6							07	10,9	<0,0001
10 a 15	13	20,3	12	18,7	08	12,5	09	14,1	07	10,9	07	10,9	
> 20	06	9,4	06	9,4	11	17,2	10	15,6	12	18,7	05	7,8	

Legend: F25=Habilidades sensorial, F26=Autonomia, F27=Atividades passed, future gifts and social F28=Participação, F29=Morte and to die, F30=Intimidade

In Table 3, greaterers had been definitive frequencies between 60 and 70 years, respectively faceta 26, with amplitude 10 the 15 (N=27; 42.2%) e, faceta 28, with amplitude 15 the 20 (N=12; 18.7%). With 70 or more years, faceta 25 and 29 respectively, with amplitude 10 15 and 15 the 20 (N=13; 20.3%); (N=12; 18.7%). In analysis statistics, carried through with test indicative qui-square of the signal of pain and quality of life, with the etária band,  $p < 0, 0001$  at the two moments (between 60/70anos e, 70 years old) therefore we can affirm that a significant relation between the age and the presence or absence of the signal of indicative pain of quality of life in the investigated women exists highly.

According to Dellaroza, Pimenta and Matsudo (2007), chronic pain, as an illness and a symptom cannot have consequence in the quality of life. Factors as depression, disability and functional, dependence, social removal, changes in the sexuality, alterations in the familiar dynamics, economic disequilibrium, hopelessness, feeling of death and others, meet associates the chronic case of pain. These affirmations correspond to our findings that had found extremely low indices of quality of life in the aged ones with pain complaint.

The studies of Dellaroza, Pimenta and Matsudo (2007) and Andrade, Ferreira and Sousa (2006) as well as this had demonstrated that pain was frequent and with characteristics capable to compromise the quality of life of the aged ones being taken itself to believe it that pain is enters the main factors that can impactar the quality negative aged life of the individual, therefore limits its activities, increases the agitation, the risk for estresse and the social isolation.

## 5 CONCLUSÃO

The present study it obtained to detect one high index of chronic pain in a population of aged, pertaining to a group of convivência in a sector I publish of the city of São Luis, whereas simultaneously correlated it degree of quality of life of these aged ones. From this it supplied given the planning of measures aiming at to the prevention and control of chronic pain, either in scope I publish or private, either in the individual sanitary area or collective, mainly when this reaches the aged population already so suffered by the fragilities from retrogenese. Alert for the necessity of a greater I number of related research this population that grows world-wide and clams for a worthy life that makes to be valid its rights, since as many duties are to them charged through the time.

## PREVALÊNCIA DE DOR CRÔNICA EM MULHERES IDOSAS E SUA RELAÇÃO COM A QUALIDADE DE VIDA RESUMO:

Considerando-se a dor crônica fator predisponente a depleção da qualidade de vida dos nossos idosos, o objetivo deste estudo foi avaliar o índice de dor crônica em idosos atendidos num centro de convivência em São Luís-Ma, e sua relação com a perda da qualidade de vida. Metodologia: Num universo composto por mulheres acima de 60 anos, portadoras ou não de dor crônica, os critérios metodológicos eleitos para o estudo foram a seleção aleatória da amostras através do sorteio de 100 fichas de idosas atendidas no local constituindo uma amostra de 64 idosas com idade entre 60 a 78 anos, depois de considerados os fatores de exclusão. A seguir realizou-se entrevista para apresentação, explicação do estudo e assinatura do TCLE; Aplicação do teste de dor por escala analógica visual e aplicação do questionário de qualidade de vida pelo (WHOQOL-OLD) da OMS. O levantamento, consolidação, tabulação e análise dos dados, foram realizadas através de análise estatística nas variáveis dor e qualidade de vida utilizando-se técnicas estatísticas descritivas e inferenciais, através do uso do teste t-Student, do teste qui-quadrado (para tabelas de contingências 2x2), ao nível de 5% de significância. Resultados: Quando analisada a distribuição da frequência do sinal dor, segundo a faixa etária das investigadas encontrou-se um  $p: < 0,0001$  sugerindo relação de dependência entre faixa etária e presença ou ausência de dor. Na distribuição da frequência da qualidade de vida e sua relação com faixa etária estabeleceu-se um  $p < 0, 0001$ , nos dois momentos (entre 60/70anos e, 70 anos) possibilitando a afirmação de relação significativa entre idade e presença ou ausência de dor indicativo de qualidade de vida nas investigadas. Conclusão: A partir deste forneceu-se dados para planejamento de medidas visando prevenção e controle da dor crônica, seja em âmbito publico ou privado, ou na área sanitária individual ou coletiva.

**PALAVRAS-CHAVE:** Idosas. Dor. Qualidade de vida.

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### PREVALENCE OF CHRONIC PAIN IN ELDERLY WOMEN AND ITS RELATIONSHIP WITH QUALITY OF LIFE

#### ABSTRACT:

When it is considered, here, that chronic pain can be a predisponent factor to the depletion of the quality of life of old age people, the goal of this paper was to evaluate the midex of this paper was to evaluate the midex of chronic pain among old age people attended at a old age people's centre in the city of São Luís and the link of it with the loss of quality of life those ones. This sample is constituted of 64 old age persons under between 60-78 years old selected freely in which it was applied the tests of pain by EAV and quality of life by (WHOQL-OLD) of OMS, the statistical treatment of the data was performed through a statistical analysis in the variables pain and quality of life when it was used descriptive and inferential statistical techniques, through the use of the test t-student, of test qui-square (to tablets of contingency 2x2), to the level of 5% of significance (a value -  $p < 0,05$  is a significant result indicating a decision of rejecting the null hypothesis ( $H_0$ ), to each test applied in this paper. In statistical analysis performed with test Qui-square indicative of signs of pain and quality of life, with age group, it was established a  $P < 0,0001$ , in the two moments (between 60-70 years old and 70 years); therefore we can affirm that it exists a relation of dependence highly significant between the age group and the presence or absence of sign of pain, in the investigated women as well as a relation highly significant between the age and the presence or absence of sign of pain medicating quality of life in the investigated women.

**KEYWORDS:** Old age women. Pain. Quality of life.

### PRÉDOMINANCE DE DOULEUR CHRONIQUE DANS LES FEMMES ÂGÉES ET DE SON RAPPORT AVEC LA QUALITÉ DE VIE

#### ABSTRACT:

Quando on le considère, ici, que la douleur chronique peut être un facteur predisponent à l'épuisement de la qualité de vie des personnes de vieillesse de l'OM, le but de ce document était à l'évaluation que le midex de ce document était à l'évaluation le midex de la douleur chronique parmi des personnes de vieillesse s'est occupé aux personnes d'une vieillesse centrent dans la ville de São Luís et le lien de lui avec la perte de qualité de vie ceux ceux. Cet échantillon est constitué de 64 personnes de vieillesse dessous entre 60-78 années choisies librement dans ce qu'il a été appliqué les essais de la douleur par EAV et qualité de vie près (WHOQL-OLD) d'OMS, le traitement statistique des données performed par une analyse statistique dans les variables font souffrir et qualité de vie quand étaient dedans les techniques statistiques descriptives et interférentielles utilisées, par l'utilisation du t-étudiant d'essai, de la qui-place d'essai (aux comprimés de contingence 2x2), au niveau de 5% d'importance (une valeur -  $p < 0,05$  est un résultat significatif indiquant une décision de rejeter l'hypothèse de la volonté ( $H_0$ ), à chaque essai appliqué en ce document. Dans l'analyse statistique exécutée la Qui-place d'essai de petit morceau indicative de chante de la douleur et qualité de vie, avec la catégorie d'âge, c'était a établi un  $P < 0,0001$ , dans les deux moments (entre 60-70 années et 70 ans); donc nous pouvons affirmer qu'il existe une relation de la dépendance fortement significative entre la catégorie d'âge et la présence de l'absence du signe de la douleur, dans les femmes étudiés aussi bien qu'une relation fortement significative entre l'âge et la présence ou l'absence du signe de la qualité de vie traitant avec des médicaments de douleur dans les femmes étudiés.

**MOT-CLÉ:** Femmes de vieillesse. Douleur. Qualité de vie.

### PREDOMINIO DEL DOLOR CRÓNICO EN MUJERES MAYORES Y DE SU RELACIÓN CON CALIDAD DE VIDA

#### EXTRACTO:

Cuando se considera, aquí, que el dolor crónico puede ser un factor predisponent al agotamiento de la calidad de vida de la gente de la edad avanzada de OM, la meta de este papel estaba al evaluar que el midex de este papel estaba al evaluar el midex del dolor crónico entre gente de la edad avanzada atendió en los países de una edad avanzada se centra en la ciudad de São Luís y el acoplamiento de ella con la pérdida de calidad de vida éstos unas. Esta muestra es constituida de 64 personas de la edad avanzada debajo entre 60-78 años seleccionados libremente en cuáles fue aplicada las pruebas del dolor por EAV y calidad de vida cerca (WHOQL-OLD) del OMS, el tratamiento estadístico de los datos performed con un análisis estadístico en las variables duele y calidad de vida cuando adentro estaban las técnicas estadísticas descriptivas e interferenciales usadas, con el uso del t-estudiante de la prueba, del qui-cuadrado de la prueba (a las tabletas del contacto 2x2), al nivel de el 5% de significación (un valor -  $p < 0,05$  es un resultado significativo que indica una decisión de rechazar la hipótesis de la voluntad ( $H_0$ ), a cada prueba aplicada en este papel. En el análisis estadístico realizado el Qui-cuadrado de la prueba de la pizca indicativo de canta de dolor y calidad de vida, con la categoría de edad, fue establecido un  $P < 0,0001$ , en los dos momentos (entre 60-70 años y 70 años); por lo tanto podemos afirmar que existe una relación de la dependencia altamente significativa entre la categoría de edad y la presencia o ausencia de muestra del dolor, en las mujeres investigadas así como una relación altamente significativa entre la edad y la presencia o la ausencia de muestra de la calidad de vida que medica del dolor en las mujeres investigadas.

**PALABRA CLAVE:** Mujeres de la edad avanzada. Dolor. Calidad de vida.

**PREVALÊNCIA DE DOR CRÔNICA EM MULHERES IDOSAS E SUA RELAÇÃO COM A QUALIDADE DE VIDA****RESUMO:**

Considerando-se a dor crônica fator predisponente a depleção da qualidade de vida dos nossos idosos, o objetivo deste estudo foi avaliar o índice de dor crônica em idosos atendidos num centro de convivência em São Luís-Ma, e sua relação com a perda da qualidade de vida. Metodologia: Num universo composto por mulheres acima de 60 anos, portadoras ou não de dor crônica, os critérios metodológicos eleitos para o estudo foram a seleção aleatória da amostras através do sorteio de 100 fichas de idosas atendidas no local constituindo uma amostra de 64 idosas com idade entre 60 a 78 anos, depois de considerados os fatores de exclusão. A seguir realizou-se entrevista para apresentação, explicação do estudo e assinatura do TCLE; Aplicação do teste de dor por escala analógica visual e aplicação do questionário de qualidade de vida pelo (WHOQOL-OLD) da OMS. O levantamento, consolidação, tabulação e análise dos dados, foram realizadas através de análise estatística nas variáveis dor e qualidade de vida utilizando-se técnicas estatísticas descritivas e inferenciais, através do uso do teste t-Student, do teste qui-quadrado (para tabelas de contingências 2x2), ao nível de 5% de significância. Resultados: Quando analisada a distribuição da frequência do sinal dor, segundo a faixa etária das investigadas encontrou-se um p: <0,0001 sugerindo relação de dependência entre faixa etária e presença ou ausência de dor. Na distribuição da frequência da qualidade de vida e sua relação com faixa etária estabeleceu-se um p< 0, 0001, nos dois momentos (entre 60/70anos e, 70 anos) possibilitando a afirmação de relação significativa entre idade e presença ou ausência de dor indicativo de qualidade de vida nas investigadas. Conclusão: A partir deste forneceu-se dados para planejamento de medidas visando prevenção e controle da dor crônica, seja em âmbito público ou privado, ou na área sanitária individual ou coletiva.

**PALAVRAS-CHAVE:** Idosas. Dor. Qualidade de vida.

PUBLICAÇÃO NO FIEP BULLETIN ON-LINE: <http://www.fiepbulletin.net/80/a2/128>