

101 - PROFILE OF MIO-ARTICULARES CHANGES ON HUMANS RESOURCES DEPARTMENT EMPLOYEES OF COMPANY APPLE'S SECTION OF FRAIBURGO'S CITY (SC).

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INTRODUCION

In the life of a man the work has a basic paper, therefore, besides being its sustenance source, it is where it can feel itself useful and valued. However when this is carried through under inadequate conditions, it can provoke diverse damages to the health, leading the injuries or until the inactivity.

The first stories of injuries for repetitive efforts (LER) had appeared in century XVI with a study of George Bauer on illnesses and industrial accidents in miners. In 1717, the Father of the Ergonomics - Bernardino Ramazzini - described that the irregular movements and the inadequate positions during the work can cause muscular injuries.

In Brazil the first cases of these injuries had appeared for 1984 return, in digitizers. To each year the statisticians with the number of people with LER have increased, and today beyond the digitizers, the bank clerks, operators, nurse aid, operators of cash registers, laboring of the assembly line of plants and many others are affected by these riots.

The used terms to differentiate related Injuries for repetitive efforts (LER) and muscle-skeletal disturbances related to the work (DORT) still is sufficiently confused between authors. We can appraise the DORT as occupational illnesses that are related the injuries for cumulative traumas. It is a descompensacion enters the execution of constant fast efforts e and the capacity of movement of the muscle. Already LER it is said as painful symptoms that attack responsible tendons, muscles, ligaments, nerves and too much structures for the movements of superior and inferior members.

The muscle-skeletal disturbances (DMEs) constitute the main problem of ergonomic nature in the whole world. Its main clinical signal is strong pain, associate to the temporary incapacity for the work. Great part of these cases is curable, but for some reason they tend if to cronificar, taking the individual chronic pain and disability for work.

To move away the risk from these injuries, the due precautions must be taken, preventing the comprometimento of the performance of the employees and the quality of the given services.

In these cases the people meet who work in the departments of human resources, therefore fulfill activities routine, with long period of repetitive movements and many times in one same position. Therefore, she is of great importance to identify the predisponent factors of the DMEs in employees of departments of human resources, to not only characterize its incidence, but also to awake knowledge on the necessity to control the risk factors, as well as previne them.

In this direction, the interest for this subject was desperted, since the departments of human resources of the companies of the apple branch of the Fraiburgo's City (SC), do not present given significant statisticians on this subject.

METHODS

Initially bibliographical study was become fullfilled, searching the knowledge theoretical to endorse the results evidenced through the data gotten for the questionnaires answered for citizens of the sector of human resources. The used resources had been searched in books, articles, dissertation, in actual visits the libraries and also in databases for research, disponibile in the internet. The words used keys in the research had been: human resources, LER/DORT, muscle-skeletal disturbances.

Therefore, a questionnaire was elaborated that was used in the study, this is auto-applicable, and was formulated based in instruments developed for Massambani and Pereira, beyond Scala CR 10 of Borg.

The first instrument was the Inventory on muscle-skeletal disturbances, used in the research of Massambani, (2002) and the second was the questionnaire of attitudes in relation to the work and the quality of life, in general used in the research of Pereira (2001).

These questionnaires had suffered alterations to contemplate the professional classroom of this study. The questionnaire is of recognition of the sampling, contends open and closed questions of personal character identification and to evaluate the possible alterations caused for the hours of working.

Another instrument used in this study was scale CR10 of Borg, used to mensurar the level of pain of the citizens, through a scale that varies of 0 to the symbol (?), that it means "0" pain absence and the symbol (?) that means Absolute Pain Maximum.

In a following stage the formularization of the questionnaires, was requested the authorization of the Direction of the apple companies for the accomplishment of this study.

After one became fullfilled visits to these companies, where each citizen adequately was informed on the objective of the application of the instrument, the way of application and the destination of the gotten data, stimulating them to remove it any doubts. When agreeing to answering the questionnaires, the assent free and clarified, demanded for the Health department, according to resolution 196/96, was signed for both the parts.

As last stage, one gave organization of the instruments and computation to it of the data, becoming fullfilled itself it analysis descriptive and presented statistics through comparative tables.

RESULTS

Of the data of the total population of 62 citizens, 46 questionnaires, corresponding 74.2% of the total had been evaluated, that corresponds 100% of the sampling.

In accordance with tables 1, the majority of the studied population is observed that, 52.17% were of the feminine sort, and 47.83% of the masculine sort.

Table 1. Distribution of the sort (n=46).

Sort	Occurrence	%
Masculine	22	47,83%
Feminine	24	52,17%

How much to the working hours of the employees, 93.49% work of 8 the 9 hours/day, 2.17% work of 10 the 11 hours/day, 2.17% of 6 the 7 the 5 hours/day and 2.17% of 4 hours/day, data detailed in table 2

Table 2 Distribution of the daily working hours (n=46).

Working hours	Occurrence	%
De 4 a 5 hours/day	1	2,17%
De 6 a 7 hours/day	1	2,17%
De 8 a 9 hours/day	43	93,49%
De 10 a 11 hours/day	1	2,17%

Tables 3 and 4 demonstrate that the employees work great part of the seated hours of working, representing 50% that it works in this position of 7 the 8 hours per day. Already the position biped is not adopted by 9,09% of the sample, the remain works in foot small periods or during half of the worked horary load.

Table 3. dist. of the time of permanence

Seated position	Occurrence	%
1	1	2,27%
3 a 4 hours	10	22,73%
5 a 6 hours	11	25%
7 a 8 hours	22	50%

Table 4. Dist. of the time of permanence

Foot Position	Occurrence	%
It does not work in foot	4	9,09%
Less than 1 hour	2	4,55%
1 a 2 hours	23	52,27%
3 a 4 hours	14	31,82%
5 a 6 hours	1	2,27%

Of the movements that occur more frequently in the routine of the employees of the sectors of human resources, it can be detached the repetitive movements with fists and hands for making (74,42%), rotation of seated trunk (69,77%), activities carried through with support of the elbow in the table (55,81%), flexion of the neck (44,19%), use of manual techniques (39,53%), repetitive maintenance of the static position for long periods (32,56%) and movements with superior members (30,23%). She was accepted more than a reply in this question.

How much to the use of the computer, during the routine of work, 78.26% of the employees they carry through many procedures in the computer and 36.84% of the employees declare that they had perceived changes in its position due to the continuous use of the computer. Of these employees, 63.64% tell to perceive the bad position when sitting down, 36.36% the sprouting of pains for the body, however when perceiving the bad position, try corrigir it.

It are of the environment of work 91.3% of the employees do not make use of the computer.

For the questions of this session they had been accepted more than a reply, with exception of the questions whose answers were of the type yes or not. Also the answers of the questions had been accepted where the employee says to exist symptoms, but not its presence of disturbances.

When asked to the employees if they they had knowledge on what they are the LER/DORT, its consequences, the forms to prevent or to minimize its effect, 97.33% say that yes, of these 15.56% already had had some related problem the LER/DORT. Of employees whom they tell already to have presented some related problem LER/DORT, 57.14% they were women and 42.86% men.

The regions of the body where the employees reveal to feel more pains during the work are: fist and hand (54,54%), shoulder (36,36%) and neck (36,36%). The told region as others in the table is arm, demonstrated in table 6.

Table 5. Percentile distribution of the anatomical

Regions affected for the riots	Occurrence	%
Cervical column	1	9,09%
Lumbar column	3	27,27%
Shoulder	4	36,36%
Neck	4	36,36%
Elbow	1	9,09%
Fist and hands	6	45,54%

Table 6. Percentile distribution of the

Symptoms	Occurrence	%
Burning	9	33,33%
Fatigue	7	25,92%
Twinge	3	11,11%
Pulsate pain	5	18,52%
It doesn't know	8	29,63%

The symptoms that more disclose in some region of the body according to sample of the research are burning (33,33%), fatigue (25,92%), pulsate pain (18,52%) and twinge (11,11%). A significant part of the employees (29,63%) does not know to identify the symptoms. The occurrence of the biggest intensity of the symptoms during the day was told by 53,85% of the employees, occurring in the end of the expedient, followed of 38,46% that it does not know where period the symptoms are more intense and 7,69% with bigger intensity in the beginning of the expedient, as displayed in table 7.

Table 7. Percentile distribution of the time of detention of the symptoms (n=15)

Detecção dos sintomas	Occurrence	%
Of 6 months to the year	2	13,33%
Of 2 a 3 year	7	46,67%
Of 4 a 5 year	3	20%
Of 6 a 10 year	2	13,33%
Of 10 a 20 year	1	6,67%

All the employees (100%) never tell to have lost days of work because of the symptoms

In relation to the symptoms, 77.78% had answered that the symptoms are intermittent and 22.22% that the symptoms are continuous, presented in table 8.

Table 8. Classification of the symptoms (n=18).

Sintomas	Occurrence	%
Continuous	4	22,22%
Intermittent	14	77,78%

Table 9. Classificação of the sleep rhythm (n=42)

Sleep rhythm	Occurrence	%
Continuous	32	76,19%
Interrupted	10	23,81%

The fatigue sensation is told by 38,89% of the employees and 25,38% say that it needs to take medicines with the purpose of muscular relaxante to alliviate the symptoms. In relation to the rhythm of sleep 76,19% of the searched ones it has continuous sleep and 23,81% intermittent sleep, as discriminated in table 9.

How much to the behavior changes that occur during the manifestation of the clinical symptoms, the most cited they had been anxiety (52%), physical fatigue (48%), irritability (48%) and nervousness (40%), as table 10.

Table 10. Percentile distribution of the changes of behavior during the phase of the symptoms (n=25).

Behavior changes	Occurrence	%
Depression	3	12%
Anxiety	13	52%
loss of interest for the work	4	16%
Physical fatigue	12	48%
Physic fatigue	3	12%
Nervousness	10	40%
sleeplessness	3	12%
Irritability	12	48%

In result to the disturbances muscle-esqueléticos, 18.75% of the employees have modified its hours of working to minimize the symptoms. The main alterations in the work habits are position change frequent (75%) and more intervals or pauses during the hours of working (50%). The detailed data are in table 11.

Table 11. Percentile distribution of the changes of habits in the work (n=8).

Chances of habits in the work	Occurrence	%
It prevents to raise something	2	25%
Use the better the corporal mechanics	3	37,5%
Change of frequent position	6	75%
It stops to work when the symptoms appear	2	25%
Change in the hours of working	1	12,5%
It makes more intervals or pauses	4	50%

The majority of the employees, 79.55% does not carry through no type of physical exercise, in its work to prevent the LER/DORT.

In relation the accomplishment of physical activity with orientation of the teacher of physical education or physiotherapist, 11.9% carry through activity 3 times per week, 2.39% 2 times per week, 4.76% 1 time per week and the great majority, 80.95% do not carry through physical activity, as demonstrated in table 12.

Table 12. Distribution of the frequency with that the employees carry through physical activity (n=42).

Accomplishment of physical activity	Occurrence	%
1 time week	2	4,76%
2 time week	1	2,39%
3 time week	5	11,9%
Don't carries through physical activity	34	80,95%

But 2.22% of the employees had needed to carry through physiotherapist treatment in last the 6 months, in result the problems appeared for the profession.

The table 13 demonstrates the evaluation of the chair, that according to majority of the employees is considered comfortable, being upholstered they (95,65%), with regulable height (97,83%), revolving (100%) and with enough support for the legs underneath of the table (97,83%).

Table 13. Percentile distribution of the evaluation of the chairs.

Affirmative reply	Occurrence	%
upholstered chair (n=46)	44	95,65%
Regulable height (n=46)	45	97,83%
Revolving chair (n=46)	46	100%
Arms of the chair harm approach (n=43)	2	4,65%
Feet always supported (n=46)	34	73,91%
Enough space for the legs under the table exists (n=46)	45	97,83%

In table 14 the evaluation of the tables is displayed, where great part of the employees finds the height of the adequate table (84,44%), with rounded off edge (52,27%), accessories inside of the reach area (95,65%), light drawers (82,61%), but 41.3% say that the table of the keyboard is lower than the table of the computer.

Table 14. Percentile distribution of the evaluation of the tables

Affirmative reply	Occurrence	%
Appropriate height (n=45)	38	84,44%
Previous edge of the rounded off table (n=44)	23	52,27%
Accessories inside of the reach area (n=46)	44	95,65%
Light drawers (n=46)	38	82,61%
Table of the keyboard lowest (n=46)	19	41,30%

In the evaluation of the ambient conditions, the majority of the employees considers the environment of adjusted work, with adequate illumination (84,78%) and pleasant temperature (56,52%), as displayed in table 15. Specific tests had not been carried through to evaluate the ambient conditions

Table 15. Percentile distribution of the evaluation of the ambient conditions

Affirmative reply	Occurrence	%
Adequate illumination (n=46)	39	84,78%
Adequate temperature (n=46)	26	56,52%
Space of the rank of adequate work (n=46)	38	82,61%
Level of inconvenient noise (n=46)	9	19,57%

In the evaluation of the activities of practical daily life and activities it can be perceived as pain, exactly that in light level it can make it difficult the accomplishment of simple and important activities in the daily routine, since great part of the employees feels difficulty in the accomplishment of some daily activities, demonstrated in table 16.

Table 16. Percentile distribution of the evaluation of the activities of daily life and activities of practical life

Difficulty to carry through activities	Yes	%	No	%
To turn the neck (n=46)	2	4,35%	44	95,65%
To extend the clothes (n=46)	1	2,17%	45	97,83%
To extend the clothes (n=46)	0	0,0%	46	100%
To place the hands in the coasts (n=46)	9	19,57%	37	80,43%
To take care of telephone (n=46)	1	2,17%	45	97,83%
To pass clothes (n=46)	3	6,52%	43	93,48%
To turn the door handle of the door (n=46)	0	0,0%	46	100%
To turn key (n=46)	0	0,0%	46	100%
To press the hand of another person (n=46)	1	2,17%	45	97,83%
To hold small objects (n=46)	2	4,35%	44	95,65%
To open tinned (n=46)	1	2,17%	45	97,83%

The Scale CR10 of Borg is used to mensurar the level of pain of the citizens, through a scale that varies of 0 (pain absence) to the symbol (?) (absolute maximum pain).

In the evaluation of the scale of borg, 21.74% of the citizens had answered the questionnaire, 20% say not to feel nothing absolutely (degree 0), 20% say to feel pains extremely weak (degree 0,5), 10% weak pains (2), 20% moderate pain (degree 3), 20% nor moderate pain and nor strong (degree 4) and 10% pain very do not arrive to be strong (degree 6), presented in table 17.

Table 17. Percentile distribution of the evaluation of pain for Scala of Borg (n=10).

Level of pain	Occurrence	%
Degree 0	2	20%
Degree 0,5	2	20%
Degree 2	1	10%
Degree 3	2	20%
Degree 4	2	20%
Degree 6	1	10%

CONCLUSION

This study it had as objective to verify the incidence and sintomatology of the disturbance muscle-skeletal in employees of departments of human resources, to identify to the anatomical regions attacks more frequently, the main positions adopted during the hours of working and to determine the recurrent index of absenteeism of the riots, being been the following assured results:

- a) incidence of 15,56% of riots muscle-esqueléticos;
- b) recurrent sintomatology of the alterations is: burning, fatigue and latejante pain;
- c) pain level varies of zero level 6;
- d) anatomical regions more attacks are: fist and hands, shoulder, neck and lumbar column;
- e) main positions and movements adopted during the hours of working are: repetitive movement with fists and hands, rotation of seated trunk, activities with support of elbow in the table, flexão of neck, use of manual techniques and static position for long period;
- f) absenteeism index is zero.

Had to the reduced number of citizens, it is not possible to generalize the results gotten in this study.

Despite the number of riots muscle-esqueléticos not to be raised in these sectors, as disclosed in the gotten data, is excellent to stimulate the quarrel on the LER/DORT, as well as measures of prevention in the routine and environments of work, what for certain it can assist in the prevention of the above described symptoms.

One gives credit that the way most easy to minimize the appearance of the disturbance muscle-skeletal, as much for the worker, as for the company it is through preventive attitudes, therefore, the employee perceives the interest of the company in the preservation of its health, what it can influence positively in the production.

The ergonomic analysis of the deepened environment of work to identify more factors that influence in the development of the work good would have resulted for the company, together with a program of promotion of health of the worker, that could include gymnastics labor, physical exercises in the company or is of it beyond monthly lectures.

These will be able to minimize the deficiencies of the ranks of work and the employees, providing improvement to them in the quality of life, that drift of good muscular preparation, that is reached with physical activities proposals in the programs.

However, other studies are necessary in this population, where it is suggested incorporation clinical examinations and interviews with each citizen, in order to deepen the relation of the riots muscle-esqueléticos, being able of this form to generalize the findings in the cited study.

BIBLIOGRAPHICAL REFERENCES

- ASSUNÇÃO, A. A. Sistema músculo-esquelético: lesões por esforços repetitivos (LER). In: MENDES, R. **Patologia do Trabalho**. Rio de Janeiro. 1999. v. 1. p. 175 - 181.
- BAÚ, L. M. S. **Fisioterapia do Trabalho: ergonomia, legislação, reabilitação**. Curitiba: Cládasilva, 2002. 270 p.
- COUTO, H.A. **Ergonomia aplicada ao Trabalho em 18 lições**. Belo Horizonte: Ergo, 2002. 201 p.
- COUTO, H. A. **Ergonomia aplicada ao trabalho: conteúdo básico: guia prático**. Belo Horizonte: Ergo, 2007. 272 p.
- COUTO, H. A; NICOLETTI, S. J.; LECH, O. **Gerenciando a LER e os DORT nos tempos atuais**. Belo Horizonte: Ergo, 2007. 492 p.
- GRANDJEAN, E. **Manual de Ergonomia: Adaptando o trabalho ao homem**. 4 ed. Porto Alegre: Artes Médicas, 1998. 338p.
- LAKATOS, E. M; MARCONI, M. A. **Técnicas de Pesquisa**. São Paulo: Atlas S.A., 1999. 260p.
- LANGOSKI, L. A. **Enfoque Preventivo Referente aos Fatores de Risco das LERs/DORTs: O Caso de Cirurgiões-Dentistas**. Florianópolis, 2001. Dissertação (Mestrado em Engenharia de Produção) - Programa de Pós-Graduação em Engenharia de Produção. Universidade Federal de Santa Catarina.
- MACIEL, A. C. C; FERNANDES, M. B; MEDEIROS, L. S. **Prevalência e fatores associados à sintomatologia dolorosa entre profissionais da industria têxtil**. Scielo. Disponível em <<http://www.scielo.br/pdf/rbepid/v9n1/07.pdf>> Acesso em 15 de janeiro de 2007.
- MAENO, M. et al. **Lesões por Esforços Repetitivos (LER) Distúrbios Osteomusculares Relacionados ao**

- Trabalho (DORT) Dor Relacionada ao Trabalho.** Brasília: Ministério da Saúde. Departamento de Ações Programáticas Estratégicas. Área Técnica de Saúde do Trabalhador, 2006. Protocolos de Atenção Integral à Saúde do Trabalhador de Complexidade Diferenciada.
- MASSAMBANI, E.M. Incidência de Distúrbios Músculo-Esqueléticos entre Farmacêuticos-Bioquímicos e suas Repercussões sobre a Qualidade de Vida e de Trabalho.** Florianópolis, 2002. Dissertação (Mestrado em Engenharia de Produção) - Departamento de Engenharia de Produção e Sistemas, Universidade Federal de Santa Catarina.
- MENDES, R. A; LEITE, N. **Ginástica Laboral: princípios e aplicações práticas.** São Paulo: Manole, 2004. 208 p.
- MORAES, M.A; MIGUEZ, S.A. **LER/DORT: Prevenção, tratamento & noções básicas de ergonomia.** Apostila de Atualização do Curso - Fernandes Fisioterapia. Campinas, 1998.
- PEREIRA, V. C. G. **A Contribuição da Ergonomia no Registro e Prevenção das LER/DORT em Centrais de Atendimento:** Um Estudo de Caso. Florianópolis, 2001. Dissertação (Mestrado em Engenharia de Produção com Ênfase em Ergonomia) - Programa de Pós-Graduação em Engenharia de Produção, Universidade Federal de Santa Catarina.
- POLITO, E; BERGAMASCHI, E. C. **Ginástica Laboral: teoria e prática.** 3 ed. Rio de Janeiro: Sprint, 2006. 101 p.
- PRZYSIEZNY, W. L. **Distúrbios Osteomusculares Relacionados ao Trabalho: um enfoque ergonômico.** Florianópolis, [s.d.]. Artigo Científico (Mestrado em Engenharia de Produção) - Programa de Pós-Graduação em Engenharia de Produção, Universidade Federal de Santa Catarina.
- RIO, R. P. do; PIRES, L. **Ergonomia: Fundamentos da Prática Ergonômica.** 3 ed. São Paulo: LTr, 2001. 225 p.
- SANTOS FILHO, S. B; BARRETO, S. M. **Atitude ocupacional e prevalência de dor osteomuscular em cirurgiões-destistas de Belo Horizonte, Minas Gerais, Brasil: contribuição ao debate sobre os distúrbios osteomusculares relacionados ao trabalho.** Scielo. Disponível em <http://www.scielo.br/scielo.php?script=sci_arttext&pid=SO102_311x2001000100019&lng=pt> Acesso em 15 de janeiro de 2007.
- SILVA, G. W.; MÁSCULO, F. S. **LER - Epidemia Silenciosa que Causa Reflexos na Saúde dos Bancários.** Disponível em <http://www.simucad.dep.ufscar.br/projetos/gt_abergo/artigos/saude%20dos%20bancarios.pdf>. Acesso em 15 de janeiro de 2007.
- TRAJANO, S. M. C. **As lesões dos membros superiores e suas relações com tipo de ocupação, idade e sexo.** Scielo. Disponível em <<http://www.fisiocorpore.com.br/textos/estatistica.doc>>. Acesso em 15 de janeiro de 2007.
- YENG, L. T.; TEIXEIRA, M. J.; BARBOZA, H. F. G. **Reabilitação em Lesões por Esforços Repetitivos (Distúrbios Osteomusculares Relacionados ao Trabalho).** In: GREVE, J. M. A.; AMATUZZI, M. M. **Medicina de Reabilitação Aplicada à Ortopedia e Traumatologia.** São Paulo. 1999. v.1, p.251 - 292.
- ZILLI, C. M. **Manual de Cinesioterapia/ Ginástica Laboral: uma tarefa interdisciplinar com ação multiprofissional.** São Paulo: Lovise, 2002. 102

PROFILE OF MIO-ARTICULARES CHANGES ON HUMANS RESOURCES DEPARTMENT EMPLOYEES OF COMPANY APPLE'S SECTION OF FRAIBURGO'S CITY (SC).

ABSTRACT

INTRODUCION: The muscle-skeletal disturbances are affections that could attack muscles, tendons and bags articulate, reaching principally the superior members, scapular region and neck. They occur on jobs where there are continued and repeated movements and maintenance of inadequate postures, without viable time for the recovery of the requested muscle. **OBJECTIVE:** The present study search verify the incidence, the symptomatology and the anatomic regions more assaulted, beyond the main positions and movements adopted during the hours of working and the index of absenteeism provoked by muscle-skeletal disturbances on humans resources department employees. **METHODS:** The data were collected through a questionnaire, formulated based on instruments utilized by Massambani and Pereira. Also utilized the Scala CR10 de Borg to measure the pain level. These instruments were applied on 9 company, totalize 46 individuals that working on that place. **RESULTS:** Through the data obtained we can conclude that the incidence of mio-articulares chances was 15,56%, with prevalence on class feminine (57,14%). The anatomic regions more affected were: fist, hands, shoulder, neck and lumbar column. The principal symptoms include: burning, fatigue and pulsate pain, that are feeling principally in the final of the expedient. The principal changes on the conduct of employees are: anxiety, physical fatigue, irritation and nervousness, and the most doesn't practice any type of physical activity. The level of pain measure in the subjects varies of absolutely nothing to pain level 6. The main positions and movements that occur during the work are: repetitive movements with fist and hands, rotation of seated trunk, support of elbow in the table, flexion of the neck, use of manual techniques and maintenance of static position for long periods. The index of absenteeism was zero. **CONCLUSION:** However, looks opportune to establish preventive measure like stretch break and ergonomic analysis of working places, besides to minimize the fortuitous problems surged by labor activity.

KEY WORDS: Mio-Articulares Chances; Humans Resources Department; Apple's Company.

PROFIL DES MODIFICATIONS MIO-ARTICULARES DANS DES FONCTIONNAIRES DE DÉPARTEMENT DE RESSOURCES HUMAINES DES SOCIÉTÉS DE LA BRANCHE DE POMME DE LA VILLE DE FRAIBURGO-SC

RESUME

INTRODUCTION: Les troubles musculo-squelettiques sont des maladies qui peuvent acometer muscles, des tendons et des bourses, atteignant principalement les membres supérieurs, de la région escapular et du cou. Elles sont dues à des travaux où il ya des mouvements continus, répétitive et le manque d'entretien des postures, mais elles agissent viables temps pour la récupération des muscles demandés. **OBJECTIF:** Cette étude visait à vérifier l'incidence, les symptômes et anatomiques régions les plus touchées, outre le principal postures et mouvements adoptés au cours de la journée de travail et le taux d'absentéisme causés par les troubles musculo-squelettiques fonctionnaires dans le département des ressources humaines. **MÉTHODES:** Les données ont été recueillies au moyen de questionnaires, élaborés sur la base des instruments utilisés dans les études de Massambani et Pereira. Également utilisée à l'échelle CR10 de Borg pour mesurer le niveau de la douleur. Ces instruments ont été appliqués dans 9 entreprises, pour un total de 46 sujets qui travaillent dans cette industrie. **RÉSULTATS:** À l'aide des données obtenues, il est conclu que l'incidence des modifications mio - articulé était 15,56%, avec une prévalence de sexe féminin (57,14%). Le anatomique régions les plus touchées sont: le poignet, la main, l'épaule, le cou et les vertèbres lombaires. Les principaux symptômes sont: la combustion, la fatigue et la douleur latejante, qui se font sentir surtout dans les dernières heures. Les principaux changements dans le comportement des fonctionnaires sont: l'anxiété, la fatigue physique, de l'irritabilité et nervosité et la majorité ne pratique aucune forme d'activité physique. Le niveau de douleur mesurée

chez des sujets allant de la absolument rien à la douleur niveau 6. Les principales postures et les mouvements qui se produisent pendant le travail sont les suivants: mouvements répétitifs de la main et du poignet, une rotation du torse séance, l'appui du coude sur la table, flexion de la nuque, de l'utilisation des manuels techniques et d'entretien de la posture statique pendant de longues périodes. Le taux d'absentéisme était de zéro. CONCLUSION: Il semble opportun de mettre en place des mesures préventives telles que la gymnastique et l'ergonomie du travail d'analyse des emplois afin de réduire au minimum les éventuels problèmes rencontrés par activité laborativa.

MOTS CLES: Modification mio-articulé; Ministère des Ressources humaines; Sociétés d'Apple.

PERFIL DE LAS MODIFICACIONES MILLO'N ARTICULARES EN FUNCIONARIOS DE DEPARTAMENTO DE RECURSOS HUMANOS DE LAS SOCIEDADES DE LA RAMA DE MANZANA DE LA CIUDAD SC FRAIBURGO

RESUMEN

INTRODUCCIÓN: Los trastornos musculoesqueléticos de las enfermedades que se pueden acometer los músculos, tendones y bolas conjuntas, alcanzando principalmente miembros superiores, región escapular y cuello. Ellos se deben al trabajo en el que hay continuos movimientos repetitivos y la falta de mantenimiento de posturas, pero acto viables tiempo para la recuperación de los músculos solicitados. **OBJETIVO:** Este estudio trata de comprobar la incidencia, los síntomas y las regiones anatómicas más afectadas, además de los principales movimientos y posturas adoptadas durante el día en el trabajo y la tasa de ausentismo causado por trastornos musculoesqueléticos de los funcionarios en el departamento de recursos humanos. **MÉTODOS:** Los datos fueron recolectados a través de cuestionarios, formulado sobre la base de los instrumentos utilizados en los estudios de Massambani y Pereira. También se utiliza a escala CR10 de Borg para medir el nivel de dolor. Estos instrumentos se aplicaron en 9 empresas, por un total de 46 sujetos que trabajan en esa industria. **RESULTADOS:** El uso de los datos obtenidos se concluye que la incidencia de las alteraciones mio - articulares fue 15,56%, con predominio del sexo femenino (57,14%). Las regiones anatómicas más afectadas fueron: la muñeca, la mano, el hombro, el cuello y la columna lumbar. Los principales síntomas son: ardor, fatiga y dolor latejante, que se dejan sentir principalmente en las últimas horas. Los principales cambios en el comportamiento de los funcionarios son: la ansiedad, la fatiga física, la irritabilidad y el nerviosismo y la mayoría no practican ningún tipo de actividad física. El nivel de dolor medido en temas que van desde el dolor absolutamente nada a nivel 6. Las principales posturas y movimientos que se producen durante el trabajo son: los movimientos repetitivos con las manos y la muñeca, rotación del torso sesión, el apoyo del codo en la mesa, la flexión del cuello, la utilización de manuales técnicos y de mantenimiento de la postura estática durante largos períodos de tiempo. La tasa de absentismo es cero. **CONCLUSIÓN:** Parece oportuno establecer las medidas preventivas, como la gimnasia laboral y por tanto el análisis de los puestos de trabajo para reducir al máximo los problemas encontrados por la actividad laborativa.

PALABRAS CLAVE: Alteración Mio - Articulares; Departamento de Recursos Humanos; Las Empresas de Manzana.

PERFIL DAS ALTERAçÕES MIO-ARTICULARES EM FUNCIONÁRIOS DE DEPARTAMENTO DE RECURSOS HUMANOS DAS EMPRESAS DO RAMO DE MAçã DA CIDADE DE FRAIBURGO-SC.

RESUMO

INTRODUÇÃO: Os distúrbios músculo-esqueléticos são afecções que podem acometer músculos, tendões e bolsas articulares, atingindo principalmente os membros superiores, região escapular e pescoço. São decorrentes de trabalhos onde existem movimentos contínuos, repetitivos e manutenção de posturas inadequadas, sem que aja tempo viável para a recuperação do músculo solicitado. **OBJETIVO:** O presente estudo buscou verificar a incidência, a sintomatologia e as regiões anatômicas mais acometidas, além das principais posturas e movimentos adotados durante a jornada de trabalho e do índice de absentismo provocado pelos distúrbios músculo-esqueléticos em funcionários de departamento de recursos humanos. **MÉTODOS:** Os dados foram coletados através de questionário, formulado com base nos instrumentos usados nos estudos de Massambani e Pereira. Também utilizou-se a Escala CR10 de Borg para mensurar o nível de dor. Estes instrumentos foram aplicados em 9 empresas, totalizando 46 sujeitos que trabalham no referido setor. **RESULTADOS:** Através dos dados obtidos conclui-se que a incidência das alterações mio-articulares foi de 15,56%, com prevalência do gênero feminino (57,14%). As regiões anatômicas mais afetadas foram: punho, mãos, ombro, pescoço e coluna lombar. Os principais sintomas incluem: queimação, fadiga e dor latejante, que são sentidos principalmente no final do expediente. As principais mudanças no comportamento dos funcionários são: ansiedade, fadiga física, irritabilidade e nervosismo sendo que a maioria não pratica nenhum tipo de atividade física. O nível de dor mensurado nos sujeitos varia de absolutamente nada até dor nível 6. As principais posturas e movimentos que ocorrem durante o trabalho são: movimentos repetitivos com punho e mãos, rotação de tronco sentado, apoio de cotovelo na mesa, flexão do pescoço, uso de técnicas manuais e manutenção de postura estática por longos períodos. O índice de absentismo foi zero. **CONCLUSÃO:** Parece oportuno estabelecer medidas preventivas como ginástica laboral e análise ergonômica dos postos de trabalho, a fim de minimizar os eventuais problemas surgidos pela atividade laborativa.

PALAVRAS-CHAVE: Alterações Mio-Articulares; Departamento de Recursos Humanos; Empresas de Maçã.