90 - PROFILE OF FEMUR FRACTURES IN THE ELDERLY

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INTRODUCTION

The Pan American Health Organization - PAHO (2003) defines aging as a sequential process, individual, cumulative, irreversible, universal, non-pathological deterioration of a mature organism; itself to all members of a species, so that the time makes it less able to cope with the stress of the environment and therefore increase your chance of death. The same preference occurs during falls on the hip or the lower limb in abduction (HÜTER-BECKER, et al, 2007).

The dependence in daily living activities of the elderly is an important aspect because it is characterized as an indicator of their health and quality of life in the elderly in the presence of the falls, becoming a sign of possible weakness, immobility and instability, as well as the presence of acute or chronic diagnosis unclear.

The elderly population in developing countries is growing quickly and disorganized, always different from what occurred in developed countries indicates the need for new thinking about public policy demands for a more effective with this population in Brazil highlight the considered country, with a significant increase. In this respect, surveys of IBGE (2000), with emphasis on health care for the elderly, which is presented as a public health issue to be further explored. Within this context, is Paraiba, ranking third in number of elderly.

The femoral neck fractures are a significant health problem, socioeconomic character, with emphasis on multiple causes falls and osteoporosis as the main responsible for the number of admissions for the elderly, hospital costs burdening the frequency. In this respect, becoming a major cause of hip fracture according to a report of the Ministry of Health (2011), responsible for this high rate of fracture care in the emergency services and hospitalization.

Besides the osteoporosis, falls are one of the factors that reduce the independence of in the elderly are the complications resulting from falls, causing a decrease in functional capacity, increased hospitalizations, fear of falling again, making them more dependent, and thus decreasing their quality of life.

To Guccione, (2002) types of femoral neck fractures are divided into two stages, intracapsular (medial), intracapsular and extracapsular intermediate (lateral). Thus, it is need to be discussed about events such as the frequent occurrence of falls in the elderly.

Physical therapy can act in the prevention of falls through physical exercise, orientation as to the environmental risks, increased mobility, muscle strengthening, improving balance, gait training, improvement of the afferent sensory and ease of transfer, leading to an increased stability and allows greater independence for the recovery of confidence in their activities. (MUNIZ, et al, 2007)

The impact of the fracture in older adult life impossible for them to move around and associated with other chronic diseases may lead them to death. This present study is aimed of presenting a profile femoral neck fractures in the elderly in the city of João Pessoa – Brasil, in 2009 and 2010.

METHODOLOGY

It is a documentary study consisting of the information found directly in the System of Health Indicators and Monitoring Political for the Elderly (SISAPI) about the events on fractures of the femur in relation to: the number of admissions, proportion of admissions and rate of hospitalizations according to sex, years in the years 2009 and 2010, the city of João Pessoa - Paraíba, Brazil.

The data were compiled and organized into a chart containing the profile of the number of elderly people according to gender, presented in simple frequency and percentage.

RESULTS AND COMMENTS

The data (Table 1) presents information that is allowed to know the behavior of admissions for hip fracture considering: the number of admissions for the elderly throughout Brasil Joao Pessoa, in the in: 2009 and 2010.

Table 1 - Distribution of occurrence of hip fractures in the elderly in the municipality of João Pessoa, Paraiba. 2011.

Occurrence	2009		2010	
	Masc.	Fem.	Masc.	Fem.
Number of Hospitalizations	47,00	114,00	37,00	82,00
Proportion of hospitalizations	1,20	2,53	0,85	1,67
Tax of hospitalizations	19,36	29,45	12,76	17,97

It is observed in 2009 a greater number of hospitalizations in women with a ratio of 2.53 and hospitalization rate of 29.45, in 2010 the proportion of hospitalizations in women was 1.67 showing the prominent paired females. It is important to be alert to possible underreporting.

According to the 2000 Censo, people aged over 60 accounts for 8.56% of the population, and of these 55% are women. The life expectancy of this population was estimated at 68 years and seven months. Life expectancy for men is 64.8 years, and for women 72.6 years (IBGE, 2000).

The increase in the percentage of femoral fractures can occur under the action of forcing a light intensity due to the demineralization of pathological origin (the example, tumors) or decrease related to age and area of bone that is subject to more intense demands (HÜTER-BECKER, et al, 2007), in which older people are more vulnerable to death after suffering hip fractures.

The SUS estimated the direct cost estimate of hospitalization for treatment of osteoporotic fracture of the femur

proximal to the Supplementary Health System was significant. The total expenses of SUS with this type of hospitalization were higher. (PERRACINI; RAMOS, 2002).

In addition, the proportion of admissions of elderly people with hip fractures in elderly total admissions in SUS is not equal to the proportion of hospital costs for elderly with hip fractures in the total costs of hospitalizations of elderly people in SUS. The ratio of these two ratios should be viewed as a measure of how expensive it was for SUS admission of elderly patients with hip fractures. (FABRÍCIO, et al, 2004)

In most of the elderly is characterized as fractures secondary to falls, with a higher percentage of hip fracture is related to higher bone loss that occurs at menopause, common in older age groups, capable of triggering the serious complications in elderly patients, the example of the possibility of being permanently stopped, constituting a challenge to health professionals to make your walking as soon as possible.

The hospitalization rate was most significant among women with a decrease in the year 2010. The high percentage of admissions of elderly patients with hip fractures can be explained both by the ease of access for the elderly in the urban area. Usually this type of fracture occurs by a decline in the elderly or minor physical trauma, featuring one of the major concerns of the falls in the elderly.

Regarding gender, a study by Muniz et al (2007) found that 55 (61.80%) were female and 34 (38.20%) males, thus demonstrating a higher incidence among women.

For referred author the higher incidence of falls among women could be explained by the higher prevalence of chronic diseases, increased exposure to household chores and provide a smaller amount of lean body mass and muscle strength compared with men of similar age, in addition to osteoporosis.

This problematic for the elderly in particular, the duration of hospitalization of elderly with hip fractures since many elderly remain at home and do not notify reinforcing the idea that the high percentage of hospital discharge may be a deficiency in relation to the continuity of care to the elderly who suffered hip fractures, although it is recommended to the elderly undergoing surgery to rehabilitation and medical treatment for osteoporosis preventive and thus preventing them to return home without proper monitoring.

FINAL CONSIDERATIONS

This study has tried to present a profile of femoral neck fractures in the elderly in the years 2009 and 2010 pointing out that to understand the health problems of the elderly from falls mainly allow guide public policies to be adopted for this population. Thus, the results of this study contribute to understanding the magnitude of the subject osteoporosis and hip fractures.

This study includes only a small essay on the femoral neck fractures in the elderly only in Joao Pessoa requiring a deeper understanding to wider map the real situation in this population, with emphasis on the differences in hospitalizations between the different municipalities highlighting the impact as a health problem of the elderly that generates a high cost to the SUS.

This profile can help managers and professionals to adequate care and contextualized with actions implemented at the national level.

For Muniz, et al (2007, p: 36)

Physical therapy during the hospital is intended to prevent respiratory complications, cardiovascular, dermal and musculoskeletal, promote guidelines on the postoperative and encourage the return to daily activities, thus improving the quality of life of patients. The conducts made during hospitalization varied according to patient's needs, especially: passive mobilization exercises ativoassistidos and active resistive exercise, metabolic; breathing techniques reexpansion and clearing, transfers and weight taken, balance training, prescribing crutches.

Additional studies covering the theme osteoporosis and hip fractures are essential to increase and improve the scientific knowledge about these conditions and thus contribute to the assessment of the situation in the country falls in the elderly.

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PROFILE OF FEMUR FRACTURES IN THE ELDERLY

ABSTRACT

The fractures of the femoral neck are a significant health problem, socioeconomic character, with emphasis on multiple causes falls and osteoporosis as the main responsible for the number of admissions for the elderly, hospital costs burdening the frequency. This study aims to present a profile of femoral neck fractures in the elderly in the city of João Pessoa - Brasil in 2009 and 2010. It is a documentary study consisting of the information found directly in the System of Health Indicators and Monitoring Politics for the Elderly (SISAPI) about the events on fractures of the femur in relation to: the number of admissions, proportion of admissions and rate of hospitalizations according to sex, years in the years 2009 and 2010, the city of João Pessoa - Paraíba, Brazil. It is noted in 2009 a greater number of hospitalizations in women with a ratio of 2.53 and hospitalization rate of 29.45, in 2010 the proportion of hospitalizations in women was 1.67 showing the prominent paired females . It is important to be alert to possible underreporting.

KEY WORDS: Fracture. Femur. Hospitalization.

RESUMEN

Las fracturas del cuello femoral es un importante problema de salud, de carácter socio-económico, con énfasis en las causas múltiples caídas y osteoporosis como el principal responsable para el número de ingresos para los gastos de hospitalización de edad avanzada, sobrecargar la frecuencia. Este estudio tiene como objetivo presentar un perfil de las fracturas del cuello del fémur en las personas mayores en la ciudad de João Pessoa - Brasil en 2009 y 2010. Se trata de un estudio documental que consiste en la información que se encuentra directamente en el Sistema de Indicadores de Salud y Política de Supervisión para la Tercera Edad (SISAPI) sobre los acontecimientos en las fracturas del fémur en relación con: el número de ingresos, la proporción de los ingresos y la tasa de hospitalizaciones en función del sexo, los años en los años 2009 y 2010, la ciudad de João Pessoa - Paraíba, Brasil. Se observa en 2009 un mayor número de hospitalizaciones en mujeres con una proporción de 2,53 y la tasa de hospitalización de 29,45, en 2010 la proporción de hospitalizaciones en las mujeres fue de 1,67 mostrando las mujeres destacadas parejas. Es importante estar alerta ante posible subregistro.

PALABRAS CLAVE: Fractura. Fémur. Hospitalización.

RÉSUMÉ

Les fractures du col du fémur sont un important problème de santé, de caractère socio-économique, en mettant l'accent sur les causes multiples chutes et l'ostéoporose comme le principal responsable pour le nombre d'admissions pour les frais de l'hôpital des personnes âgées, encombrer la fréquence. Cette étude vise à présenter un profil de fractures du col du fémur chez les personnes âgées dans la ville de João Pessoa - Brésil en 2009 et 2010. Il est composé d'une étude documentaire de l'information trouve directement dans le système des indicateurs de santé et de surveillance de la politique pour les personnes âgées (SISAPI) au sujet des événements sur les fractures du fémur par rapport à: le nombre d'admissions, la proportion des admissions et le taux d'hospitalisations selon le sexe, année au cours des années 2009 et 2010, la ville de João Pessoa - Paraíba, Brésil. Il est à noter en 2009 un plus grand nombre d'hospitalisations chez les femmes avec un ratio de 2,53 et taux d'hospitalisation de 29,45, en 2010, la proportion d'hospitalisations chez les femmes était de 1,67 montrant les femelles de premier plan jumelé . Il est important d'être attentif à la sous-déclaration possible.

MOTS CLÉS: Fracture. Fémur. Hospitalisation.

PERFIL DE FRATURAS DO FÊMUR EM IDOSOS

RESUMO

As fraturas do colo do fêmur constituem um relevante problema de saúde, de caráter socioeconômico, com causas múltiplas destacando-se as quedas e a osteoporose como as principais, responsáveis pelo número de internações de idosos, onerando os custos hospitalares pela frequência. Este estudo tem o objetivo de apresentar um perfil de fraturas de colo do fêmur em idosos no município de João Pessoa -, Brasil nos anos de 2009 e 2010. Trata-se de um estudo documental constando das informações consultadas diretamente no Sistema de Indicadores de Saúde e Acompanhamento de Políticas do Idoso (SISAPI) acerca das ocorrências sobre fraturas de fêmur no que diz respeito: número de internações; proporção de internações e taxa de internações segundo sexo, nos anos nos anos: 2009 e 2010, do município de João Pessoa – Paraíba, Brasil. Nota-se no ano de 2009 um maior número de internações em mulheres com uma proporção de 2,53 e taxa de internação de 29,45; em 2010 a proporção de internações em mulheres foi de 1,67 demonstrando o destaque párea o sexo feminino. É importante se alertar para as possíveis subnotificações.

PALAVRAS CHAVES: Fratura. Fêmur. Internação.