122 - LIFE QUALITY EVALUATION IN ADULT WOMEN WITH FIBROMIALGY DIAGNOSIS

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INTRODUCTION

The fibromialgy is a form of rheumatism no inflammatory that it attacks the soft woven, however any one of the woven fibromuscle can be involved; it is woven conjunctive of the muscles, tendons and ligaments. It attacks the feminine sex predominantly in approximately 80% of the cases; with larger incidence in the adult phase; no have[13] alterations in the physical exam, being investigated the number of points sensible basically to the fingerpresion and intensity.

Authors[13,5], they defend that the fibromialgy has as fundamentaly characteristic the presence of painful points in the body, without any clinical discovery that justifies them. In that way the diagnosis is based in the individual interpretations of the patient's clinical manifestations that it favors to the isolated treatment, characterized by the segmented service. This fragmented approach seems to favor to the prolongation and aggravation of the symptoms as, pain, muscle tension, irritation and fatigue, that are factors directly linked to the life quality.

The fibromialgy, can also manifest pain, uncomfortable, rigidity and stabbings; that vary in agreement with the activities, with the hour of the day, with the climate, that ends up causing alteration in the humor, stress and depression.

The pain diffuse and chronic[11] cause also disturbances of the sleep, headache tensional and nervousness; the patient before this picture will like this be able to develop psychological alterations as the anxiety, depression and hopelessness, presenting tendencies to the isolation and seclusion, because the pain disables of relating socially; causing, important limitations in the life quality.

The suffering degree and of abandonment imposed by the painful sintomatology and for the accompanying phenomena as: the disturbance of the sleep, fatigues, chronic and other migraine, it should harm the women's acting attacked in life professional, family and social[10].

As the fibromialgy affects approximately to 5% of the population in general, a problem of public health can be considered by the high cost of the treatment, with negative repercussions about the economy. Like this the fibromialgy causes high costs in the care with the health [7].

METHODS

The present study grew at the Clinic of Applied Physiotherapy Traumatology, Orthopedics and Reumatologia - CEPAF-SESI; of the Area of Biological Sciences and of the Health of the University of the West of Santa Catarina - Joaçaba-SC.

The population was composed by women that were subject the they be treated at private clinic and they demonstrated through specific questionary their physical and psychological manifestations current of the action of the fibromialgy.

The sample was composed by a group of twenty women with age among nineteen (19) and fifty seven years (57). The used instruments were: a) Questionary WHOQOL-BREF, version in Portuguese, source O.M.S. 1998, it evaluates the life quality. b) it climbs CR10 of Borg, characterized by informing the degree of the sensorial perception of the individual's pain, c) Inventory of depression Beck (BDI), d) Inventory of Anxiety Beck (BAI) and e) it Climbs of hopelessness Beck (BHS).

The sample was submitted to the treatment physiotherapy through the physical agents Ultrasound 01Mhz, marks Ibramed - Sonopulse III; applying of two minutes in each point pain, with dosis of 0,8 w/cm2, based in the main discoveries and countersigned in the treatment plans in this woven type, and the application technique was through the direct method, with intermediate gel to facilitate the joining and the circular movements with the transdutor. It was used still Have her - it marks Ibramed type Physiotonus Four II as resource for the treatment of the painful sintomatology. The selected parameters presented high frequency (100 Hz), duration of the pulse between 30 and 50 µs and moderate intensity of the incentive. The disposition of the electrodes was monopolar, being a scatterbrained electrode (larger), coupled in the area glútea and other assets (smaller) on the point pain, staying for four (4) minutes in each point.

As technique Cinesioterapy was used of the prolongation muscle paravertebral that includes the cercical-tóraco-lumbar muscle and of ísquio-tibial. The prolongation was segmented by areas of the spine and muscles Isquio-tibial, accomplished with the lying patient in number decubitus. They occurred four series of prolongations for each side of the body, holding the area in prolongation position for fifteen seconds. The data were obtained in two moments, being before the treatment and after twenty complete sessions and, analyzed through descriptive analysis and test of Wilcoxon.

RESULTS

It was accompanied the instructions of the program in the sense of the computation of the domains. Of ownership of the information collected before and after the proposed treatment, took place analyzes descriptive statistics among the domains before and after the treatment, also took place the statistical test Wilcoxon; no parametric for two repeated analyses in different moments, as we evidenced as domain one=before / um=then of the treatment to the domain four.

Table 1-*Ranking* do Domínio: DomOne e DomUm

		N	Mean Rank	Sum of Ranks
DOMUM - DOMONE	Negative Ranks	1	1,0	1,0
	Positive Ranks	19	11,0	209,0
	Ties	0		
	Total	20		

Table 2 -Statistical test of signs of Wilcoxon for the Physical Domain

	DOMUM – DOMONE
Asymp. Sig. (2-tailed)	0,000

a Wilcoxon Signed Ranks Test

It was observed when accomplishing the descriptive statistical analysis among the domains, that the average of DomOne, did an average of 8,2 while DomUm totaled an average of 13,6 indicating in agreement with the described rank a positive index in relation to life quality, where 95% of the total of the sampling referred positive index, in what refers to the Domain 1(physical). In the sequence the Domain 2(Psicology was analyzed), before and after the treatment, identified the average before the treatment (DomTwo) that did the indicative of 10,50 and the average after the treatment (DomDois) 15,73; it was observed like this that there was a positive rank.

Table 3-Ranking of the Domínios DOMTWO and DOMDOIS

		N	Mean Rank	Sum of Ranks
DOMDOIS DOMTWO	Negative Ranks	0	,00	,00
	Positive Ranks	20	10,50	210,00
	Ties	0		
	Total	20		

Table4-Test statistical Wilcoxon: DOMTWO AND DOMDOIS

	DOMDOIS – DOMTWO
Asymp. Sig. (2-tailed)	0,000

Wilcoxon Signed Ranks Test

In relation to the Domains Social Relationship (Domain 3(THRE) and (THREE)) and environment (Domain 4 (FOUR) and (FOUR)) observed in the Table 5, the averages suggest that before the treatment the average of DOMTHRE was of 12,3333, while after the treatment the average DOMTRES, rose for 14,0667. In the same way the average of DOMFOUR before the treatment 11,0750 and after the treatment the average of DOMQUATRO rose for 14,2500. It was also observed, when comparing the rank of these domains that both presented positive evolution when compared to the domains before the treatment.

Table 5-Ranking of the Domains: DOMTHREE AND DOMTHREE, DOMFOUR AND DOMFOUR

		N
DOMTRES - DOMTHRE	Negative Ranks	0
	Positive Ranks	13
	Ties	7
	Total	20
DOMQUATRDOMFOUR	Negative Ranks	0
	Positive Ranks	20
	Ties	0
	Total	20

Table 6 - Test of Significance of Wilcoxon for Domain Environment and Domain Social Relationships

	DOMTRES – DOMTHRE	DOMQUATR – DOMFOUR
Asymp. Sig. (2-tailed)	0,001	0,000

Wilcoxon Signed Ranks Test

Of ownership of the results above, it can be observed that there was increase in the positive sense of the quality of life of the patients bearers of Fibromialgy, after the accomplishment of the sessions physiotherapy, when verified through the questionnaire Whoqol - Bref.

In relation to scale CR10 of Borg, the subjects interviewees two told to feel pain index no.5; one indicated in the 7; three suggested in the 8 five the in the 9; three pointed in the 10; other three designated in the 11 three marked the basic form" . In that way we can evidence that of the twenty subjects interviewees eighteen presented pain index that varied of Very Strong " pain " (7) until " Absolute " Maximum; the total of 90% of the subjects interviewees, these manifested level of pain perception being anchored in the equivalence of worst picture pain lived previously. After the end of the twenty sessions with the procedures physiotherapy , the subjects, presented an index of pain perception, that varied of " WEAK " acted by the in the 2 until the STRONG " index ", acted by the in the 5.

However, three patients told to feel index of pain no2, two patients indicated no2,5, eight patients suggested in the 3, three patients pointed in the 4; and other four patients designated in the 5, values exposed in the Table 7.

Table 7 - pain Index after in accordance treatment climbs CR 10

Número de Pacientes	Índice de Dor	%
03	2	15
02	2,5	10
08	3	40
03	4	15
04	5	20
TOTAL	20	100

Table 8 - Level of perception of Pain Level of Perception of Pain

Nÿvel de Percepÿÿo de Dor	No. sujeitos	%
DM e MA	18	90
Dor Forte	2	10
TOTAL	20	100

Table 9 – Level of Perception of pain after Treatment

Nível de Percepção de Dor	No. sujeitos	%
Dor forte	4	20
Moderada a Mínima	16	80
TOTAL	20	100

For the exposed, it was verified that of the twenty subjects interviewees after the treatment physiotherapy, thirteen (13), they described that the index of pain perception varied between moderate and weak, characterizing a total of 65% of the subject with LIGHT pain perception. Important decrease was evidenced in the levels of pain perception, because, 90% of the subjects interviewees told PAIN MAXIMUM (DM) and or MORE INTENSE PAIN POSSÍBLE(MA) and after the treatment 80% of the subjects they noticed the pain as being just moderate the low. Like this, it was noticed important reduction in the pain indexes DM and MA, where those levels were not marked; four subjects noticed the pain level as being strong (5), meaning 20%, as presented in the Table 9.

The measure of the intensity of Depression was accomplished through Depression Beck's Inventory (BDI). In accordance with the pointed answers for the subjects before treatment physiotherapy to be accomplished, it was noticed that three of them were classified as tends MINIMUM " degree ", what indicates a percentage of 15%., two subjects were classified as " LIGHT ", 10%, already fifteen subjects were classified with MODERATE " degree " of the patients' totality 75%. It was observed like this that 85% of the subjects interviewees presented depression levels among LIGHT(10%) and MODERATE (85%).

Table 10 - Percentile Classification of the Subjects for the Inventory of Depression of Beck before the treatment

Classification	Número	%
Moderate	3	15
Light	2	10
Minimum	15	75
Serious	-	-
Total	20	100

Table 11 - Percentile Classification of the Subjects for the Inventory of Depression of Beck after the treatment o

Classification	Número	%
Minimum	15	75
Light	5	25
Moderate	-	-
Serious	-	-
Total	20	100

To the I finish of the sessions, it was noticed that the MODERATE level that previously had been indicated by 75% of the subjects, it was not marked, suggesting in that way, a positive answer. It was also noticed that the percentage of subjects indicating a MINIMUM perception level, it was of 75% and the LIGHT level of 25%, as observed in the Table 11.

In the measurement of the intensity of the symptoms of the anxiety, supplied by anxiety Beck(BAI'), it was observed that three subjects described characteristics that classified them how tends anxiety in the MINIMUM " level " 15%; seven subjects were classified as tends LIGHT " level " 35%; six subjects were classified as presenting MODERATE " level " 30% and four subjects was called as tends SERIOUS " level " 20%.

Table 12 - Percentile Classification of the Subjects for the Inventory of Anxiety of Beck

Classification	Número	%
Mínimum	3	15
Light	7	35
Moderate	6	30
Serious	4	20
Total	20	100

Table 13 - Comparison of levels of Ansiety

Classification	Número
Mínimum/ Light	10
Moderate/ Serious	10
Total	20

To the we analyze the levels after the treatment the absence of anxiety perception was verified in the levels MODERATED and SERIOUS. It was also verified, that the anxiety level indicated as LIGHT, had reduction of 5%, doing a totality of 30%. In this sense, it was verified although the MINIMUM levels, passed of the indication of 15%, for 75% of the sample, suggesting like this, decrease in the levels of the women's anxiety attacked by fibromialgy.

Table 14 - Percentile Classification of the Subjects for the Inventory of Anxiety of Beck after the Treatment

Classification	Número	%
Mínimum	14	70
Light	6	30
Moderate	-	-
Serious	-	-
Total	20	100

Table 15 - Percentile Classification of the Subjects for the Scale of Despair of Beck before the treatment

Classification	Número	%
Mínimum	8	40
Light	7	35
Moderate	5	25
Serious	-	-
Total	20	100

The negative expectation regarding the close and remote future can be called Despair and the scale that operacionalizacion the components that it classifies are her called of Scale of hopelessness Beck(BHS). When observing the despair levels appeared by the sample, revealed us that eight subjects indicated the MINIMUM level 40%, seven subjects pointed the LIGHT level 35%, the MODERATE level was disbelieved by five subjects 25%. The SERIOUS level of despair, it was not suggested by none of the subject of the sample.

Concluded the procedures physiotherapy, it was obtained percentile that suggest decrease in the levels of despair of the sample, it was observed in this scale, that not only the SERIOUS level had left of being indicated, but also the MODERATE level, was not more part of the indications of the sampling. The MINIMUM level was indicated by 65% and the LIGHT level, had the prescription of 35% the subjects.

Table 16 - Percentile Classification of the Subjects for
the Scale of Despair of Beck after the treatment

Table 16 - Percentile Classification of the Subjects for the Scale of Despair of Beck after the treatment

Classification	Número	%
Mínimum	13	65
Light	7	35
Moderate	-	-
Serious	-	-
Total	20	100

It was noticed like this positive decrease in the depression levels, anxiety and despair, that it might have favored in the improvement of the life quality of these sicken.

CONCLUSION

The results found in this study accordingly their limitations drive us to assure that the women with Syndrome of Fibromialgy presented in the first moment, pré-treatment, alterations in the life quality in the negative sense, according to analysis of the questionnaire Whoqol - Bref. Also, the perception scale CR10 of Borg revealed high levels of pain. The psychological aspects as depression, anxiety and hopelessness resulted in negative levels. The physical agents' use as Ultrasound, you Have and Cinesioterapy with specific technique of prolongation, were proposed in the sense of interfering in those altered conditions, like this the found results appear for the effectiveness of that treatment verified in a second moment, powder-treatment, being the following insured conclusions:

1 It was noticed after the sessions physiotherapy , that the statistical results demonstrated that there was statistical significant (p <0,00), for all of the domains of Whoqol - Bref: 1 (physical), 2 (psychological), 3 (social relationships) and 4 (environment) analyzed, pointing significant improvement in the life quality.

2 It was verified that the pain level came in inferior scales, limiting them, the only 20% of the subject with perception of strong pain, the other subjects noticed the pain as being weak and moderate, totaling 80% of the sample.

3 Regarding the psychological aspects, there was her decrease of the levels presented in the first interview, evidencing gets better of these levels regarding the depression inventory, anxiety and despair.

Like this, analyzing these results, it makes possible to conclude us that the use of resources physiotherapy as Ultrasound, you HAVE and Cinesioterapy, can favor positively in the analyzed women's treatment attacked by fibromialgy.

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LIFE QUALITY EVALUATION IN ADULT WOMEN WITH FIBROMIALGY DIAGNOSIS
Abstract:
INTRODUCTION: Fibromialgy is a form of rheumatism that attacks woven soft of the body causing pain, to dilate, fatigues, contraction muscle, to shorten muscle, besides psychological upset as depression, anxiety and hopelessness; attacking the feminine sex predominantly. The diffuse pain and chronic cause also disturbances of the sleep, headache tensional and nervousness; being able to the patient to develop, tendencies to the isolation and seclusion, because the pain disables of relating socially; causing, important limitations in the life quality. **OBJECTIVE:** To evaluate the quality of adult women's life with fibromialgy diagnosis. **METHODS:** They were used, questionnaire of evaluation of the life quality - Whoqol - Bref, version abbreviated in Portuguese, the Inventories of Beck (Depression, Anxiety and hopelessness); and scale of pain of Borg (CR10). The sample was composed by twenty subjects female, with clinical diagnosis of fibromialgy, which were submitted to the treatment physiotherapy (Ultrasound, TENS, Cinesioterapy). The data were obtained in two moments, being before the treatment and after twenty complete sessions, analyzed through descriptive analysis and test of Wilcoxon. **RESULTS**: The found results drive us to assure that the women with Syndrome of Fibromialgy presented in the first moment, pré-treatment, alterations in the life quality in the negative sense, high levels of pain; psychological aspects in negative levels. The physical agents' use as Ultrasound, you Have and Cinesioterapy, were proposed in the sense of interfering in those conditions, in this sense there were changes in the positive sense of those alterations after the accomplishment of the treatment. **CONCLUSION:** Analyzing the results, it can be observed that there was increase in the positive sense of the quality of life of the patients bearers of Fibromialgy, after the accomplishment of the sessions physiotherapy, when verified through the questionnaire Whoqol - Bref.
Words - Key: Life quality, Fibromialgy, Treatment physiotherapy

ÉVALUATION DE LA QUALITÉ DE VIE DANS DES FEMMES ADULTES AVEC LE DIAGNOSTIC DE FIBROMIALGIE.
Resumé
Introduction: Le fibromialgie est une forme de rhumatisme que attaque les tissus mous du corps entraînant la douleur, l'oedème, la fatigue, la contrature et les rétractions musculaires, au delà des bouleversements psychologiques comme la dépression, l'inquiétude et la désespérance; attaque surtout le sexe féminin. La douleur diffuse et chronique s'ameute également de la migraine tensional, l'énervement et les troubles du sommeil, pouvant en mesure le patient pour développer la tendance à l'isolement et au reclusion, donc la douleur le neutralise de si se reliant socialement, entraînant la réduction importante de la qualité de la vie. **Objectif**: Pour évaluer la qualité de vie des femmes adultes avec le diagnostic de fibromialgie. **Méthodes**: Le questionnaire de l'évaluation de la qualité de vie -Whoqol- Bref, version raccourcie dans le portugais, les inventaires de Beck (dépression, inquiétude et désespérance) et l'escale de la douleur de Borg(CR10) avaint été employés. L'échantillon s'est composé pour 20 sujets du sexe féminin, avec le diagnostic clinique de fibromialgie qui avait été soumis au traitement fisiothérapeutique (Ultrason, Tens, et Cinesiotherapie). Les données avaient été obtenues à deux moments, étant avant le traitement et après 20 sessions complets et analysées par l'analyse descriptive et l'essai de Wilcoxon. **Résultats:** Les résultats jointifs les mènent à l'assurer que les femmes avec le syndrome de fibromialgie se sont présentées au premier moment, l`avant-traitement , les changements de la qualité de vie dans la direction négative. Ceci veut indiquer les niveaux élevés de la douleur et l' aspects psychologiques dans les niveaux négatifs. L'utilisation des agents physiques comme Ultrason, Tens, et Cinesiotherapie ils avaient été considérés comme dans la direction d'intervenirs avec ces conditions. Dans cette direction après les changements eus de la direction positive de ces changements l'accomplissement du traitement. **Conclusion**: Analysant les résultats, peut être observer ensuite qu'il a eu l'augmentation de la direction positive de la qualité de vie des patients portants du fibromialgie, aprés l'accomplissement des sessions fisiothérapeutiques, une fois vérifié par le questionnaire Whoqol-Bref.
Mots-Clefs: qualité de vie , fibromialgie, traitement fisiothérapeutique

EVALUAR LA CALIDAD DE VIDA, DE LAS MUJERES ADULTAS CON DIAGNOSTICO DE FIBROMIALGIA
Resumen
INTRODUCCIÓN: La fibromialgia es una forma de reumatismo que acomete tejidos moles del cuerpo causando dolor, edema, fadiga, cansancio, contractura y retracciones musculares, además del trastorno psicológico como depresión, ansiedad y falta de esperanza; acometiendo predominantemente el sexo femenino. El dolor difusa y crónica es también la causa del disturbio del sueno, jaqueca por tensión y nerviosismo; puede la enferma desenvolver tendencias al aislamiento y reclusión, pues el dolor la imposibilita de relacionarse socialmente; causando, limitaciones importantes en la calidad de vida. **OBJETIVO**: Evaluar la calidad de vida, de las mujeres adultas con diagnostico de fibromialgia. **MÉTODOS**: Fueron utilizados, cuestionarios de evaluación da calidad de vida Whoqol Bref ,versión abreviada en portugués, los Inventarios de Beck (Depresión, Ansiedad y Desesperanza); y escala de dolor de Borg (CR10). La muestra fue compuesta de veinte sujetos del sexo femenino, con diagnostico clínico de fibromialgia, las cuales fueran sometidas al tratamiento fisioterapéutico (Ultra Son, Tens, Cinesioterapia). Los dados fueron obtenidos en dos momentos, antes del tratamiento y después de veinte sesiones completas, analizadas a través de análisis descriptivas y teste de Wilcoxon. **RESULTADOS**: Los resultados encontrados nos conducen asegurar que las mujeres con Síndrome de Fibrolmiagia presentaban en el primer momento, pre-tratamiento, alteraciones en la calidad de vida en el sentido negativo, niveles elevados de dolor; aspectos psicológicos en niveles negativos. El uso de agentes físicos con Ultra-Son, Tens y Cenesioterapia, fueron propuestos en el sentido de interferir en esas condiciones, en ese sentido hubo cambio en el sentido positivo de esas alteraciones después de realizado el tratamiento. **CONCLUSIÓN**: Analizando los resultados, se puede observar que hubo aumento en el sentido positivo en la calidad de vida de las enfermas portadoras de Fibrolmialgia, después de la realización de las sesiones fisioterapéuticas, cuando verificadas a través del cuestionario Whoqol Bref. P**ALABRASCLAVES**:Calidad de vida, Fibromialgia, Tratamiento Fisioterapéutico.

AVALIAÇÃO DA QUALIDADE DE VIDA EM MULHERES ADULTAS COM DIAGNÓSTICO DE FIBROMIALGIA
Resumo:
INTRODUÇÃO: A fibromialgia é uma forma de reumatismo que acomete tecidos moles do corpo causando dor, edema, fadiga, cansaço, contratura e retrações musculares, além de transtornos psicológicos como depressão, ansiedade e desesperança; acometendo predominantemente o sexo feminino. A dor difusa e crônica causa também distúrbios do sono, enxaqueca tensional e nervosismo; podendo a enferma desenvolver, tendências ao isolamento e reclusão, pois a dor a impossibilita de relacionar-se socialmente; causando, limitações importantes na qualidade de vida. **OBJETIVO**:Avaliar a qualidade de vida de mulheres adultas com diagnóstico de fibromialgia. **MÉTODOS**:Foram utilizados, questionário de avaliação da qualidade de vida - *Whoqol Bref*, versão abreviada em português, os Inventários de Beck (Depressão, Ansiedade e Desesperança); e escala de dor de Borg (CR10). A amostra foi composta por vinte sujeitos do sexo feminino, com diagnóstico clínico de fibromialgia, as quais foram submetidas ao tratamento fisioterapêutico (Ultra Som, Tens, Cinesioterapia). Os dados foram obtidos em dois momentos, sendo antes do tratamento e após vinte sessões completas, analisados através de análise descritiva e teste de Wilcoxon. **RESULTADOS**: Os resultados encontrados conduzem-nos a assegurar que as mulheres com Síndrome de Fibromialgia apresentavam no primeiro momento, pré-tratamento, alterações na qualidade de vida no sentido negativo, níveis elevados de dor; aspectos psicológicos em níveis negativos. O uso de agentes físicos como Ultra-Som, Tens e Cinesioterapia, foram propostos no sentido de interferir nessas condições, neste sentido houve mudanças no sentido positivo dessas alterações após a realização do tratamento. **CONCLUSÃO**: Analisando os resultados, pode-se observar que houve aumento no sentido positivo da qualidade de vida das enfermas portadoras de Fibromialgia, após a realização das sessões fisioterapeuticas, quando verificados através do questionário *Whoqol Bref*.
Palavras Chaves: Qualidade de vida, Fibromialgia, Tratamento Fisioterapeutico.