10 - PREDICT OF HEART RISK: APPROACH TO THE INDEX BRACHIAL ANKLE (ITB) IN THE ESTIMATE OF THE OBSTRUCTIVE ARTERIAL DISEASE OF INFERIOR MEMBERS (DAOMI) IN OLDER PEOPLE OF THE AREA OF CARIRI FROM CEARÁ, BRAZIL.

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INTRODUCTION

The number of elderly people is increasing gradually because of the regular growth of the life expectation. Like this, it is expected that the average of age of the Brazilian population in the year of 2020 is around 73 years, so much for men as women. According to data of IBGE, with base in the census of 2000, exists about 8,6% of elders in the country. The individuals in that phase of the life are more vulnerable to degenerative diseases as the cardiovascular ones, once with the progress of the years the system cardiovascular raisin for a series of alterations, such as limitations of the systemic circulation, in the heart functions and reduction in the function of baroreceptors.

The heart problems, mainly the occlusive arterial diseases outlying (DAOP), that in largest part it happens in the inferior limbs, then known as disease arterial oclusiva of inferior limbs (DAOMI), it comes if showing very present in the people's life in every world territory, for which is considered, among other aspects, the age as a risk factor for acquisition of this pathology.

The predict of heart risk and of DAOP they have been used more and more and thoroughly studied in the extent of the sciences of the health, especially when it is used techniques of easy application. Like this, the use of the Index Brachial Ankle (ITB), as clinical instrument for precocious detection of DAOMI and for aid in the classification of the cardiovascular risk, it is being used gradually as independent predictor of cardiovascular events, mainly for being of low cost and easy applicability (MAKDISSE, 2004).

Like this, is justified the accomplishment of this study once the number of elders is growing in every country, and the researches regarding that pathology in the specified population (DAOMI), as well as to the application of ITB as preditor of heart risk, are scarce. This way, the objective of this study is to analyze the risk of the obstructive arterial disease of inferior limbs (DAOMI) through the index brachial ankle (ITB) in elders of the Cariri in Ceará.

MATERIAL AND METHODS

Elapses of a study of the transverse type, with the use of data primary, quantitative and of descriptive character. The population of the study was with people of age above 65 years, volutary. The sample was constituted of 31 individuals, being 15 men and 16 women, average of 73,29+5,75 year old age , visitors of the Social Service of the Trade - SESC and residents of the neighborhoods PIO XII and SÃO MIGUEL in the city of Juazeiro do Norte, Ceará. The material used for the collection of data was constituted of questionnaire with questions about habits, lifestyle and clinical anamnesis, a stretcher, esfigmomanômetro aneroide and 01 stethoscope, both of mark BD.

For the efetivação of the collection of data the following procedure was used: The people were invited to participate in the study, being presented the objective of this and explained as they would be proceeded to the measures, being given to these the Terms of Free Consent (TCLE) and requested the volunteers to the signature of the same. In the sequence, they were addressed for the completion of the questionnaire, being, soon afterwards, evaluated individually. The evaluation felt starting from the submission of the subjects to the analysis of the systolic blood pressure (PAS) of the right arms and left arms, and of the right legs and left legs , setting out the Ankle-brachial Index. As it demonstrates the table 01:

TABLE No. 01: RELATIONSHIP BETWEEN VALUE OF ITB AND GRAVITY OF THE OBSTRUCTIVE ARTERIAL DISEASE OF INFERIOR LIMBS (DAOMI)

VALUE OF ITB	*GRAVITY DE DAOMI*
> 0,90	NORMAL
0,71 a 0,90	LIGHT
0,41 a 0,71	MODERATE
≤ 0,40 e ≥ 1,40	SERIOUS

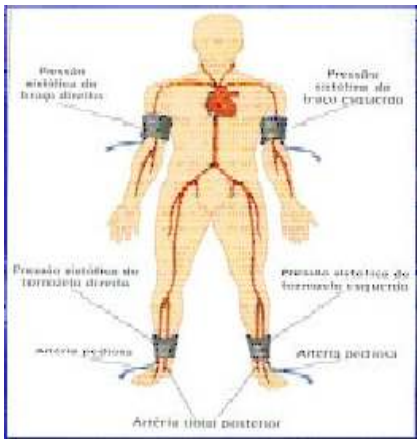
Source: MAKDISSE (2004)

The measures were made and verified in rest under the following criteria: not to have accomplished physical effort, not to have ingested foods (meal) heavy and nor water in surplus, to be with the bladder and intestine emptiness, to have slept of 06 (six) to 08 (eight) hours in the night previous of the test, not to have ingested stimulants, not to have smoked at least 04 (four) hours before the test, it was not submitted to too much stress of any activity. The measures obeyed the following procedures:

ILLUSTRATIONS 01, 02, 03, 04, 05, 06,07



ILLUSTRATION 08 - PROCEDURE FOR THE MEASURE OF ITB



After the registration of the data a database was made in statistical package Statiscal Package Goes Social Science (SPSS) version 13.00 and it was fallen back upon descriptive statistical procedures of measures of central tendency and dispersion. For the statistics inferencial the test of correlation coefficient was used "r" of Pearson, being adopted the level of trust of 5%.

RESULTS

The blood pressure levels considered normal they are verified when the systolic pressure (maxim) it doesn't pass of 130 and the diastólica (low) it goes inferior to 85 mmHg. In the picture below, we see the variations of the normal blood pressure and hypertension in people over 18 years old in mmHg.

Classification of the Blood pressure Sanguine in people over 18 years of Age or More *

SYSTOLIC (mm Hg)	*DIASTÓLICA (mm Hg)*	*CATEGORY*
<130	<85	Normal
130-139	85-89	Hight Normal
140-159	90-99	Minor Hypertension (Apprenticeship 01)
160-179	100-109	Moderate Hypertension (App. 02)
180-209	110-119	Serious Hypertension (App. 03)
≥ 210	≥ 120	Very Serious Hypertension (App. 04)

Source: Joint Committe on Detection, and Treatment of High Blood Pressure - 1993

*Without taking medication anti-hipertensiva and without sharp disease. When the systolic pressures and diastólica fall in different categories, the highest category should be selected.

In the studied group, it was observed that the average of of the values of PAS are classified as inside of the normal strip for the female individuals (PAS <130), and inside of the strip of minor hypertension (PAS = 140-59) for the male individuals, indicating that individuals of the masculine gender of the studied group, can be more subject to the attack of pathologies related to the cardiovascular system (SCV), as arterial hypertension, DAOP, among others.

Still comparing for gender, the values of PAS for right and left arm, right and left leg was in higher strips in the individuals of the masculine gender. Similar values were found in studies accomplished by PEREIRA, 2006, in individuals of both sexes, where the average of PAS of the masculine group was of PAS = 145mmHg and of the feminine group PAS=120mmHg, indicating the predisposition once again of that group to the appearance of complications related to SCV.

In if treating of analysis of the studied group, it was observed that the average of the values of PAS is classified as inside of the high normal strip (PAS<133,5), in other words, inside of the normality parameters. The medium values of found ITB don't expose the studied population DAOMI and cardiovascular risk, very away minimum values of the ITB-left and ITB-right exist same to 0,9, what frames such cases in the risk area (cut point for values <0,90). Were found correlations among Pains in the Legs When Walks (DPQC) and Classification Left ITB (r=0,964), Place of the Pain (LD) and Practice Physical Activity (PAF) (r = 0,935), PAF and PASBE (r=0,750), Arterial Hypertension (H.A) and Age (ID) (r=0,970), PASBD and LD (r=0,8330), PASPD and Classification Left ITB (=0,904), PASPE and ID (r=0,955), ITB Direito and Classification Left ITB (= 0,793), Left ITB and PASPD (r=0,864). The results for gender are represented in the table 02.

Table No. 03 - Results of Average, Standard Deviation, Maximum and Minimum separated by sex.

Variable	MASCULINE				*FEMININE*				*FEM / MAS*
	Média	Dp	Máx	Mín	Média	Dp	Máx	Mín	"r" de Pearson
AGE	73,66	6,25	86	67	72,93	5,36	85	65	0,970 HIPERTENSYON ARTERIAL
PASBD	142,00	28,33	190	110	125,62	15,47	160	110	0,830 PLACE ON THE PAIN
PASBE	143,33	27,16	190	100	124,37	14,59	150	110	0,750 PRACTICE OF PHISYCAL ACTIV
PASPD	146,00	29,22	200	110	120,62	9,97	140	110	0,904 CLASSIFICATION ITB LEFT
PASPE	142,00	28,58	190	110	126,87	14,00	160	110	0,955 AGE
ITB RIGHT	1,00	0,06	1,09	0,86	0,95	0,06	1,00	0,79	0,793 CLASSIFICATION ITB LEFT
ITB LEFT	0,98	0,08	1,09	0,79	0,99	0,06	1,17	0,92	0,864 PASPD

In the study accomplished by Pereira (2006), that it verified the risk of obstructive arterial disease of inferior limbs through the method of ITB in a group of volunteers, of both sex, with average of age of 24,54+13,3, it observed a correlation between ITB Direito and PAS left leg (r=0,999), Left ITB (ITBESQ) and PASBD (r=0,871) and the women presented larger ITBESQ than the one of the men and these for time larger values for ITBDIR, and they presented a measure of PAS of right and left arm and right and left leg higher than the women, confirming that the masculine gender can be more subject to cardiovascular problems.

To PAS came high (Table no. 01), according to the parameters of the Brazilian Society of Cardiology, although it doesn't indicate that ITB is in enough value to indicate the presence of DAOMI).

Table 01

		Frequency	*Valid Percent*	*Cumulative Percent*
Valid	Normal	20	64,5	64,5
	Minor Hypertension (Apprenticeship 01) (140-159 mmHg)	5	16,1	80,6
	Moderate Hypertension (App. 02)	3	9,7	90,3
	Serious Hypertension (App. 03)	3	9,7	100,0
	Totality	31	100,0	
Missing	System	1		
Totality		32		

Partners apud Makdisse (2004), it evaluated patient of high risk for development of the disease atherosclerotic (age 70 years and the smokers and diabetics with age 50 years), the prevalence of DAOMI was of almost 30%. With the use of ITB, it allowed the detection of more than 800 new cases of the disease (44% of the total) and that certainly will benefit of the precocious adoption of preventive measures.

The Rotterdan Study, mentioned by Makdisse, 2004, evaluating 6.389 individuals with 55 year-old age aiming at to compare the value predict of methods no aggressive of arteriosclerosis, such like x-ray of the abdomen, carotid doppler and ITB, it concluded that all of the exams were classified as good predict of infarcts of the heart muscle, independent of the presence or not of cardiovascular risk factors

Makdisse, 2004, it emphasizes the importance of The Strong Heart Study, that was the first study of population base to examine the relationship between mortality and values of ITB below(<0,90) and above (>1,4) of the considered normal, with 4.393 American Indians being these proceeded on average by eight years. Such a study ended that values of ITB> 1,4 are mortality predict as important as value below 0,9 and they should be considered in the bedding of cardiovascular risk.

CONCLUSION

With base in the results the study allowed to end that:

The average of the values of PAS is classified as hight normal presenting a larger risk for the male individuals; the medium values of ITB don't expose the studied population DAOMI and cardiovascular risk. It was verified in this sample that the age is a factor of so much risk in the appearance of DAOMI and of the arterial hypertension.

There are significant correlations among Pains in the Legs When Walks (DPQC) and Classification Left ITB (r=0,964) and Arterial Hypertension (H.A) and Age (ID) (r=0,970) demonstrating the age to be a factor of so much risk in the appearance of DAOPI as of the arterial hypertension in the studied groups.

Subsequent studies should be encouraged in the sense of verifying the values of ITB that are predict of DAOMI. It is stood out although the approach to the index brachial ankle (ITB) in the estimate of the occlusive arterial disease of inferior limbs (DAOMI) in elderly it is a new subject, with literature recent and scarce researches. It is indicated therefore larger studies regarding the subject.

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PROGRAMA DE PÓS-GRADUAÇÃO STRICTO SENSU EM CIÊNCIAS DA MOTRICIDADE HUMANA - PROCIMH-UCB/RJ - BRASIL
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PREDICT OF HEART RISK: APPROACH TO THE INDEX BRACHIAL ANKLE (ITB) IN THE ESTIMATE OF THE OBSTRUCTIVE ARTERIAL DISEASE OF INFERIOR MEMBERS (DAOMI) IN OLDER PEOPLE OF THE AREA OF CARIRI FROM CEARÁ, BRAZIL.

SUMMARY

INTRODUCTION: The predict of heart risk and of occlusive arterial diseases outlying (DAOP) measured by techniques of easy application have been studied thoroughly in the extent of the sciences of the health. OBJECTIVE: To analyze the risk of Occlusive Arterial Disease of Inferior Limbs (DAOMI) for levels of Index Brachial Ankle (ITB), in the elderly. MATERIAL AND METHODS: Elapses of a study descriptive, transverse, sample 31 voluntary individuals, with average of 73,29 5,75dp year old age, submitted to the anamnesis tests, systolic blood pressure (PAS) of the arms right (BD) and left (BE) and of the legs right (PD) and left (PE), disposing in practice the ITB, with cut point of Serious for values of <0,40 and> 1,40, 0,41 to 0,70 Moderate 0,71 to 0,90 Light,> 0,90 Normal. The analytical plan used program SPSS 13.0, for statistics of Average, Standard Deviation, Maximum and Minimum, "r" of Pearson. Level of trust 5%. RESULTS: The found values were: ITB-RIGHT 0,970,06, ITB-ESQUERDO 0,990,07, PASBD 133,5423,74, PASBE 133,5423,31, PASPD 132,9024,79, PASPE 134,1923,20. O "r" de *Pearson* find correlations among Pains in the Legs When Walks (DPQC) and Classification Left ITB (r=0,964) Place of the Pain (LD) and Practice Physical Activity (PAF) (r = 0,935), PAF and PASBE (r=0,750), Arterial Hypertension (HA) and Age (ID) (r=0,970), PASBD and LD (r=0,8330), PASPD and Classification Left ITB (r=0,904), PASPE and ID (r=0,955), ITB Direito and Classification Left ITB (= 0,793), Left ITB and PASPD (r=0,864). CONCLUSION: The average of the values of PAS is classified as hight normal presenting a larger risk for the male individuals; the medium values of ITB don't expose the studied population DAOMI and cardiovascular risk, this way it was verified in this sample that the age is a factor of risk in the appearance of DAOMI and of the arterial hypertension.

Key-words: Elderly; Index Brachial Ankle; Occlusive Arterial Disease of Inferior Limbs.

PRÉDISEZ DE RISQUE DU COEUR: APPROCHEZ À L'INDEX CHEVILLE BRACHIALE (ITB) DANS L'ÉVALUATION DE LA MALADIE ARTÉRIELLE OBSTRUCTIVE DE MEMBRES INFÉRIEURS (OADIM) DANS AÎNÉS DE LA RÉGION DE CARIRI DE CEARÁ, BRÉSIL.

RÉSUMÉ

INTRODUCTION: Le prédisez de risque du coeur et de maladies artérielles occlusives éloigné (DAOP) a mesuré par techniques d'application facile a été étudié entièrement dans l'ampleur des sciences de la santé. OBJECTIF: Analyser le risque de Maladie Artérielle Occlusive de Membres Inférieurs (DAOMI) pour niveaux d'ITB, dans les personnes âgées. MATIÈRE ET MÉTHODES: Étude descriptif, transversal, goûtez 31 individus volontaires, avec moyenne de 73,295,75dp âge de années, soumis aux épreuves de l'anamnèse, tension systolique (PAS) des bras redressez (BD) et gauche (BE) et du droit des jambes (PD) et gauche (PE), disposer dans entraînement l'ITB, avec point de la coupe de Sérieux pour les valeurs de <0,40 et> 1,40, 0,41 à 0,70 Modéré 0,71 à 0,90 Lumière,> 0,90 Normal. Le plan analytique a utilisé le programme SPSS 13.0, pour statistiques de Moyenne, Déviation Standard, Maximum et Minimum, "r" de Pearson. Niveau de confiance 5%. RÉSULTATS: Les valeurs trouvé étaient: ITB-DIREITO 0,970,06, ITB-ESQUERDO 0,990,07, PASBD 133,5423,74, PASBE 133,5423,31, PASPD 132,9024,79, PASPE 134,1923,20. O de "r" Pearson trouvent des corrélations parmi Douleurs dans les Jambes Quand Marche (DPQC) et la Classification a Laissé ITB (r=0,964) Place de la Douleur (LD) et Entraînement Activité Physique (PAF) (r = 0,935), PAF et PASBE (r=0,750), Hypertension Artérielle (HA) et Âge (CARTE D'IDENTITÉ) (r=0,970), PASBD et LD (r=0,8330), PASPD et Classification ont Laissé ITB (r=0,904), PASPE et CARTE D'IDENTITÉ (r=0,955), ITB Direito et Classification ont Laissé ITB (= 0,793), ITB Gauche et PASPD (r=0,864). CONCLUSION: La moyenne des valeurs de PAPAS est classée comme normale de l'hight qui présente un plus grand risque pour les individus virils; les valeurs moyennes d'ITB n'exposent pas DAOMI et risque cardio-vasculaire à la population étudiée, ce chemin qu'il a été vérifié dans cet échantillon que l'âge est un facteur de risque dans l'apparence de DAOMI et de HA.

Mots-clef: Assez âgé; Index Cheville Brachiale; Maladie Artérielle occlusive de Membres Inférieurs.

PREDIGA DE RIESGO DEL CORAZÓN: ACERQÚESE AL ÍNDICE EL TOBILLO BRAQUIAL (ITB) EN LA ESTIMACIÓN DE LA ENFERMEDAD ARTERIAL OBSTRUCTIVA DE MIEMBROS INFERIORES (OADIM) EN LAS PERSONAS MAYOR DEL ÁREA DE CARIRI DE CEARÁ, BRASIL.

Resumen

INTRODUCCIÓN: Prediga de riesgo del corazón y de enfermedades arteriales oclusivas periférico (DAOP) midió por las técnicas de aplicación fácil se ha estudiado completamente en la magnitud de las ciencias de la salud. OBJETIVO: Analizar el riesgo de DAO de Miembros Inferiores (DAOMI) para los niveles de ITB, en el anciano. MATERIAL Y MÉTODOS: Estudio descriptivo, transverso, pruebe a 31 individuos voluntarios, con el promedio de 73,295,75dp vejez del año, sometidos a las pruebas del anamnesis, tensión arterial sistólica (los PAS) de, brazos corrija (BD) e izquierdo (BE), y del derecho de las piernas (PD) e izquierdo (PE), disponiendo en la práctica el ITB, con el punto del corte de Serio: valores de <0,40 y> 1,40, 0,41 a 0,70 Moderada, 0,71 a 0,90 Luz,> 0,90 Normal. El plan analítico usó el programa SPSS 13.0, para las estadísticas de Promedio, Desviación Normal, Máximo y Mínimo, "r" de Pearson. Nivelado de confianza 5%. RESULTADOS: Los valores encontraron eran: ITB-DIREITO 0,970,06, ITB-ESQUERDO 0,990,07, PASBD 133,5423,74, PASBE 133,5423,31, PASPD 132,9024,79, PASPE 134,1923,20. O "r" de Pearson encuentran las correlaciones entre los Dolores en las Piernas Cuando Camina (DPQC) y la Clasificación Dejó ITB (r=0,964) el Lugar del Dolor (LD) y Práctica la Actividad Física (PAF) (r = 0,935), PAF y PASBE (r=0,750), la Hipertensión Arterial (HA) y Edad (ID) (r=0,970), PASBD y LD (r=0,8330), PASPD y Clasificación Dejaron ITB (r=0,904), PASPE e ID (r=0,955), ITB Direito y Clasificación Dejaron ITB (= 0,793), ITB Izquierdo y PASPD (r=0,864). CONCLUSIÓN: El promedio de los valores de PAS es clasificado como normal del hight que presenta un riesgo más grande para individuos masculinos; los valores de ITB no exponen DAOMI y el riesgo cardiovascular a población estudiada, esta manera que se verificó en esta muestra que la edad es un factor de riesgo para DAOMI y HA.

Las palabras claves: Mayor; El índice el Tobillo Braquial; La Enfermedad Arterial oclusiva de Miembros Inferiores.

PREDITORES DE RISCO CARDÍACO: ABORDAGEM AO ÍNDICE TORNOZELO BRAQUIAL (ITB) NA ESTIMATIVA DA DOENÇA ARTERIAL OBSTRUTIVA DE MEMBROS INFERIORES (DAOMI) EM IDOSOS DA REGIÃO DO CARIRI CEARENSE, BRASIL.

RESUMO

INTRODUÇÃO*:* Os preditores de risco cardíaco e de doenças arteriais obstrutivas periféricas (DAOP) mensuradas por técnicas de fácil aplicação têm sido amplamente estudados no âmbito das ciências da saúde. **OBJETIVO:** Analisar o risco de Doença Arterial Obstrutiva de Membros Inferiores (DAOMI) por níveis de Índice Tornozelo Braquial (ITB), na terceira idade. **MATERIAL E MÉTODOS**: Decorre de um estudo descritivo, transversal, amostra 31 indivíduos voluntários, com média de idade de 73,295,75dp anos, submetidos aos testes de anamnese, pressão arterial sistólica (PAS) dos braços direito (BD) e esquerdo (BE) e das pernas direita (PD) e esquerda (PE), equacionando ITB, com ponto de corte de Grave para valores de < 0,40 e > 1,40; 0,41 a 0,70 Moderada; 0,71 a 0,90 Leve; > 0,90 Normal. O plano analítico utilizou programa SPSS 13.0, para estatística de Média, Desvio Padrão, Máximo e Mínimo, "r" de *Pearson*. Nível de confiança 5%. **RESULTADOS:** Os valores encontrados foram: ITB-DIREITO 0,970,06, ITB-ESQUERDO 0,990,07, PASBD 133,5423,74, PASBE 133,5423,31, PASPD 132,9024,79, PASPE 134,1923,20. O "r" de *Pearson* encontrou correlações entre Dores nas Pernas Quando Caminha (DPQC) e Classificação ITB Esquerdo (r=0,964) Local da Dor (LD) e Prática Atividade Física (PAF) (r= 0,935), PAF e PASBE (r=0,750), Hipertensão Arterial (HA) e Idade (ID) (r=0,970), PASBD e LD (r=0,8330), PASPD e Classificação ITB Esquerdo (r=0,904), PASPE e ID (r=0,955), ITB Direito e Classificação ITB Esquerdo (= 0,793), ITB Esquerdo e PASPD (r=0,864). **CONCLUSÃO**: A média dos valores de PAS encontram-se classificados como normal alta apresentando um risco maior para os indivíduos do sexo masculino; os valores médios do ITB não expõem a população estudada a DAOMI e risco cardiovascular, desta forma foi constatado nesta amostra que a idade é um fator de risco tanto no surgimento da DAOMI quanto da hipertensão arterial.

Palavras-chave: Idosos; Índice Tornozelo Braquial; Doença Arterial Obstrutiva de Membros Inferiores.