
Keywords
Normative values, Functionality, Quality of Life, Portuguese healthy older people.

O18 Relationship between balance and functionality, gait speed, physical activity and quality of life in community-dwelling older people
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Background
Balance is a modifiable risk factor for falls which represent a major public health problem for healthy ageing [1]. Predictors of healthy ageing in older people (i.e., functionality, gait speed, physical activity (PA) and health-related quality of life (HRQoL)) have been correlated with balance measures [2-5]. However, most balance measures do not assess the different components of balance hindering the design of interventions. To overcome this difficulty the Balance Evaluation Systems Test (BESTest) [6] and its short versions [7, 8] (new comprehensive measures of balance) were developed. Nevertheless, the relationship between the BESTest [6] and its short versions [7, 8] with functionality, gait speed, physical activity and health-related quality of life older people living in the community is still unknown.

Objective
To explore the relationship between the BESTest, Mini-BESTest and Brief-BESTest with functionality, gait speed, PA and HRQoL in community-dwelling older people.

Methods
An exploratory cross-sectional study was conducted. Community-dwelling older people (> 60 yrs) were recruited. Balance was assessed with the BESTest, Mini-BESTest and Brief-BESTest, functionality with the SSTS [9], gait speed with the 10MWT [10], PA with the Brief-PA questionnaire [11] and HRQoL with the WHOQoL Bref [12]. Descriptive statistics was used to characterize the sample. Correlations were explored with the Spearman correlation coefficient. By convention, the interpretation size of a correlation coefficient was negligible (0.00-0.30), low (0.30-0.50), moderate (0.50-0.70), high (0.70-0.90) and very high (0.90-1.00) correlation [13].

Results
One hundred and eighteen older people living in the community (76.2 ± 8.9 years; n = 79, 66.9% female) participated in this study. On average participants were overweight, with high body mass index (male: 26.9 ± 4.2 kg/m²; female: 26.8 ± 4.3 kg/m²) and fat-free mass (male: 29.5 ± 6.3 %; female: 37.6 ± 6.2%). BESTest, Brief-BESTest and Mini-BESTest were I) low and negatively correlated with intense (-0.34; -0.37; -0.32, respectively) and moderate (-0.37; -0.37; -0.35, respectively) PA; II) moderate and negatively correlated with the SSTS (-0.51; -0.61; -0.59, respectively); III) moderate to high and negatively correlated with the 10MWT (-0.69; -0.77; -0.78) and IV) negligible to moderate and positively correlated with the WHOQoL-Bref domains (I-Physical health 0.46; 0.57; 0.53; II-Psychological 0.47; 0.52; 0.53; III-Social relationships 0.32; 0.36; 0.28; IV-Environment 0.46; 0.51; 0.46).

Conclusions
This study shows that there is a relationship between the BESTest and its short versions with functionality, gait speed and HRQoL in community-dwelling older people. Higher correlations were found in the short versions, especially with functionality measures. This is useful for clinical practice since these versions are simpler, require less material and are quicker to apply.

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Keywords
Correlations, Balance, Healthy ageing predictors, Older people.

O19 Trends of hospitalization for chronic obstructive pulmonary disease in Brazil from 1998 to 2016
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Background
Chronic Obstructive Pulmonary Disease (COPD) is a major public health problem. In Brazil, it is the fifth largest cause of hospitalization...