FOREWORD

On behalf of the Organising Committee, I would like to cordially welcome you to the 3rd International Conference on Occupational & Environmental Toxicology (ICOETox 2016), which is held in Porto in conjunction with the 3rd Ibero-American Meeting on Toxicology and Environmental Health International (IBAMTOX 2016).

This conference is co-organised by the Portuguese National Institute of Health (INSA), the Institute of Public Health- Universidade do Porto (ISPUP) and the Instituto de Ciências, Tecnologias e Agroambiente da Universidade do Porto (ICETA-UP).

The Organising Committee was successful in inviting a number of outstanding international and local speakers in order to offer you a very attractive scientific programme. The Conference covers most of the current topics of Environmental and Occupational Toxicology; we have tried to achieve a good balance between research and practice and to allow sufficient time for interaction and discussion. This meeting provides a good opportunity for divulging one’s work and discussing a great variety of topics that we hope will be reflected in a fruitful interchange of experiences, knowledge and ideas. It is also a chance for renewing old contacts and making many new friends.

The city of Porto, known as Invicta (unvanquished) City, has an important historical legacy, although architectural images show its urban renovation process giving valuable testimony of its history and modernity. Indeed, Porto historical centre was designated World Cultural Heritage in 1996 due to the many historical buildings and urban mesh. Porto is divided between the river Douro and the Atlantic Ocean, and boasts of poetic sunsets where the eyes absorb and the soul savours. Downtown is located the busiest commercial area, where typical products are found alongside prestigious designer brands. It is also worth highlighting the world famous Porto Wine, produced exclusively in the Douro Demarcated Region and aged in cellars. And finally, our visitors should not forget to try our local cuisine, as Porto has gone beyond tradition in order to reach the best international standards.

I would like to express my sincere thanks to our collaborating institutions and all those organisations and companies which put their trust in this project and provided sponsorship for the meeting; without their effort, support and collaboration this Conference would not have been possible.

I hope that, despite the tight scientific programme, you will find some time to enjoy our landscapes, typical food, and kind people, and that this meeting will meet all your expectations from the scientific and social points of view. I wish you a productive Conference and a pleasant stay in Porto. Thank you for being here.

Bem-vindos ao Porto!

(João Paulo Teixeira)

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CAN THE COPD ASSESSMENT TEST (CAT) BE USED TO IMPROVE COMMUNICATION BETWEEN CLINICIANS AND LOW LITERATE ELDERLY PATIENTS? RESULTS FROM A CROSS-SECTIONAL STUDY IN COVA DA BEIRA, PORTUGAL

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Chronic obstructive pulmonary disease (COPD) is a chronic inflammatory disease characterized by progressive airflow obstruction and destruction of lung parenchyma. In 2002 it was the fifth most common cause of death worldwide and it expected to rise to the 3rd place by 2030. COPD greatly affects the quality of life (QoL) of the individuals, the majority of whom are elderly and frail. In Portugal, and in particular at Cova da Beira region, the patients only visit their pulmonologist once or twice a year, and therefore the disease management is mainly performed at primary care by general practitioners with local pharmacies also playing an important role. The present study was aimed at evaluating if the COPD assessment test (CAT) could be used as a communication aid between patients with COPD and their clinicians in a population mainly composed of elderly illiterate patients. A total of 84 patients with stable COPD were recruited by a medical doctor from the Pulmonology Department of Centro Hospitalar Cova da Beira. The disease severity was assessed and classified according to the Global Initiative for Obstructive Lung Disease (GOLD) by the pulmonology specialist. The patients were then interviewed by a pharmacist that also applied the COPD assessment test (CAT) to determine the impact of COPD in the quality of life (QoL). The obtained results disclose that the majority of the respondents were male (93%) with a mean age of 64 years old and at stage II of COPD. The vast majority (88%) of COPD was related with tobacco smoke, with 63% of the patients being former smokers and 25% current smokers. Almost half of the recruited patients (48.8%) exhibited other comorbidities, including hypertension, congestive heart failure and arrhythmia. CAT scores ranged from 6 to 37 revealing that in 56% of the patients the impact of COPD in their QoL is medium, in 27.4% is high and in 7.1% is very high. Elderly individuals, those with comorbidities and those with recent exacerbations and hospitalizations showed higher CAT scores. Our results suggest that the CAT has good discriminative properties and can be a useful instrument to be applied at home and/or primary care as an integrated measure of QoL in patients with COPD. CAT thus provide a redundancy mechanism that is able to send the general practitioner an alert sign on the requirement of a specialist intervention, when the patients’ communicational skills fail to do so.