



Health Education on Osteoarticular Diseases for Elderly People: Experience Report of Medical Students

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ABSTRACT

Osteoarticular diseases, such as osteoarthritis, osteoporosis and rheumatoid arthritis, are prevalent in old age due to physiological and biomechanical changes associated with aging. These conditions significantly impact the quality of life of the elderly, affecting mobility, independence and increasing the risk of falls and fractures. The present work aims to report a health intervention experience focused on education about osteoarticular diseases among the elderly, highlighting the effectiveness of educational practices in promoting health and well-being in this population. This is a descriptive-exploratory study, with a qualitative approach, of the experience report type. It was conducted at a Social Assistance Reference Center (SARC), using lectures and practical demonstrations as educational methods. The project emphasized information on risk factors, symptoms, diagnosis, treatments and management strategies for osteoarticular diseases. The interaction between students and elderly people promoted a participatory and educational environment, facilitating the understanding and application of recommendations in everyday life. Practical examples, such as physical exercises and nutritional guidelines, were adapted to the participants' needs, encouraging healthy habits and autonomy in health management. Health education proved to be fundamental in empowering the elderly to adopt healthy practices, contributing to active aging and improving quality of life. Continuing similar initiatives is recommended to strengthen community ties and support the well-being of the elderly population.

INTRODUCTION

Osteoarticular diseases constitute a group of conditions that affect bones, joints and associated structures, being particularly prevalent in old age. With aging, several physiological and biomechanical changes occur, contributing to the emergence and worsening of these diseases. Diseases such as osteoarthritis, osteoporosis and rheumatoid arthritis are the main osteoarticular pathologies in old age. In this context, it is important to highlight that natural aging, a sedentary lifestyle, inadequate nutrition and genetic predisposition are classified as contributing factors to the development of these diseases. (1).

Health education has proven to be an essential tool in promoting well-being and preventing diseases, especially among the elderly population. With increasing longevity, osteoarticular

diseases have become a growing concern, significantly affecting the quality of life of the elderly. These conditions not only cause pain and discomfort, but also compromise mobility and independence, increasing the risk of falls and fractures, which can have devastating consequences (2).

In the context of osteoarticular diseases, information and knowledge play a crucial role in the prevention and management of these conditions. Educating older adults about risk factors, signs and symptoms, and prevention and treatment strategies is critical to enabling them to adopt self-care practices and seek medical care in a timely manner. Furthermore, promoting an active and healthy lifestyle, with an emphasis on regular physical exercise, adequate nutrition and adherence to

medical treatments, can slow the progression of these diseases and improve quality of life (3).

This work presents an experience report on a health education intervention project aimed at elderly people at a Social Assistance Reference Center (SARC) in a municipality in the interior of Cariri Cearense, focused on the prevention and management of osteoarticular diseases. The project was developed by medical students, in partnership with employees of that institution. Through lectures and practical examples, we sought not only to inform, but also to involve and motivate elderly people to adopt healthy habits and become protagonists of their own health.

The objective, therefore, is to report a health intervention experience focused on education about osteoarticular diseases among the elderly, highlighting the effectiveness of educational practices in promoting health and well-being in this population.

METHODS

This is a descriptive-exploratory study, with a qualitative approach, of the experience report type.

A descriptive-exploratory study is a research methodology used to obtain a detailed and initial understanding of a specific phenomenon, event or situation. This type of study combines descriptive and exploratory elements, providing a comprehensive and detailed view of the object of study (4).

The qualitative approach is a research methodology that focuses on in-depth and detailed understanding of social and human phenomena. Unlike quantitative approaches, which are based on the measurement and statistical analysis of data, the qualitative approach seeks to explore and interpret the complexity of experiences, behaviors, interactions and meanings that people attribute to their lives and the world around them (5).

An experience report is a type of scientific work that describes in detail a specific experience lived by the author or authors, usually in the context of professional, educational or community practices. This type of publication is quite common in the areas of health, education, social sciences and other applied areas, where practices and interventions are frequently implemented and evaluated (6).

In their experience at the Social Assistance Reference Center, medical students used as a methodology a theoretical explanation about osteoarticular diseases, addressing the following points: risk factors, symptoms and differentiation from other pathologies, diagnosis, treatments, strategies on how to deal with with pain and adaptations in everyday life.

RESULTS & DISCUSSION

In their experience at the Social Assistance Reference Center, medical students used as a methodology a theoretical explanation about osteoarticular diseases, addressing the following points: risk factors, symptoms and differentiation from other pathologies, diagnosis, treatments, strategies on how to deal with with pain and adaptations in everyday life.

Considering that, conceptually, aging is configured as a multiple process of impairment and decay of life-span functions and that, with it, it is observed that physiological changes occur mainly in the osteoarticular function, causing serious consequences on performance functional (7), all activities planned and executed at the SARC were structured taking into account the profile of the target audience.

The synergistic interaction between medical students and elderly people who attended the lectures was one of the highlights of the project. From the beginning, students adopted a welcoming and participatory approach, encouraging seniors to share their own experiences and questions. This environment of open and respectful dialogue was fundamental to creating a bond of trust and engagement.

Corroborating the above, about the importance of establishing an open and fruitful dialogue to create a bond of trust and engagement inherent to the doctor-patient relationship, Villar et al (8) emphasize that the health professional, by establishing a good relationship with his patient, will ensure a more assiduous knowledge of the sociocultural being he is treating, facilitating the elaboration of an effective, concise therapeutic plan that is in consensus with the user. When this practice is incorporated into clinical practice, the doctor is able to see the specific illness and healing process of the people he is treating and understand the limitations of this therapy.

During lectures, students used clear and accessible language, avoiding complex technical terms, and made use of visual resources, such as slides and posters, to illustrate the points discussed. The theoretical explanations were always accompanied by practical examples and contextualized in the participants' reality, which facilitated understanding and application of the information in everyday life.

The students also promoted practical and interactive examples such as demonstrations of simple physical exercises that could be performed at home. They taught stretching and muscle strengthening techniques, emphasizing the importance of regularity in practicing these activities for the prevention and management of osteoarticular diseases. During these sessions, seniors were encouraged to actively participate, trying out the exercises under the supervision and guidance of the students.

In addition to physical activities, nutrition topics were covered, in which students discussed the importance of a balanced diet rich in essential nutrients for bone and joint health. Practical tips were provided on how to incorporate healthy foods into the daily diet and how to avoid harmful eating habits, always emphasizing the importance of seeking a nutritionist to guide them regarding an individualized diet.

Highlighting the indispensability of a balanced nutritional assessment and the regular practice of physical exercise, Laurindo et al (9), in their work *entitled Promoting a healthy diet among the elderly: experience report*, published in the UNITINS Extension Magazine, highlight that:

In this sense, it is essential to promote awareness about the importance of an adequate and healthy diet, as well as healthy aging and care for the physical and emotional health of the elderly. Based on these reflections, we reinforce the need to implement health education

strategies and develop health promotion actions aimed at improving nutritional status and preventing diseases. [...] we reinforce the importance of nutritional monitoring as an essential tool to improve the quality of life and well-being of the elderly, promoting healthy and active aging.

The synergy between students and seniors was evident in the group discussions that arose spontaneously during the sessions. The elderly shared their own pain management strategies and adaptations to daily life, enriching the talks with their personal experiences. The students, in turn, valued these contributions, reinforcing the importance of empirical knowledge and adapting their recommendations to the realities experienced by the participants.

This constant exchange of information and experiences created a mutual learning environment, where both students and seniors left enriched. Elderly people reported feeling more empowered and confident to adopt best practices, while students gained a deeper understanding of the needs and challenges faced by the elderly population.

CONCLUSION

This experience report demonstrated the effectiveness of a health education project aimed at elderly people, focused on the prevention and management of osteoarticular diseases. Through interaction between medical students and elderly people participating in a Social Assistance Reference Center (SARC), it was possible not only to disseminate technical knowledge, but also to promote an environment of mutual learning and empowerment.

Health education has proven to be a powerful tool in promoting well-being and preventing osteoarticular diseases among the elderly population. When covering topics such as risk factors, symptoms, diagnosis, treatment and management strategies, students adopted a participatory and inclusive approach. The use of accessible language and practical examples facilitated the understanding and application of information in the daily lives of the elderly, encouraging them to adopt healthy habits and become active agents in managing their own health.

The activities developed, which included lectures, physical exercise demonstrations and nutritional guidance, were adapted to meet the specific needs of the target audience. A troca de experiências entre estudantes e idosos enriqueceu o processo educativo, proporcionando uma compreensão mais profunda das realidades e desafios enfrentados pela população idosa.

The synergy created during the health education sessions not only strengthened the bond between participants but also fostered an environment of mutual support and encouragement. Elderly people reported feeling more empowered to adopt healthy practices in their daily lives, while students gained a valuable perspective on the importance of empirical knowledge and adapting medical recommendations to individual realities.

Given the positive results observed, it is recommended that similar initiatives continue and expand, aiming not only to disseminate information about osteoarticular health, but also to strengthen community ties and support healthy and active

aging. Collaboration between academic institutions and social assistance centers is fundamental for the development of effective and sustainable projects that positively impact the quality of life of the elderly population.

In summary, health education on osteoarticular diseases proved to be not only a means of prevention, but also a form of empowerment and social inclusion. By empowering older adults with the knowledge and skills to manage their health autonomously, we contribute to healthier aging and a more resilient community.

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