

## **PS2.082**

### **The importance of analyzing the population - sharing the experience of a family doctor trainee**

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**Background:** By analyzing the population followed by a Family Doctor it is possible to characterize it in terms of gender and age and to identify the vulnerable and risk groups among them.

**Aim:** To analyze a Family Doctor medical file - building a population pyramid and identifying the vulnerable and risk groups.

**Methods:** Study: observational, descriptive, cross-sectional Population/Sample: patients followed by one Family Doctor from a Portuguese Family Health Unit (FHU) Data source: digitally available clinical files (SAM®). Statistical analysis: Microsoft Excel 2010®.

**Results:** The medical file analyzed had a total of 1668 patients, 872 of which were female (52.3%). The most common age groups were 65 to 69 years and 70 to 74 years. A constrictive population pyramid was obtained. The obtained vulnerable groups were the following: children (0-9 years) - 5.7%; adolescents (10-19 years) - 9.1%; women in fertile age (15-49 years) - 20.8%; elderly ( $\geq 65$  years) - 29.6%. Considering the health problems registered in the digitally available records from the patients, several risk groups were considered: Patients with dislipidemia - 28.7%, patients with arterial hypertension - 25.6%, overweight or obese - 16.5%, with diabetes mellitus - 10,3% and smokers - 6%.

**Conclusions:** It is extremely important to analyze a medical file and obtain a population pyramid and establish the vulnerable and risk groups. This allows the doctor to plan future appointments and to try to guarantee a good accessibility and equality in health to patients. In Portugal we have specific appointments for hypertension and diabetes. I discussed with my tutor a future plan to consider not only these, but also the other above mentioned vulnerable and risk groups, especially considering that almost a third of our patients are elderly.

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