



Patients' perception of physical therapy at the UNEC Health Care Center (CASU) – Nanuque Campus/MG

Percepção dos pacientes sobre o atendimento fisioterapêutico no Centro de Atendimento à Saúde do UNEC (CASU) – Campus Nanuque/MG

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ABSTRACT

Introduction: Few longitudinal studies have been done on the perception of patients about physical therapy care, through a questionnaire where it was possible to survey the perception of care at the Health Care Center of UNEC (CASU) - Campus Nanuque/MG. **Objective:** This study was carried out with the purpose of analyzing the perception of patients about the physiotherapeutic care dedicated to them by Physical Therapy trainees at the Health Care Center of UNEC (CASU) Campus of Nanuque/MG. **Methodology:** Through a descriptive and exploratory quantitative approach composed of 35 patients from CASU, where the instrument used for the study was the questionnaire adapted from the survey "Evaluation of the satisfaction of users of physiotherapy services", containing 15 closed questions. **Results:** When analyzing the data obtained, the vast majority of patients (77.17%) considered the attributes of physical therapy care very satisfactory. It is correct to consider that the conducts were followed adequately due to the high percentages defined as excellent (62.86%) to the results obtained with the physiotherapeutic treatment. **Conclusion:** The study was of great importance to have a survey of the perception of patients obtained through physical therapy and showed a population satisfied with the services it has been receiving, in this case, at the Health Care Center of UNEC (CASU).

Keywords: Perception, Physiotherapeutic care, Health.



1 INTRODUCTION

Today, one can observe a great demand for physiotherapeutic care in the Health Care Center of UNEC (CASU), due to the assistance and protocols individualized according to the needs of each patient.

In the field of Physical Therapy, it is often questioned which therapeutic resources can contribute to alleviate the suffering of people in the process of physical therapy rehabilitation, which goes far beyond a functional disability. It is perceived the need to carry out a differentiated work to offer integral care to the needs of these people, contradicting, to a certain extent, an academic formation that often leads to a mechanistic and reductionist view, which follows the biomedical model that has as its object the individualized subject.

Traditionally, the physiotherapist has a training directed to the disease and is seen as a 'rehabilitation professional', that is, one who acts exclusively when the disease, injury or dysfunction has already been established (GALLO, 2005). However, according to the Ministry of Education, the physiotherapist is a generalist professional trained to work at all levels of health care; should not be restricted to curative and rehabilitative actions (DELIBERATO, 2002).

According to Magalhães, Physical Therapy as an area of knowledge in health expands its object of study, with regard to prevention, treatment and rehabilitation to thus promote individual and collective well-being, possessing the ability to prevent and treat intercurrent functional kinetic disorders in organs and system of the human body, generated by genetic alterations, traumas and acquired diseases, thus playing a considerable role in the rehabilitation of the patient and in his resocialization (MAGALHÃES, 2004).

The CASU - UNEC Health Care Center was founded in 2010 with the intention of serving students to conduct practical classes and care for patients in the community during the mandatory supervised internships.

This study was carried out with the purpose of analyzing the perception of patients about the physiotherapeutic care dedicated to them by Physical Therapy trainees at the Health Care Center of UNEC (CASU) Campus of Nanuque/MG.

2 THEORETICAL FOUNDATION

According to COFFITO, the profession of physiotherapist was regulated in Brazil on October 13, 1969. Decree Law No. 938 defined it as a profession of higher level, and it is up to the physiotherapist, in a private way, to perform "physiotherapeutic methods and techniques with the purpose of restoring, developing and conserving the physical capacity of the client.



Physical therapy is defined as a science that is applied, whose object of study is human movement, with all its ways of expression and capacity. They have pathological variations, psychic and organic effects, to preserve, maintain, develop or restore all organs, systems and functions. (COPETTI, 2000).

Braz *et al.*, (2009) define that their performance has techniques, methods and procedures that are applied to the patient, whether he is conscious or not. The professional, according to his specialization, can perform care in severe conditions, terminal stages and life-threatening situations. Its purpose is to treat and prevent functional kinetic lesions that are triggered by trauma or disease, using specific therapeutic methods (MOREIRA *et al*, 2007)

Copetti (2000) states that the exercise of the profession is not restricted to the outpatient environment, but can be developed in several areas, such as: orthopedics, neurology, ergonomics, rheumatology, dermatofunctional, burn recovery, pediatrics, gynecology, obstetrics, pulmonology, oncology; including, with recognized actions such as acupuncture, chiropractic, pneumofunctional physiotherapy and neurofunctional physiotherapy.

In the physiotherapeutic actions are the individual and the community. Individual actions consist of individual care, visits to families, orientations, considering mobility difficulties, such as physical limitations, financial situation and all family dynamics (BRAGA *et al*, 2008). For community actions, one can mention the activities carried out in daycare centers, schools, with the public. They are actions aimed at education about health and practices for the body, including lectures, conversation circles and among others (FORMIGA and RIBEIRO, 2012).

2.1 UNEC HEALTH CARE CENTER (CASU)

The CASU - UNEC Health Care Center was founded in 2010 with the intention of serving students to conduct practical classes and care for patients in the community during the mandatory supervised internships.

Are part of the body of physiotherapists who work at CASU the professors of the University Center of Caratinga duly qualified as physiotherapists who act as preceptors of internship during the day.

Physical therapy services performed at CASU are free of charge and referred by doctors, physiotherapists, or the municipal health department of the municipality of Nanuque.

Among the various areas served at CASU we have orthopedic, traumatological, rheumatological, pediatric, neurological, adult and pediatric, cardiovascular, gynecology and obstetrics, among others.



2.2 MAIN AREAS OF ACTIVITY OF PHYSICAL THERAPY

2.2.1 Neurofunctional physiotherapy

Bertoldi teaches that intervention programs in neurofunctional physiotherapy, adult or child, use procedures with theoretical foundation based on the control of movements by the central nervous system (CNS) and the promotion, prevention and recovery of sensorimotor functions seeking alignment, symmetry and the best quality of motor functionality (BERTOLDI *et al.*, 2011).

In child neurofunctional physical therapy, also called physical therapy in neuropsychiatry, in general, therapeutic exercises aim to improve functionality (motor activities, gait) optimizing the child's abilities and performances in activities and participation (BAILES *et al.*, 2010).

Physical therapy has as its final functional objective the promotion of maximum independence (GANNOTTI *et al.*, 2014). Within this role the physiotherapist intervenes in order to facilitate the gain of these motor skills through the encouragement of physical activities (BAILES *et al.*, 2011), *by using techniques and methods based on scientific knowledge and evidence, from resources considered as more traditional to holistic resources and integrative therapies* (SCHORNE *et al.*, 2015) that seek to integrate the child in its affective, cognitive and motor dimensions (ISRAEL and BERTOLDI, 2010)

2.2.2 Trauma-orthopedic physiotherapy

Trauma-orthopedic physical therapy has grown more and more in recent years, since musculoskeletal disorders are the second largest cause of demand for physical therapy rehabilitation in Brazil. Because they affect the muscular, bone and joint systems, they are disorders that directly affect the functionality of patients, limiting their routines, as they hinder the movements and performance of day-to-day activities, impairing the insertion of the individual in society (NOGUEIRA *et al.*, 2016).

Physical therapy rehabilitation is one of the most important phases in the treatment of acute and chronic traumas and muscle disorders, in addition to reducing the picture of pain and edema in the patient, corrects congenital and/or acquired deformities, improves physical conditioning, promotes stretching and muscle strengthening, seeking to improve health in general, thus providing quality of life to patients (NASCIMENTO *et al.*, 2020).



2.2.3 Rheumatic physiotherapy

Rheumatic diseases, characterized by inflammation, rigidity, hypersensitivity, and joint deformities, affect individuals in their productivity and social life, due to the physical-functional disability caused. They affect millions of people around the planet and there are few studies related to such pathologies (SKARE, 1999).

For Moreira and Carvalho (2001), rheumatic diseases are the third main cause of incapacity for work, being surpassed only by psychiatric and cardiovascular diseases. In addition, such diseases affect individuals in several ways: only the joints, others involve only periarticular structures (such as muscles, ligaments, and tendons) and diffuse connective tissue diseases.

2.2.4 Gynecological physiotherapy

Since 1912, the physiotherapist has been an important member of the midwifery team. Therapist Mennie Randall along with obstetrician J. S. Fairbairn were the percussors in the treatment of pregnancy, childbirth, and puerperium at St. Thomas Hospital, later extending to gynecological cases. (POLDEN and MANTLE, 2000).

The physiotherapist acting in the perineal reeducation of the pelvic floor, has the function of improving the power of the contraction of the muscle fibers, besides promoting the abdominal reeducation and a static lumbopelvic rearrangement through exercises apparatus and techniques. (SOUZA, 2002).

According to Kisner and Colby (1998), significant changes occur in the body of pregnant women and affect several systems. In the urinary system, the ureters penetrate the bladder at a perpendicular angle due to uterine enlargement. This can result in reflux of urine out of the bladder and back into the ureter, thus making it more likely that urinary tract infections will develop during pregnancy.

For Polden and Mantle (1997), a complete evaluation of physiotherapy is essential as much as possible before surgery, because the treatment instituted before surgery will be profitable for certain women, such as those with chest in poor health, poor posture, back pain, weak pelvic base or general weakness. It is currently efficient to provide at least one evaluation and preparatory treatment before the operation. Physical therapists should ensure that surgeons and nursing staff are fully aware of everything a physical therapist is able to do to contribute to the patient's treatment, and only then will the patient's best interests be served.



2.2.5 The perception of patients about physical therapy treatment

It is known that physical therapy has been growing exponentially in Brazil, so much so that research operates in an important way for the profession to be consolidated. However, few studies address the perception that the patient has regarding the care provided by the physiotherapist, considering their complaints, expectations, and impression about this service.

The relationship between physiotherapist and patient is not very present in studies, and most of these studies focused on doctors and psychologists. However, the patient's view is of paramount importance to ensure success for any treatment.

According to Martins, scientific research around Physical Therapy in Brazil has been growing at a very slow pace compared to other countries. So much so that most of the literature used by Brazilian Physical Therapy comes from other countries, where it has a differentiated health system, culture among others (MARTINS, 1999).

The present study corroborates the positive perception of patients in relation to the physiotherapeutic treatments offered by CASU (UNEC Health Care Center), in this way, there is a high rate of satisfaction regarding general care, as will be discussed in an appropriate topic (topic 4 results and discussions).

3 METHODOLOGY

The study is inserted in a quantitative, descriptive, and exploratory approach. The instrument used for the research was the questionnaire adapted from the survey "Evaluation of the satisfaction of users of physiotherapy services". Data were collected through 15 closed questions. First, a meeting was scheduled with the physiotherapist responsible for the Health Care Center of UNEC (CASU) Campus of Nanuque/MG to present the research. After the consent of the physiotherapist, the patients were presented with the research proposal and what their participation would be.

The sample consisted of 50 patients. From the inclusion criteria, 35 interviewees were observed, and 15 interviewees were excluded because they were still at the beginning of the follow-up.

Before the application of the questionnaire, the interviewee was informed of the research and its objectives, had their doubts clarified and, thus, the Term of Free and Informed Consent was spontaneously signed, since this research was developed safeguarding the ethical precepts and the Guidelines and Regulatory Standards for Research on Human Beings.



The researcher is responsible for making public the results found in the study, regardless of what those results are, committing not to disclose the names of the interviewees.

4 RESULTS AND DISCUSSIONS

Through an interview applied to thirty-five patients treated at the Health Care Center of UNEC (CASU), a survey was made on the perception of the proposed physiotherapeutic care. The research addressed men and women who are undergoing physical therapy treatment at the Center.

Of the thirty-five interviewees, 45.71% were male and 54.29% were female. Regarding the marital status of males, 68.75% are married, 25% are single and 6.25% are divorced. Regarding the female sex, 42.10% are married, 31.58% are single, 21.06% are widowed and 5.26% are divorced.

Regarding the professional occupation, 56.25% of the men work, 37.5% are retired and 6.25% others, regarding women, 36.84% are retired, 26.31% others, 21.06% are from home, and 15.79% work.

Regarding education, 36.84% of women have only elementary school, 31.58% have high school, 21.06% are graduates and 10.52% are illiterate, as for males, 56.25% have high school, 37.5% have elementary school and 6.25% are graduates.

Regarding being a beneficiary of health insurance, 68.75% of men are not beneficiaries and 31.25% are not. In relation to women, 80% do not have health insurance and 20% do. As for the coverage by the health plan, 60% of the men do not have coverage and only 40% have, in relation to women, 80% do not have coverage while only 20% of the interviewees have coverage of Physical Therapy.

Table 1 shows that 77.17% of the interviewees considered themselves to be very satisfied with the care provided and only 22.86% were satisfied.

Table 1: Level of satisfaction of the interviewees in relation to physical therapy care

Level of satisfaction of the interviewees in relation to physical therapy care	N=35	Percentage
Very satisfied	27	77,17%
Satisfied	8	22,86%
Unsatisfied	-	-
Spacious	-	-
Very dissatisfied	-	-
Neither satisfied nor dissatisfied	-	-

Source: survey data

For Goldstein *et al.* Satisfaction in the health field can be defined as the patient's return to health care and in relation to the treatment received. Thus, the individual's satisfaction is always relative to the patient's expectations.

In addition, physical therapy expresses a series of characteristics that influence patient satisfaction, such as contact between physical therapist and patient demands more time than in relation to a medical consultation, physical therapy implies greater physical contact, requires greater collaboration of the individual and usually causes pain and can be reputed as a physical threat. (MONNIN AND PERNEGER, 2002).

Regarding the reasons why the interviewees need physical therapy, according to Table 2, 34.29% reported physical injuries, 25.71% orthopedic traumas, 17.14% neurological diseases, 20% other reasons and only 2.86% occupational accidents.

Table 2: Reasons why respondents need physical therapy

Reasons why respondents need physical therapy	N=35	Percentage
Accidents at work	1	2,86%
Orthopedic trauma	9	25,71%
Neurological diseases	6	17,14%
Physical disability	-	-
Physical injuries	12	34,29%
Other	7	20%

Source: survey data

Similar results are found in the literature, where Mendonça (2007) addresses the evaluation of users' satisfaction with physical therapy services, perhaps because it involves changes caused by kinetic-functional disorders leading to trauma-orthopedic symptoms, commonly found in patients who develop professional activities.

According to table 3, regarding the perception of the proposed physical therapy care and the explanations offered about the care that will be provided, 85.72% of the interviewees evaluated

it as excellent and 14.28% as good. Regarding the number of physical therapists sufficient for the service, 94.28% of the interviewees claimed that there are enough professionals for the service, while 5.72% claimed that there are not enough professionals. When asked about confidence in care, 100% of respondents said they had confidence in the physical therapy care provided by CASU. Regarding the results obtained with the treatment, 62.86% of the patients reported being excellent and 37.14% reported it as good. Regarding professional ethics at the point of care, 80% of the interviewees claimed to be excellent, while 20% defined it as good. The results presented reveal that 94.29% of the interviewees evaluated as excellent the kindness of the trainees, while 5.71% evaluated it as good. It was observed that 85.71% of the interviewees would indicate as excellent the clinic for friends and relatives and 14.29% described it as good.

Table 3: Perception of the proposed physical therapy care

Explanations offered about the service that will be provided:	N=35	Percentage
Excellent	30	85,72%
Good	5	14,28%
Lousy	-	-
Spacious	-	-
Sufficient number of physiotherapists for the service:	N=35	Percentage
Yes	33	94,28%
No	2	5,72%
Confidence in service:	N=35	Percentage
Yes	35	100%
No	-	-
Results obtained with the treatment:	N=35	Percentage
Excellent	22	62,86%
Good	13	37,14%
Lousy	-	-
Spacious	-	-
Professional ethics at the point of care:	N=35	Percentage
Excellent	28	80%
Good	7	20%
Lousy	-	-
Spacious	-	-
Courtesy of the trainees:	N=35	Percentage
Excellent	33	94,29%
Good	2	5,71%
Lousy	-	-
Spacious	-	-
In case you (a) indicate the clinic to friends and relatives, as you would classify:	N=35	Percentage
Excellent	30	85,71%
Good	5	14,29%
Lousy	-	-



Bad	-	-
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Source: survey data

It is extremely important to recognize the patient's perspective in relation to the quality of health services because the actions of the same contribute to an improvement in the service and success of the treatment (DA SILVA *et al*, 2014).

Affectionate and valued relationships between physical therapists and their patients are more conducive to the development of positive emotional states, which assist in the rehabilitation of the patient, encouraging him to complete all treatment (SUBTIL *et al*, 2011).

Patient satisfaction is closely linked to the elements related to the treatment of the patient and his physiotherapist. Thus, aspects such as appropriate time spent in therapy, skills demonstrated during the session, explanations about the treatment to be followed are of paramount importance for patient satisfaction. (BEATTIE *et al*.2002).

Therefore, the feeling of security should also be considered, as an example, the degree to which the physiotherapist answers the patient's doubts regarding the treatment, showing that the interaction between patient and physiotherapist is essential. (MONNIN AND PERNEGER, 2002).

5 CONCLUSION

The study was of great importance to have a survey of the perception of patients obtained through physiotherapeutic care, in this case, at the Health Care Center of UNEC (CASU). This survey serves as a basis for monitoring the quality of care, thus improving the provision of service to patients, bringing several benefits to their lives.

Satisfaction surveys portray temporary results that always need to be in evidence, as they reflect the conditions of the services that are offered to users.

The characteristics of the physiotherapeutic assistance were considered satisfactory by the users. It can be considered that the conducts were followed adequately due to the high percentages defined as satisfactory.

The study showed a population satisfied with the services they have been receiving at the UNEC Health Care Center (CASU).



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