

on experimental total skin ulcerative lesions in the adult male white rat, Sprague Dawley strain. Ten animals were used for each group under standard laboratory conditions. After anaesthesia with 100% isoflurane, a total skin wound was performed in the region of the back with a disposable surgical punch of 8 mm in diameter. Subsequently, they are distributed in individual cages to prevent them from licking each other and with sufficient height to prevent the friction of the cutaneous ulcer with the passenger compartment. 0.15 ml of the respective product was applied daily to the ulcers. The microbiological analysis was carried out by studying the variation of the bacterial microbiota. The colony-forming units of each wound were determined by counting on a plate, after obtaining a total skin sample and a superficial sweep. The organic samples obtained were placed in sterile tubes containing 1 ml of physiological serum to which vortex was applied for 30 seconds, serial dilutions being made to the tenth of the samples subject to titration. Six plates of Tryptic Soy Agar (TSA) were then labelled, one for each dilution obtained, and 0.1 ml of each of these dilutions was added, spreading it on the surface of the plate by means of the sowing handle. Plates were incubated in an oven at 37° for twenty-four hours and then the colony forming units were counted.

### Results

Two hundred fourteen different colonies were obtained. The majority genus was *Staphylococcus*. There was no difference in microbial colonization due to the products used in each group, i.e., physiological serum, EVOO and CBD.

### Conclusions

The analysis of the mesophilic cutaneous microbiota shows a microbial colonization rich in gram-positive organisms, the majority being the presence of coagulase-negative staphylococci (CNS) that behave as opportunistic pathogens in skin continuity solutions.

### Keywords

Colonization, Microbial cannabidiol, Skin, Ulcer, Rat.

## P23

### The impact of dermatologic and cosmetic counseling - case study

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### Background

Community pharmacy professionals (CPPs) have been recognized as the most accessible and best-positioned health professionals for the provision of pharmaceutical counselling [1]. This happens due to the easy access to pharmacies, and because their interventions translate into: beneficial clinical results; satisfaction of users; reduction of costs and prevention of problems or negative reactions to medicines [1, 2]. The sale of dermatological products and symptoms associated with skin problems has a considerable impact on sales and advice requirements in pharmacies, respectively [3].

### Objective

To demonstrate the importance of CPPs through the quantitative evaluation of the impact of dermatologic and cosmetic counselling; and to determine which dermatological/cosmetic areas affect most people and what motivates them to turn to this type of counselling.

### Methods

Prospective, longitudinal and an observational case study. It took place in a pharmacy in the city of Porto, between January and April 2017. It had 3 phases: I) invitation (where were explained the objectives and the methodology); II) first Interview: Completion of PART I of the Questionnaire (description of the situation and the advice provided by the CPP); III) second Interview: Completion of PART II of the Questionnaire (evaluation of the result of the counselling).

### Results

Of the 16 analysed situations: 62.50% were resolved and/or people were satisfied, 31.25% were in the process of improvement, and 6.25% were not resolved and/or people were not satisfied. The three most mentioned dermatological/cosmetic areas in the requests for counselling were: daily skin care (37.50%); marks, spots, comedones, pimples or signs on the skin (18.75%) and sun protection (12.50%).

### Conclusions

CPPs have proven to be very valuable in providing counselling on dermatologic products and cosmetics, where, this had a positive impact. The dermatological/cosmetic area that most had expression among the requested situations was daily skin care.

### References

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### Keywords

Community pharmacy professionals, Counselling, Dermatologic products, Cosmetics.

## P24

### Ability of clients for self-management of medication regime: specification of nursing diagnosis

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### Background

There is a growing concern to understand the experience of living with multiple morbidities and the need to manage a medication regime [1, 2] by people experiencing one or more health/disease transitions [3], in order to assist them in this process. Being human responses to different transitions the object of the Nursing discipline, these professionals must identify and represent the nursing care needs of clients in the Nursing Information Systems in use, which are a repository of the Discipline knowledge.

### Objective

Identify and specify the nursing diagnoses centred on the ability for self-management of the medication regime, as a type of self-care in situations of health deviation.

### Methods

Qualitative study. All nursing documentation customised in the Portuguese nursing information System - SAPE® (2012) and in Sclínico (2016) - was subject to content analysis. After conducting content analysis, the authors presented it to a group of 14 nursing experts in the field, to reach consensus.

### Results

From the analysis of the national customisations, we infer a set of nursing diagnoses related to the person's abilities to manage the medication regime. These diagnoses focus on the potential to improve the ability for: self-management of the medication regime; self-management of the medication regime using devices; administering medication; administering subcutaneous medication; administering insulin; administering inhalant medication; administering oxygen therapy; self-monitoring in face of the medication regime; self-monitoring of capillary glycemia; self-monitoring heart rate in face of administering medication; self-monitoring blood pressure in face of administering medication; and self-monitoring urine.

### Conclusions

The specified diagnoses reflect nursing care needs of people who are challenged to live with chronic illnesses, particularly at the level of skills they need to develop in order to manage the medication regime. It is necessary that nurses identify these needs to prescribe