

Oral Abstracts

O1

Impact of Quality and Access on Use of Routine Health Data: Concerns and Implications

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Objective: To explore the quality, access and use of routine health information systems (RHIS) data in Trinidad and Tobago.

Methods: A qualitative study utilising thematic analysis was conducted. Purposive sampling was used to recruit 23 users and producers of RHIS data to participate in key informant interviews. Online interviews were conducted using Zoom and all interviews were recorded and transcribed. Pseudonyms were used to protect participants' identity. Transcripts were cleaned and analyzed using Dedoose (v 9.0.17).

Results: Of the invited key informants, 19 were interviewed. There was significant underutilization of RHIS data beyond patient management primarily due to data access and quality challenges. Access to the data was stymied by bureaucratic processes, paper-based recording and storage systems, and ownership/security concerns. Data quality was adversely affected by lack of standardization of data collection forms and processes, training of staff, data completeness, and technological and infrastructural constraints. Key opportunities for the increased use of RHIS data included the need for a national electronic health information system, adequate training of staff involved in data management, and a comprehensive monitoring and evaluation plan.

Conclusions: For greater use in evidence-informed policy-making, the country's RHIS data governance and management system urgently need to be reviewed. The focus should be on improving data quality and access with the expedited implementation of an interoperable national electronic data recording and storage system, accompanied by investments to ensure adequate staffing, timely training, appropriate infrastructure and technological support.

O2

An Audit of Patient Satisfaction with Telemedicine at the Rheumatology Outpatient Clinic of the San Fernando Teaching Hospital

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Objective: To explore patient satisfaction with telemedicine and its associated factors at the Rheumatology Outpatient Clinic, San Fernando Teaching Hospital (SFTH), and to determine patient preference for health-related consultations.

Methods: A total of 305 patients were surveyed via consecutive sampling. Data were captured via interviewer-administered questionnaires in a clinic setting capturing demographics, challenges with face-to-face consultations, and patient perspectives on telemedicine. Items from the Telemedicine Satisfaction Questionnaire and Telehealth Usability Questionnaire were modified to capture impact. Data were analyzed using descriptive and inferential statistics (SPSS version 29).

Results: Most respondents were ≥ 40 years old (78%), Indo-Caribbean (66%), female (89%), unemployed (65%) and had secondary level education or higher (76%). The main diagnoses were rheumatoid arthritis (36.39%) and systemic lupus erythematosus (21.78%). Time-off issues (13.19%), timing inconvenience (12.5%), and traveling costs (12.5%), were identified challenges with face-to-face consultations. Fear of interaction (23.30%) and financial difficulty (23.08%) which widely resulted from COVID-19, were additional challenges. Most patients reported satisfaction with telemedicine (71.4%), relating to easier access to health services (65.9%). Combined telemedicine and face-to-face consultations as appropriate were the most preferred option (73.40%). Patient satisfaction was highest in females ($p < 0.05$), person with tertiary level education ($p < 0.05$) and those who were single ($p = 0.005$). There was also a higher level of satisfaction in persons who were employed part-time ($p < 0.05$), received no time-off ($p = 0.001$) and were negatively affected by the pandemic ($p < 0.05$). Telemedicine convenience was a significant predictor of patient preference for health-related consultations ($p < 0.001$).

Conclusions: Patients are satisfied with the telemedicine service at the Clinic. Telemedicine convenience is significantly associated with patient satisfaction and preference for health-related consultations.

O3

Exploring Factors Affecting Technological Acceptance Among Healthcare Professionals: A Systematic Review

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Objective: To identify the prevailing technology acceptance models and theories and key factors influencing technology acceptance among healthcare professionals.

Methods: A systematic search was conducted following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. The review included articles published between January 2019 and December 2023, selected based on inclusion criteria and relevant keywords. Databases used for the search included Emerald Insights, Science Direct, Multidisciplinary Digital Publishing Institute (MDPI), ProQuest, PubMed, and IEEE Xplore. To ensure the validity and reliability of the findings, four researchers independently participated in the data extraction and analysis processes. The analysis process followed a narrative synthesis which was reviewed by each researcher and one external reviewer. A standardized extraction form was also employed to ensure that the data aligned closely with the study's objectives.

Results: After screening and review, 129 articles were found to meet the study's inclusion criteria. The Technology Acceptance Model (TAM) and the Unified Theory of Acceptance and Use of Technology (UTAUT) emerged as the most frequently utilized frameworks for explaining technology acceptance among healthcare professionals. Furthermore, the analysis revealed that perceived usefulness, perceived ease of use, lack of skills, user attitudes, and technology infrastructure were the five primary factors influencing technological readiness.

Conclusion: Understanding these frameworks and technological readiness factors can help policymakers and healthcare professionals develop initiatives and policies to encourage effective technology adoption and use among healthcare professionals in various settings.

O4

A new digital platform for EQ-5D-5L Valuation studies creates opportunities for using health outcomes and QALYs in the Caribbean.

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Objective: EuroQol 5 Dimension (EQ-5D) health outcomes measures are increasingly used in clinical practice, research and health policy in developed and developing countries. In many health systems, drugs and health technologies are evaluated using cost per Quality Adjusted Life Years (QALYs) based on their national EQ-5D value-sets (country-specific QALY-adjustment values). The current valuation protocol to create an EQ-5D-5L value set required 1,000 interviews (minimum) with highly trained/specialized interviewers (not feasible in many small-developing countries). The objective of this study was to test a novel approach to developing an EQ-5D-5L value set using a fully online (no interviewer) approach.

Methods: In 2022/23 an EQ-5D-5L value set was created for Trinidad and Tobago using the standard protocol (EuroQol Valuation Technology (EQ-VT)) with a representative sample of 1,079 respondents. A separate representative sample of 970 respondents completed a fully on-line set of 18 paired comparisons (Discrete Choice Experiment (DCE)-duration) in which they selected their preferred EQ-5D-5L state-duration combination from each pair. The state-duration pairs were based on an efficient discrete choice-experiment design. Regression analysis was used to fit the DCE-duration value set. The DCE-duration value set was compared with the EQ-VT value set using scatterplots, Bland-Altman plots, and correlation coefficients.

Results: Scatterplots and Bland-Altman plots showed very similar results for the two value sets. The correlation coefficient was 0.973. The ordering of dimensions was identical for the two sets.

Conclusion: DCE-duration offers a cost-effective approach for developing EQ-5D-5L value sets. This has important implications for the Caribbean region as it creates the opportunity to introduce QALY-based analyses in clinical, research and policy work.

O5

Religious Coping and Mental Health During the COVID-19 Pandemic: A Study from Trinidad and Tobago

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Objective: To determine whether persons who identify as religious coped better and were at lower risk of anxiety and depression during the first COVID-19 pandemic lockdown in Trinidad and Tobago.

Methods: A cross-sectional study, using an adapted pre-tested online survey instrument, was conducted amongst adults using convenience sampling. RedCap was used for data collection and data were analysed using chi-square tests and presented as Odds Ratio (OR) (95% Confidence Interval (CI)).

Results: Majority of respondents (88%) identified with a religion and were significantly more likely to rate religion as important in their lives than those with no religion ($p < 0.001$). Persons who regarded religion as important were significantly less anxious (OR = 3.4, 95% CI [2.4, 4.6]), and depressed (OR=3.8, 95% CI [2.8, 5.2]) during the lockdown, than those who described religion as unimportant. Degree of importance mattered as those reporting religion as very important were significantly less likely to be anxious (OR = 0.6, 95% CI [0.5, 0.9]) or depressed (OR = 0.6, 95% CI [0.4, 0.8]) than when religion was somewhat important. Religious persons were also more likely to report positive experiences during the pandemic.

Conclusions: In Trinidad and Tobago, religious persons coped better during the COVID-19 pandemic. This has implications for the use of religious coping at times of national crises. Future research should explore the nature of the association between religion and mental health and the use of religious coping as a therapeutic intervention.

O6

Knowledge, Attitudes and Practices of Emergency Physicians in treating Sexual Assault Patients presenting to the Emergency Departments in South Trinidad

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Objectives: To assess the Knowledge Attitudes and Practices, (KAP) of doctors in treating Sexual Assault, (SA) patients in Emergency Departments (ED) in South Trinidad, and to suggest recommendations, based on gaps identified.

Methods: A cross-sectional survey was conducted between 10th - 24th July 2023 involving 106 ED doctors employed at five EDs in South Trinidad. A 20-point questionnaire explored participants' profile, KAP and recommendations for improved care. It was distributed via Google Forms. Descriptive analysis was performed on data collected using Microsoft Excel.

Results: A total of 102 ED doctors participated in this study. The results indicated that most (81.2%) of participants were not formally trained to treat SA patients and 73.3% were unaware of policies guiding management of SA patients. None of the participants felt "very prepared" when treating SA patients unsupervised. The top three recommendations were training (25%), protocols (23%) and specified physicians for the assessment of SA patients (20%). About 96% agreed to accept training if offered while 98% believed a specialized SA examiner would provide the best care to SA patients.

Conclusion: This study revealed that there is room for improvement in the KAP of ED doctors treating SA patients in South Trinidad and participant's willingness to improve practices. Training, standardized protocols and specialized SA examiners may improve the care of SA patients in South Trinidad.

O7

Perceptions of Workplace Violence and Safety in the Emergency Departments: A Survey of the Staff of the Emergency Departments in the South-West Regional Health Authority

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Objective: To assess the perceptions of workplace violence (WPV) and safety among various categories of Emergency Department (ED) staff.

Methods: A cross-sectional descriptive study was conducted on 317 staff from the five EDs of the South-West Regional Health Authority. It was performed between January to March 2021 using a questionnaire which included demographics, safety, prevalence, perpetrators, effects and reporting of WPV. The data were analysed using SPSS (Version 22.0).

Results: The prevalence for WPV was 20.5% for physical abuse (PA), 56.5% for major verbal abuse (VA) and 84.2 % for minor verbal abuse (mVA). Most incidents occurred between 2pm-10pm, PA (50.8%), VA (62.6%) and mVA (61.5%). Perpetrators were most likely to be patients

[PA (80.0%), VA (49.2%), mVA (59.9%)] and males [PA (84.6%), VA (64.8%) mVA (48.7%)]. Most perpetrators of PA (63.1%) and VA (54.2%) were believed to be intoxicated by drugs or alcohol and psychiatric or confused patients [PA (69.8%)]. Productivity was significantly affected by PA (46.2%) and VA (41.9%). Nurses reported the highest rates of absenteeism due to WPV [PA (60%), VA (29.3%) and mVA (11.7%)]. Many staff did not report WPV incidents (41.0%). Most participants (67%) did not feel safe in the ED.

Conclusions: WPV events were prevalent in the ED and were more likely to occur between 2pm to 10pm. The risk factors for perpetrators were patients, male, intoxication and psychiatric or confused persons. Additionally, most ED staff felt unsafe and WPV incidents significantly affected absenteeism, productivity, and psychological health of staff but were often under-reported.

O8

An Analytical Study on Catheter Related Complications and Quality of Life Assessment in Outpatients with a Long-Term Indwelling Catheter

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Objective: To determine prevalence of indwelling catheter (IDC) related complications and associations with quality of life (QOL) in outpatients with IDCs in Trinidad, and to determine self-reported adequacy of patient education on catheter care.

Methods: A cross-sectional study was conducted at urology clinics across Trinidad. A researcher-assisted questionnaire was used to collect data on QOL, IDC-related complications, adequacy of education on catheter care, social life, self-awareness, and adaptation. QOL was measured using the International Consultation on Incontinence Questionnaire-Long Term Catheter quality of life (ICIQ-LTCqol), which had a maximum score of 45. The results are presented using descriptive statistics.

Results: A total of 384 outpatients completed the questionnaire comprising 82.3% males and most (81.8%) were aged 61-70 years. Prevalence of catheter related complications was 60.4%, including 45% with reported catheter-associated urinary tract infections (CAUTIs). In addition, 70.6%

reported pain/discomfort, 58.3% revisited the hospital for additional catheter care, and 21.9% were hospitalized for 1-2 days. Only 21.6% of patients indicated that they were adequately informed on proper catheter care, including 18.1% of those who had complications. Mean QOL score was 20.72; and patients with complications had lower scores than those without. Patients reported feeling embarrassed around family (77.8%), preferring to stay home as they felt judged in public (74.2%), interacting less with friends and family (69.5%), that their sex life/intimacy was affected (52.9%), and needing psychological support from friends and family (57.8%).

Conclusion: The high prevalence of catheter-related complications and a poor quality of life can be improved with better outpatient education on catheter care.

O9

Nasal, lungs and intestinal aerobic bacterial flora in wild Black-eared Opossums (*Didelphis marsupialis*) in Trinidad, West Indies.

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Objective: The meat of the black-eared opossum is considered a delicacy by certain sections of the Trinidad and Tobago population, thus it is highly sought after and hunted. Due to its close association with human habitats and being a food source, it is critical to investigate its potential role in the dissemination of zoonotic microorganisms. This study sought to identify the bacterial microflora found in the nasal cavity, lungs and gastrointestinal tracts of opossums.

Methodology: Nasal swabs, lung and intestinal samples were collected from 64 non-diseased opossum carcasses. Samples were collected via field necropsy and transported back to the laboratory where they were processed and submitted for microbiological identification using conventional culture and biochemical techniques. Data were tabulated using Microsoft Excel and descriptive statistical analysis was done using SPSS (version 24).

Results: A total of 607 bacterial isolates were recovered, with most isolated from the large intestine (244; 40.2%),

small intestine (235; 38.7%), nasal cavity (123; 20.3%) and lungs (5; 0.8%). *Escherichia coli* was the most common organism isolated (100; 16.5%). Bacteria were only recovered from five pneumonic lung samples which were confirmed histologically. Similar bacterial species from the pneumonic lung were present in the nasal cavity samples. *Salmonella* spp. was recovered from eight animal intestines. *Shigella* spp was retrieved from 5 intestinal samples.

Conclusion: The black-eared opossum can harbour many bacterial pathogens including *Salmonella* and *Shigella* spp which were recorded for the first time in this species in Trinidad. Therefore, persons involved in handling opossum carcasses thus need to ensure hygienic practices are involved to limit transmission.

O10

The utility of shock index in predicting mortality in adults presenting to emergency departments with sepsis.

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Objective: To evaluate the predictive value of a shock index (SI) of >1 in predicting mortality in adult patients presenting to emergency departments (EDs) with sepsis, compared to those with an SI ≤1.

Methods: A prospective observational study was conducted in the EDs of the South-West Regional Health Authority from October 2022 to March 2023, recruiting patients with sepsis. Demographic data, vital signs, SI, comorbidities, treatment, source of sepsis and outcomes (primarily in-hospital mortality) were recorded. Logistic regression (including odds ratio) using the Wald test and Receiver operating characteristic (ROC) analyses were done to examine how SI predicted mortality.

Results: A total of 221 patients with sepsis were included in the final sample, where 25% had a SI >1, and 75% had a SI < 1. SI > 1 significantly predicted mortality (p = .001, OR = 3.62), after controlling for gender, age, and comorbidities. For different sources of sepsis, SI > 1 was significant in predicting mortality in respiratory (p = 0.001, OR = 3.37) and skin/soft tissue infections (p = 0.04, OR = 9.33), but not in intra-abdominal (p = 0.17 OR = 3.25) and urinary tract infections (p = 0.77, OR = 1.50). ROC analysis showed that SI was a poor discriminator of in-hospital mortality when the raw value of SI was used.

Conclusion: An SI > 1 is a good predictor of in-hospital mortality in patients with sepsis, especially in respiratory and skin/soft tissue infections, but values < 1 should not be considered reassuring.

O11

Impact of COVID-19 on Voice, Speech and Swallowing Function: An Analysis of the United States National Health Interview Survey

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Objective: Emerging evidence indicates a possible link between COVID-19 infection and deficits in communication and swallowing functions. However, population-level research is necessary to understand the broader clinical impact of the virus. This study aims to determine whether previous COVID-19 infection predicts the likelihood of developing voice, swallowing or speech impairments.

Methods: Data were analysed from the 2022 National Health Interview Survey incorporating COVID-19-related questions and an Adult Voice, Speech and Language Disorders Supplement. The study focused on adults in the United States aged 18-70 years (n=19,684) using sampling weights for representative estimates. Logistic regression models assessed the relationship between COVID-19 history and self-reported impairments.

Results: Of the respondents, 31.19% self-reported a COVID-19 infection with 38.85% confirmed via polymerase chain reaction testing. Among these, 12.48% reported voice problems, more prevalent in those with confirmed COVID-19 (OR = 1.41; 95% CI: 1.22-1.63). Swallowing impairments affected 6.14% respondents, with COVID-19 history significantly increasing odds (OR = 1.57; 95% CI: 1.29-1.92). Speech issues were reported by 4.41%, with older age and poorer health as predictors alongside increased odds associated with COVID-19 diagnosis (OR = 1.34; 95% CI: 1.05-1.70).

Conclusions: Findings suggest that COVID-19 history may be associated with higher odds of voice, swallowing and speech impairments. Future research should investigate the severity of COVID-19 symptoms in relation to communication and swallowing. Integrating COVID-19 modules into other global health surveys such as the WHO STEP-wise Survey which was recently relaunched in Trinidad and Tobago by the Ministry of Health, could help facilitate targeted interventions for COVID-19 rehabilitation.

O12

Trends and Socio Demographic patterns in HIV knowledge among young women 15-24 years in Trinidad and Tobago - Evidence from the 2011 and 2022 Multiple Cluster Indicator Surveys

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Objective: To describe the levels and socio-demographic patterns of HIV knowledge among young women aged 15-24 years.

Methods: Data from Multiple Indicator Cluster Survey conducted in 2011 and 2022 were used to examine Comprehensive HIV Knowledge among young women 15-24 years. Patterns and trends were examined using proportions for two years. Socio-demographic variables included Regional Health Authority, area of residence, age group, marital status, education, ethnicity and socio-economic status or wealth quintile.

Results: Overall comprehensive knowledge of HIV among young women was low in 2022 and showed a decline from 60.2% in 2011 to 38.1 % in 2022. HIV knowledge declined for each socio- demographic variable. In 2011, HIV knowledge was highest in Eastern Regional Health Authority (76.1%) whereas in 2022, Southwest showed the highest level (45.1%). HIV knowledge was higher in rural communities compared to urban areas in both survey years - 63.5 vs 57.7% (2011) and 41.5 vs 35.6% (2022). Persons who were ever married showed higher knowledge. Young women in the poorest wealth quintile (31%) had the lowest level of HIV knowledge in both survey years while young women of African descent showed the highest level (63%) in 2011 and East Indian young women (40.7%) in 2022.

Conclusions: There is need on raising HIV knowledge among young women who are at risk of HIV infection especially the least educated, and the poorest. Strategic communication campaigns should be designed to reach these vulnerable populations. Future research would require examining the predictors of HIV knowledge.

O13

Comparing the diagnostic accuracy of the revised Geneva score versus the Wells score in diagnosing pulmonary embolism in a Trinidadian population

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Objectives: To compare the diagnostic accuracy of the revised Geneva score (rGs) versus the Wells score (Ws) in diagnosing pulmonary embolism (PE) in a Trinidadian population.

Methods: A prospective cohort of 378 adult emergency department (ED) patients presenting to the San Fernando

General Hospital (SFGH) with suspected PE who underwent computed tomography pulmonary angiography (CTPA) from May 12th, 2022 to January 31st, 2023 were recruited. Patients' demographics and clinical data were collected using physician-administered questionnaires. The Ws and rGs were calculated, and patients were risk-stratified. CTPA was the gold standard diagnostic test used to diagnose a PE. Data was analysed using SPSS 28.0. Pearson's χ^2 and Fisher's exact tests were used for comparisons of patient characteristics with and without PE. Parameters of both clinical decision rules (CDRs) were assessed using odds ratios (95% CI). Diagnostic performances of both scores to predict PE were assessed by receiver operating characteristic curve analysis.

Results: Of the 378 patients enrolled in this study, 370 had definitive CTPA results. Most patients were less than age 65 years (n = 273, 73.8%) and female (n = 262, 70.8%). Seventy-seven patients (20.8%) had CTPA-confirmed PE. Sensitivity and specificity of the Ws were 0.649 and 0.563 respectively. Sensitivity and specificity of the rGs were 0.922 and 0.130 respectively. The area under the curve (AUC) of the Ws was greater (0.606) than the rGs (0.526). Optimal cut-off point for the rGs was found to be 5.

Conclusions: Both CDRs performed suboptimally in the local population. However, the Ws had greater diagnostic accuracy than the rGs for identifying PE. Both scores had similar predictive performances at the optimal cut-off point of 5 for the rGs.

O14

Oral Health Knowledge, Attitudes and Practices among people living with Diabetes in Trinidad: Preliminary findings

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Objective: To determine the oral health knowledge, perceived oral health status and self-reported dental problems among people living with diabetes (PLWD).

Methods: Data were collected using a modified version of a validated self-administered questionnaire which was administered to 200 PLWD attending outreach events in Trinidad hosted by the Diabetes Association of Trinidad and Tobago (DATT). It captured demographics, attitudes, knowledge and behaviour towards dental health. The data were analysed using IBM SPSS Statistics 29.0.

Results: Of the 200 participants, 65.5% were females, 60.4% were Indo-Caribbeans and 67.5% reported Type 2 diabetes. The average age was 59.93±11.39 years. About 52.5% were unsure or thought that diabetes did not affect oral health whereas 32.6% were unaware or unsure that dia-

betes medication caused dry mouth. Furthermore, 60.4% were unsure or unaware that dry mouth could cause tooth decay and 71.4% were unsure or did not believe that gum disease could affect blood glucose control. Additionally, 44.4% did not know whether treating gum disease could help with glucose control, 78.5% felt visiting a dentist was very important, 82% strongly agreed that oral health was as important as general health and 53% of participants visited a dentist within the last 12 months. About 46% rated their oral health as fair or poor.

Conclusions: Oral health knowledge among PLWD in Trinidad may be lacking in key areas, particularly the importance of periodontal health. PLWD may benefit from oral health promotion initiatives to improve oral health knowledge and dental attendance.

O15

Nutritional Impact Symptoms and Dietary Changes During Cancer Treatment: A Qualitative Analysis (Preliminary Results)

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Objective: To investigate nutritional impact symptoms, dietary habits and dietary adjustments of cancer patients during treatment in Trinidad.

Method: An exploratory qualitative study was conducted, targeting 15 cancer patients from non-profit organizations, aged 20-80 years, diagnosed within the last five years, and undergoing treatment. Data were collected about participants' experiences with dietary changes and nutritional needs using semi-structured, face-to-face interviews which were recorded and transcribed. Thematic analysis was conducted using *Dedoose* software.

Results

- Eight participants were interviewed, from which three major themes emerged: Nutrition Impact Symptoms (NIS), Dietary Changes, and Lack of Information.
- *Nutrition Impact Symptoms* - Participants experienced a combination of symptoms during treatment: nausea, metallic taste, constipation, fatigue, and loss of appetite, taste and smell.
- *Dietary Changes* - Changes reported in portion sizes and meal frequency. Intake restrictions noted for: flour, sugar,

processed foods, artificially flavored foods/beverages, and meats (chicken, beef and pork). Participants introduced herbal teas, prune juice, lime water, various fruits, ground provisions, chickpeas, and fish into their diet.

- *Lack of Information* – Dietary guidance was not received from healthcare professionals; participants relied on personal research, information from other cancer patients and support groups.

Conclusion: Cancer patients undergoing treatment experienced NIS leading to changes in dietary habits and nutritional intake. Nutritional and dietary guidance and support should be an area of greater focus from healthcare providers as part of integrated treatment and care.

O16

An Examination of Food Insecurity among Students at The University of the West Indies St Augustine Campus: Is There a Need for a Students' Food Pantry?

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Objective: To examine the prevalence and levels of food insecurity among students at The University of the West Indies, St. Augustine Campus, and assess the need for a student food pantry.

Methods: A cross-sectional study recruited a convenience sample of 422 students, aged 18 years and older, from the University of the West Indies, St. Augustine Campus. Data were collected via an online self-administered questionnaire. Food insecurity was evaluated using the Food and Agricultural Organization (FAO) Food Insecurity Experience Scale. The food pantry needs assessment included one qualitative and eight quantitative questions. Descriptive statistics were used for statistical analyses with SPSS version 29.

Results: A total of 418 students participated, with a mean age of 23.56 ± 6.96 years, achieving a 99% response rate. Notably, 29.6% of students supported five or more dependents. The study revealed that 75.1% of students experienced some level of food insecurity: 24.9% were food secure, 33.3% mildly food insecure, 27.1% moderately food insecure, and 14.7% severely food insecure. Although 81.8% of students expressed a need for a student food pantry, only 20.3% would use it frequently. Reasons why students would not use a food pantry included operational efficiency, pantry funding and stocking, and potential misuse of resources, with a noted lack of awareness about the pantry's existence and function.

Conclusions: There was a pronounced prevalence of food insecurity among students at the University of the West Indies, St. Augustine Campus. A significant majority expressed a demand for a campus food pantry to help alleviate food insecurity issues.