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Forms of Self-Criticizing and Self-Reassuring Scale: Adaptation and early findings in a sample of Portuguese children

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Background

Self-criticism is characterized by self-blame and negative self-judgements, often associated with the onset of psychopathology and interpersonal difficulties. Two forms of self-criticism were conceptualized: the inadequate self (feelings of inadequacy or deficiency), and the hated self (more intense feelings of self-disgust and aggressiveness directed towards the self). On the other hand, the reassured self was conceptualized as the acceptance of past failure and mistakes, which is believed to be a protective factor against psychological problems. Objective: This study is aimed at adapting and presenting preliminary findings on the Forms of Self-Criticizing and Self-Reassuring Scale for Portuguese children (FSCSR-C).

Methods

A sample of 127 children participated in this study and were administered a research protocol including the FSCSR-C. Results: after deleting items that presented reliability and saturation problems, exploratory factor analysis with orthogonal rotation yielded a 3-factor solution that explained 49.33 % of the total FSCRS-C scores. The measure revealed a good internal consistency of the 3 factors found in the exploratory analysis: Inadequate self (α = 0.66), hated self (α = 0.73), reassured self (α = 0.69). Convergent and divergent validity were established with measures of shame and emotional intelligence.

Conclusions

Self-criticism can make individuals more vulnerable to psychopathology in adult life, and that such internal relationship models may arise early in childhood. Findings indicate that the FSCRS-C is and adequate measure to assess self-criticizing and self-reassuring in children with 8 years old or above. The FSCRS-C may constitute an important contribution for future research and in the development of preventive and intervention strategies for children.

Keywords

Self-criticism, psychometric properties, children

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Predictive ability of the Perinatal Depression Screening and Prevention Tool – Preliminary results of the dimensional approach

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Background

Experts recommend that the perinatal depression screening should combine the evaluation of depressive symptoms and of psychosocial risk factors. Objective: To analyse the predictive ability of the Perinatal Depression Screening and Prevention Tool (PDSP Tool) assessing both PD symptoms and risk factors previously identified by our team (lifetime history of depression/LtHD, prenatal insomnia, increased depressive symptoms and negative affect/NA at pregnancy) to identify clinical relevant postpartum depression.

Methods

Ninety-two (92) pregnant women (Mean age: 32.64 ± 4.59 years) in their second trimester of pregnancy (21.38 ± 2.41 weeks of gestation) completed the PDSP Tool; at six (6.34 ± 1.66) weeks postpartum they completed the Postpartum Depression Screening Scale (PDSS-21), in order to determine if they scored above or below the PDSS-21 cut off point for clinical depression (>40).

Results

Eighteen women (19.6 %) presented PDSS-21 scores > 40. The global correct classification rate of the PDSP Tool was 65.2 %. The false-negative rate was 4.3 %, the false-positive rate was 35.9 %, the true-negative rate was 44.6 % and the true-positive rate was 15.2 %. Considering the PDSP Tool components, 61.0 % of the women scoring PDSS-24 > 43 at pregnancy (X2 = 14.24, OR = 7.37); 38.9 % of women with LtHD (X2 = 14.24, OR = 7.37) and 66.7 % of women with high NA at pregnancy (X2 = 17.64, OR = 9.38) (all p < .001) presented PDSS-21 > 40 in the postpartum.

Conclusions

Clinically it is a very difficult task to identify the pregnant women who will have significant depressive symptoms in the postpartum. Our preliminary results are encouraging, by showing that using the PDS Tool can help we identify approximately two-thirds of these women.

Keywords

Perinatal depression, health assessment, screening

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Psychometric properties of the BaSIQS-Basic Scale on insomnia symptoms and quality of sleep, in adults and in the elderly

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Background

Poor sleep and insomnia symptoms (e.g., difficulties in initiating or maintaining sleep, early morning awakenings, light sleep) are amongst the most common sleep complaints in adult's populations, and especially in older ages. The Basic Scale on Insomnia complaints and Quality of Sleep (BaSIQS) [1] was developed as a brief tool to access sleep quality and insomnia complaints, in alternative either to longer questionnaires (such as the PSQI, the Pittsburgh Sleep Quality Index) or to single item assessments, and has already shown appropriate psychometric properties in higher-education samples. Objective: To assess the reliability and validity of the BaSIQS in non-student adults with varying age ranges and in the elderly.

Methods

Sample 1 comprised exclusively 60 elderly people (65 % women) from 66 to 89 years old, 30 institutionalized and 30 non-institutionalized. Sample 2 comprised 227 participants (52.2 % men) from 20 to 79 years old. Participants completed the BaSIQS and two questionnaires relevant for insomnia in order to examine scale validity (GSES-Glasgow Sleep Effort Scale and GCTI-Glasgow Contents of Thought Inventory).

Results

As to internal consistency, Cronbach alpha coefficients were 0.73 (sample 1) and 0.84 (sample 2). Corrected item-total correlations ranged from .28 to .61 (sample 1) and from .52 to .69 (sample 2). Moderate to large associations were found between the BaSIQS, GSES and GCTI, supporting construct validity. As expectable, women and older individuals had higher sleep difficulties in all scales.

Conclusions

BaSIQS shows suitable reliability and validity in young, middle-aged and elderly adults, so that it may constitute a practical tool to briefly assess perceived sleep quality and insomnia complaints.

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Keywords

Sleep quality, insomnia symptoms, questionnaire, adult, elderly, BaSIQS, scale reliability and validity

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Enlightening the human decision in health: The skin melanocytic classification challenge

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Background

Skin cancer is becoming increasingly relevant due to its high rates of incidence and mortality, being early detection of skin markers the key for successful treatment. Digital image processing (DIP) techniques can quantitatively describe dermoscopic images, reducing the effects of inter and intra individual differences in classification, resulting from the subjectivity of human eye assessments. Moreover, quantitative markers enable the use of automatic classifiers, which should be regarded as an additional tool in diagnosis. Objectives: This work employs image descriptors and classification algorithms, aimed to describe and differentiate cancerous from non-cancerous skin images.

Methods

Texture and shape characteristics from 104 images were extracted, representing 166 features. Subsequently, four groups were defined: Texture, Shape and Local binary patterns (TSL); Texture and Shape (TS); Texture and Local binary patterns (TL); and Texture (T). Next, the ReliefF feature selection algorithm was employed to rank features. For each group, the 10 %, 20 %, 40 % and 80 % of the best features were selected. All subsets were used to construct models using four machine learning (ML) methods implemented in the Weka framework: J48 Decision Tree, Support Vector Machines, Nearest Neighbour and Random Forest.

Results and conclusions

Among the ML used algorithms, J48 classifiers were considered promising after reaching the higher score in a sensitivity derived metric (14.01 in 16.00) when compared with the others.

Once the obtained ML classification reveals to be competitive, when comparing with other related works, the results strengthen the idea that DIP can be useful to provide a second opinion regarding skin cancer diagnosis.

Kevwords

Skin Cancer, Dermoscopy, Digital Image Processing, Machine Learning Algorithms

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Test-retest reliability household life study and health questionnaire Pomerode (SHIP-BRAZIL)

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Background

Population health research primarily aims to find answers to various health issues and the integrity of the results is largely determined by the quality of the information produced. Objectives: To assess the test-retest reliability of the data collected during home interviews conducted by field interviewers in the Study of Health In Pomerode (SHIP-BRAZIL) in partnership with the University Ernst-Moritz-Arndt University of Greifswald in Germany.

Methods

Eight questions in the household questionnaire SHIP - BRAZIL study were administered twice with an interval of 15 to 20 days, from May to August 2015, with 85 participants. Test-retest reliability of the responses was estimated by the kappa statistic.

Results

Kappa coefficients ranged from 0.59 to 0.90. The Kappa values for stratification by gender ranged from 0.71 to 0.92 in females and 0.64 to 0.94 for men. For ages they ranged between 0.54 and 0.90 in participants aged 40 years or more and 0.77 to 1.0 in participants of 39 years old or less. By level of education they ranged from 0.48 to 0.88 in participants with primary education and 0.82 to 0.92 in participants with high school and college. There was no significant variation in agreement among sociodemographic subgroups.

Conclusion

The high Kappa values indicate good reliability and reproducibility of the data collected with the household questionnaire SHIP - BRAZIL study between May-August 2015 ranging from moderate to perfect agreement, ensuring the applicability of these data in future actions of promotion and prevention of health.

Keywords

Reliability, Reproducibility of results, Questionnaire, Epidemiology

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Characterization of sun exposure behaviours among medical students from Nova Medical School

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Background

The exposure to sun ultraviolet radiation has important implications on public health. The intensive and intermittent solar exposure is associated with well reported complications and the younger population is a target due to the increase of malignant pathology of skin. The aim of this study was to characterize sun protection and sun exposure behaviour among medical students from Nova Medical School (Lisbon).