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HEALTH PROMOTION ACTIONS FOR WOMEN AT UBS NOVA FLORESTA - PATOS DE MINAS

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Abstract: According to data from INCA[4], breast cancer ranks second among neoplasms in terms of incidence and third in terms of mortality, while cervical cancer ranks third in terms of incidence and fourth in terms of mortality. However, cervical cancer has high cure rates in early cases and is one of the few cancers that has the technology for prevention, early detection and treatment. Breast cancer, on the other hand, is the main killer of women and, in recent years, its incidence has increased, making it the cancer that most affects the female population. The project's methodology basically consists of 3 stages: 1) Analysis of medical records; 2) Creation of a Women's Card; 3) Creation of software. The results of the research were aberrant, since 43% of the women studied had never even had a preventive examination (Pap smear) and 45.5% of them had never had a mammogram. We therefore conclude that there is a need to implement actions that increase women's adherence to preventive services. Through the actions proposed in this project, in addition to carrying out this preventive task, we will also provide greater organization of the UBS.

Keywords: Prevention. Gynecology. Management.

INTRODUCTION

Cervical cancer is the third most frequent tumor in the female population, behind breast and rectal cancer, and the fourth leading cause of cancer death in women in Brazil. Therefore, the earlier the intervention, the greater the woman's chance of survival. Factors such as the female population's difficulty in accessing health services and programs and difficulties on the part of municipal and state managers, as well as UBS health teams, in establishing a flow of care, may be contributing significantly to the increase in mortality rates. Given the importance and frequency of the aforementioned disease, an in-depth study of the subject by means of the present work seems imperative.

OBJECTIVES

To improve the organization and control of the frequency and results of mammography and cervical cancer screening, according to the age range recommended by the Ministry of Health at the Nova Floresta UBS in Patos de Minas.

MATERIAL AND METHODS

The project basically consisted of three stages: 1) Analysis of medical records; 2) Creation of a Women's Card to monitor the frequency and results of mammograms and Pap smears; 3) Creation of software to improve the team's management of the frequency and results of these tests. The project's total sample consisted of 239 women, of whom 88 were in the recommended age group for mammography and 224 were in the Pap smear group. After evaluating a total of 210 medical records from families in Micro-areas 3 and 6 belonging to the Nova Floresta Basic Health Unit, 82% were included in the project's target audience, while 18% of families were excluded because they were not suitable because of their sex or age group

We've made a Women's Card so that it's possible to record and monitor the frequency with which these tests are carried out, and so that the patient has control over her own health. In addition, we have created software (in progress) so that the team can quickly access the results, the date of the last test and the date on which the patient should return. The aim is to minimize expenses arising from excessive procedures and to facilitate the active search for patients who do not have them done

RESULTS AND DISCUSSION:
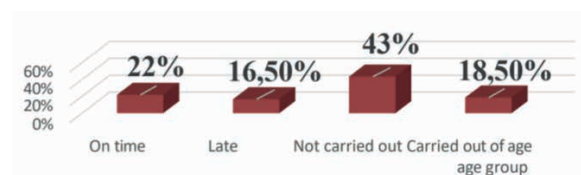
Graph 1- Mammography frequency

According to the data from this project, 43% of the women involved had never had a mammogram, 22% were up to date with the recommended routine, as opposed to the 16.5% who were late, and 18.5% of the women had the exam unnecessarily, as they had no risk factors or age to justify the procedure. Amorim VMSL *et al (2008)[(1)]* obtained similar results in their study, finding that 42.5% of women living in Campinas had never had a mammogram and 8.3% had had one more than two years previously, i.e. they were overdue.

Graph 2- Frequency of Pap smears

According to this study, 41% of the female population is overdue for a preventive examination (Pap smear). On the other hand, 13.5% of women are up to date with what is recommended and, finally, 45.5% have not had the test at all. In a survey carried out at the School Health Center in the Uterine and Breast Cancer Control Program, the reasons for not having a Pap smear were specified, supporting the high percentage shown in Graph 2. These reasons range from fear in carrying out the test or even of the result, shame and embarrassment, to total ignorance of the importance of the test as a preventive method for cervical cancer.[2,3]

CONCLUSION:

There is a need to implement actions that increase women's adherence to preventive services. Through the "Women's Card" and the software, we will have the possibility of maximizing the positive effects of breast and cervical cancer prevention, as well as providing greater organization of the UBS.

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