



American Journal of Scientific Research and Essays (ISSN:2475-7527)



ABUSIVE USE OF DRUGS CONTROLLED BY THE USERS OF FAMILY HEALTH STRATEGY THE USERS OF THE IPAUMIRIM FAMILY HEALTH STRATEGY - CEARÁ

Carla Suzana Balbino da Silva Miranda^{1*}, Antonio Aury de Macêdo Torquato², Adaires Fontes Balbino³

¹Mestranda na Universidade Estadual do Ceará (UECE) ²Estratégia Saúde da Família – Prefeitura Municipal de Ipaumirim – Ceará; ³Centro de Apoio Psicossocial – Prefeitura Municipal de Lavras – Ceará.

ABSTRACT

Introduction Benzodiazepines (BZD) are drugs that act directly on the central nervous system, altering cognitive and psychomotor aspects. In Brazil, it is the third class of most prescribed drugs, being used by approximately 4% of the population. The restricted, rational and short-term use of benzodiazepines is not observed on a large scale by professionals who attend the Ipaumirim Family Health Strategy, due to the high number of people who just want the revenue renewal. **General Objective:** To develop an action plan to promote the reduction of drug abuse controlled by users of the Ipaumirim Family Health Strategy - CE. **Methodology:** This is an intervention project that consists of an action proposal to face a real problem. The interventions were performed at the Basic Health Unit of Ipaumirim - CE, from June 18 to August 16, 2018 with evaluation every three months, with 36 users. Identification was performed through medical records, interviews in routine consultations. **Results:** the lack of information from users was clear, resulting in changes in actions involving primary care to alternative treatments such as physical activity, food reeducation and psychotherapy, stimulating actions such as the booklet, an organizational basis, since it does not have the horus system. **Conclusion:** the study effectively allowed the development of a new health promotion strategy.

Keyword: Use, Benzodiazepines, Abuse, Reduction

*Correspondence to Author:

Carla Suzana Balbino da Silva Miranda
Mestranda na Universidade Estadual do Ceará (UECE)

How to cite this article:

Carla Suzana Balbino da Silva Miranda, Antonio Aury de Macêdo Torquato, Adaires Fontes Balbino, ABUSIVE USE OF DRUGS CONTROLLED BY THE USERS OF FAMILY HEALTH STRATEGY THE USERS OF THE IPAUMIRIM FAMILY HEALTH STRATEGY - CEARÁ. American Journal of Scientific Research and Essays, 2020 x:xx.

 eSciPub
eSciPub LLC, Houston, TX USA.
Website: <https://escipub.com/>

INTRODUCTION

Benzodiazepines (BZD) are drugs that act directly on the central nervous system, altering cognitive and psychomotor aspects. In Brazil, it is the third class of most prescribed drugs. Benzodiazepines are indicated only for acute and subacute treatment of anxiety, insomnia and seizures, although in the past they have been used as the first line of treatment for various disorders, especially psychiatric ones^{1, 2}.

Are among the most widely used drugs in the world in which about 15% of the entire US population has received at least one benzodiazepine prescription. Issues related to excessive and sometimes unjustified use of benzodiazepines are observed in several countries, regardless of their degree of economic development, in large urban centers and also in rural populations^{3,4,5}

The Basic Health Units (BHU) are the preferred gateway to the Unified Health System (SUS). The goal of these posts is to meet up to 80% of the population's health problems, without the need for referral to hospitals⁶. As for the municipality of Ipaumirim there are four Family Health Units, three from the Family Health Program, located in the Felizardo Vieira and Canaúna districts and the third located in the rural area in the locality called Aroeiras. The team I am part of belongs to the Mais Médicos do Brasil Program, located at headquarters, but covers the rural and urban areas (IPECE).

Promoting rational drug use is a key component of the National Drug Policy. Medicines today play an important role in public health systems. However, lack of treatment guidance can result in poor adherence, misuse and inefficiency. Often, patients end up taking medications without medical supervision, leading them to addiction, which can still lead to a serious public health problem⁷.

At least 35% of the medicines obtained by the Brazilian population are through self-medication⁸. Incidence also strongly observed in the routine of care of the Family Health

Strategy (FHS) of Ipaumirim-CE. These medications should have their use restricted and for a short period of time, abuse can bring serious consequences such as cardiovascular and memory changes⁹. The restricted, rational and short-term use is not observed on a large scale by professionals who perform care at the Ipaumirim FHS, due to the high number of people who just want the renewal of the recipe. It is necessary a study on the basis of the problem, directly linked to the real reason and motivational needs of users, leading the team to intervene more accurately and effectively to reduce the abuse of this medication.

OBJECTIVE

Develop an action plan to promote the reduction of drug abuse controlled by users of the Ipaumirim Family Health Strategy - CE.

Specific objectives

- Evaluate the socioeconomic profile of users using benzodiazepine controlled medication;
- Construct a care plan aimed at reducing the indiscriminate use of benzodiazepines by the enrolled population.

METHODOLOGY

Kind of study

This is an intervention project that consists of a proposal for action to confront a real problem observed in the territory of coverage.

Period and Place of Study

The interventions were performed at the Basic Health Unit of Ipaumirim - CE, from June 18 to August 16, 2018 with evaluation every three months.

The Basic Health Unit of the Municipality of Ipaumirim, called Headquarters I is located at Rua Coronel Raimundo Holanda S / N, Bairro - Centro. Ipaumirim is a Brazilian municipality in the state of Ceará, located in the Lavras da Mangabeira microregion, mesoregion of the Center-South Cearense⁹. with an estimated population in 2017 of 12. 349 thousand people¹⁰.

Study Population / Sample

The study population consisted of users registered at the Basic Health Unit Headquarters I, who use controlled drugs, proven through medical records and routine consultations, regardless of gender and age, totaling until the completion of this intervention plan a sample of 36 users.

Inclusion and Exclusion Criteria

The following were considered as eligibility criteria: make use of benzodiazepines whether prescribed by psychiatrists, general practitioners and even improper use.

Excluded were users who even registered at the UBS do not use benzodiazepines.

Procedures and Data Collection

Participants were captured through the identification of benzodiazepine users registered at the unit. This identification was performed through medical records, interviews in routine consultations, data from the SIAB (Primary Care Information System) and help from community health agents (CHA), which have a greater attendance in the daily lives of users.

After the identification of those who use BZD, a thorough analysis was performed through interviews in routine consultations, which make improper use of the medication, listing the reasons that led to it. To then occur preventive and reeducative actions.

Considering that the municipality does not have a Psychosocial Care Center, training was carried out to train the staff to effectively receive this public. To this end, monthly meetings were held to discuss how to be the best service to this audience, with a more welcoming result.

For the educational intervention there were lectures about benzodiazepines given by the multidisciplinary team to users, conversation wheels, video exhibition, as well as the implementation of a handbook as a way to control revenue renewals, since UBS has no system Horus, which is a control program used by some health departments, allows the user to obtain from the basic pharmacy only the prescribed amount of medicine. This artesanal

booklet could be deployed in other units, aiming at an exchange of control of renovations. We also highlight the effective support of NASF pharmacist Argebio Kerfeson Duarte Silva, for the implementation of educational actions, control and monitoring.

It was necessary to use computers, Datashow, papers, pens, cardboards, figures, brushes, printer, among others.

RESULTS

With the high prevalence of abuse of controlled medication and the little information shown by users in consultations about the use, it was necessary to train staff and educational interventions, so that health services and systems were more integrated, reflecting in a considerable improvement in user assistance, aiming at reducing, sensitizing, adapting and controlling the use of benzodiazepines. From better reception to longitudinal care. It was also possible to verify with the services developed with the enrolled population: from information to the population about the risks of the inappropriate use of medicines, illness, changes in the actions that involve primary care to alternative treatments for these mental disorders such as physical activity, food reeducation and psychotherapy.

FINAL CONSIDERATIONS

Despite the difficulties encountered in the intervention path of this project, especially regarding the collection of users who use controlled drugs, due to the lack of a specialized service such as the psychosocial care centers and the Horus system, the present project was of great importance, as it has vehemently allowed the development of a new health promotion strategy, stimulating actions such as the booklet, which stipulates an organizational base of users who use controlled medicines and thus enable the actions for its control.

The first it was possible to notice in the users, when informed about the possible interventions, that they felt more comfortable asking questions about the medication and reporting about the

indiscriminate use, proving themselves avid to the information and changes, being able to be presented to them at that moment. rationality in the use of medication and alternative treatments.

References

1. TELLES FILHO, P. C. P. et al. Utilização de benzodiazepínicos por idosos de uma estratégia de saúde da família: implicações para enfermagem. Escola Anna Nery. Rio de Janeiro, v. 15, n. 3, p. 581-586, jul./set. 2011. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S141481452011000300020&lng=pt&nrm=iso. Acesso em: 01 jul 2018.
2. CENTRO BRASILEIRO DE INFORMAÇÕES SOBRE DROGAS PSICOTRÓPICAS (CEBRID). II levantamento domiciliar sobre o uso de drogas psicotrópicas no Brasil: estudo envolvendo as 108 maiores cidades do país. 2005.
3. HUF, G.; LOPES, C. S.; ROZENFELD, S., 2000. O uso prolongado de benzodiazepínicos em mulheres de um centro de convivência para idosos. Cadernos de Saúde Pública, 16:351-362. Acesso em; 04/06/2018.
4. FIRMINO, K. F. et al. Fatores associados ao uso de benzodiazepínicos no serviço municipal de saúde da cidade de Coronel Fabriciano, Minas Gerais, Brasil. Cadernos de Saúde Pública. 2011.
5. CASTRO, G.L.G. et al. Uso de Benzodiazepínicos como automedicação: consequências do uso abusivo, dependência, farmacovigilância e farmacoepidemiologia. R. Interd. v.6, n.1, p.112-123, mar. 2013.
6. BRASIL. MINISTÉRIO DA SAÚDE. Sistema de Informação da Atenção Básica. Promoção da saúde e qualidade de vida. Ciência e saúde coletiva. 2000. Disponível em: < <https://www.scielosp.org/article/csc/2000.v5n1/163-177/>> Acesso em:03/07/2018
7. ASSAD, F. M. Análise do uso de medicamentos controlados pelos usuários dos grupos de saúde mental atendidos pelo SUS no município de Nova Candelária, RS. Porto Alegre, 2012. Disponível em: <https://www.lume.ufrgs.br/handle/10183/67715>
8. BARROS, J.A.C. Políticas farmacêuticas: A serviço dos interesses da saúde? Brasília: UNESCO/ANVISA; 2004.
9. PREFEITURA MUNICIPAL DE IPAUMIRIM. Cidade. Disponível em: ipaumirim.com. Aceso em: 04/01/2018.

