

Scientific Moment of the III North 1 Regional Assembly of IFMSA Brazil



PRESENTATION

The International Federation of Medical Students' Associations (IFMSA) was founded in 1951 as an organization of medical students, for medical students and by medical students. For more than 60 years, the Federation has not only been a dynamic platform of opportunities for the future physicians but has also served as their voice at the international level.

IFMSA is the world's oldest and largest independent organization representing associations of medical students internationally. It currently maintains 136 National Member Organizations from more than 127 countries with over one million students represented worldwide. IFMSA is recognized as a non-governmental organization within the United Nations system and the World Health Organization, and also works with the World Medical Association.

IFMSA Brazil was founded in 1991. Today, it exists in 136 Medical Schools in all States of our country and has over 5000 affiliated members. We are committed to austere and supra party representativeness of our members and provide space for discussion of demands on local, regional and national levels. We also dialogue with other entities in order to defend our understandings and act propositionally in the resolution of issues.

Our structure comprehends the axes of professional exchanges, both national and international, in research or clinical/surgical skills, and activities in Medical Education, Public Health, Sexual and Reproductive Health including HIV/AIDS and Human Rights and Peace.

We believe in the model of academic extension that aims at popular empowerment. Therefore, we propose applied knowledge and protagonism as tools of personal, local and global transformation, establishing empathy and reinforcing values that transpose the naturalization of mechanized habits of the medical profession, forming doctors who are prepared to understand diversity and adversity.

Capacitation in skills such as leadership, productivity, communication, teamwork, among others, is the base for the formation of our Local Officers, who are capable of making a difference. The formation system is continuous, from regional to global encounters, widening progressively and sustainably the possibilities of action of the trainer.

The experience of new health perspectives, cultural and linguistic learning, networking, ripening, independence and curriculum opportunities compose a unique transforming potential in the construction of doctors who are able of making a difference.

In every step or circumstance of the medical formation, IFMSA Brazil is inserted, offering opportunities and support to the developing of individual (and collective) student potentialities.

CHARACTERIZATION OF AIDS IN BRAZIL

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Thematic Axis: Standing Committee on Sexual and Reproductive Health including
HIV/AIDS - SCORA

Introduction: The human immunodeficiency virus (HIV) is a retrovirus that infects CD4+ T lymphocytes through its interaction with glycoproteins in the cell membrane. This microorganism pertains the Lentiviridae genus and was originated in Sub-Saharan Africa. The virus predominant transmission model is through sexual intercourse (which is responsible for 75% of infections), and, to a lesser degree, through vertical and parenteral transference¹. When this retrovirus penetrates the human organism, it triggers a dysfunction in the immune system, causing a decrease in lymphocytes, raising the host's susceptibility to infectious diseases and generating the Acquired Immunodeficiency Syndrome (AIDS).

Objective: To analyze the epidemiology of AIDS cases in Brazil over the period of January 2012 to June 2017.

Methods: This is an exploratory and descriptive study with quantitative research method. The data collection was performed through the Information System for Notifiable Diseases (SINAN) and the Hospital Information System of the National Unified Health System (SIH-SUS). The results were arranged using Microsoft Excel spreadsheets and exposed in charts and tables.

Results And Discussion: Between January 2012 and June 2017, 218.869 AIDS cases were identified in Brazil. The highest rate of reported cases was found in 2012, with 41.530 (18,97%) occurrences. The Southeast region had the major incidence of HIV, with 87.458

(39,96%) instances, followed by Northeast region, with 47.623 (20,78%) cases. Midwest region had the smallest number of diagnosed cases, with 15.427 (7,05%) incidents. During the study period, the cases notified were mainly found among males, being the most vulnerable group, with 145.236 (66,36%) episodes. Regarding the age group, higher prevalence was found between 30 and 39 years, with 68.717 (31,4%) cases, followed by those aged 20 to 29 years, with 52.694 (24,08%) instances. The highest number of AIDS cases was among those who had completed high school, totalizing 25.897 (23,67%) of the 109.423 notified cases. Hospital admissions over the study period indicated that 190.311 internations were notified, with mortality rate at 12,22 %, representing 23.258 deaths

Conclusion: It was observed that, among the patients with HIV, there was a predominance in males. The Southeast region stood out in number of affected cases and, compared to other age groups, adults aged between 30 and 39 years have the highest prevalence of HIV infection. From this perspective, it is perceived that HIV contagion constitutes a serious public health problem at nationwide level and that the early infection is becoming increasingly common, pointing the necessity of preventive campaigns that are more focused and consistent with national reality.

Acknowledgments: To God for the gift of life; to my dear family and friends.

Keywords: Acquired Immunodeficiency Syndrome, Brazil, Epidemiology, Public Health, Sexually Transmitted Diseases.

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EXPERIENCE REPORT IN PEDIATRIC ICU

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Thematic Axis: Exchange programs

Introduction: The highest incidence of infant morbidity and mortality occurs in children under 1 year. Being a factor that increases morbidity and mortality during this period is prematurity, so that the individual has a good neuropsychomotor development and reduces possible infections is essential to use equipment such as ventilation mechanic and incubator. In this context, the neonatal ICUs are inserted.

Objectives: Report the experiences and knowledge gained during the Exchange in Curitiba, Paraná.

Methods: it is an experience report with a critical-reflexive approach and descriptive-comprehensive design.

Results And Discussion: During the month of February, I followed the routine of the pediatric ICU of Santa Cruz Hospital in Curitiba, Paraná. The hospital has a program that aims to minimize hospital infections, for this purpose, and counts the use of alcohol in gel. The ICU has a multidisciplinary team of doctors (pediatricians, neonatologists, intensivists and nutrologists), nurses, nursing technicians, nursing assistants, physiotherapists, speech therapists, psychologists and pharmacists. Through it, it holds weekly meetings with the parents of children hospitalized and discuss cases to adopt more correct measures. In addition to the follow-up of hospitalized children, the staff attends the children who have just been born in hospital rooms and in the delivery room, performing the first consultation of the newborn, compensating the apgar and some malformation. During this month, there were a few interesting cases: Down Syndrome, Staphylococcal scalded skin syndrome, fetal hydrops, sepsis, toxic shock syndrome by B-cell Streptococcus. Cardiopulmonary resuscitation was also performed. Down Syndrome is a result of o trisomy of the whole or part of chromosome 21 in all or some cells of the body and the subsequent increase in expression due to gene dosage of the trisomic genes. characteristic facial appearance,

varying degrees of intellectual ability, low muscle tone in infancy, and an increased risk for many medical problems including infections, pulmonary, thyroid, skin, skeletal, hearing and vision issues, seizures, diabetes, sleep apnea, early menopause, and congenital heart defects [1;2] Staphylococcal scalded skin syndrome is caused by exotoxin. It usually presents 48 hours after birth. Initially presents with irritability, fever, and malaise. Within 24 to 48 hours, a very tender rash develops. The rash typically starts on the face and flexures (groin, axillae, neck) with erythema and fissures. Soon after this, large thin blisters form. The treatment is with Oxacilin or Vancomicina. Those patients who are recognized early and treated appropriately overall have a very good prognosis.

Conclusion: The routine of the neonatal ICU is very rich in diseases and knowledge that complement the learning in medicine.

Acknowledgments: I would like to thank all the Hospital staff who welcomed me with open arms and enabled me to learn from care techniques and screening tests for the newborn to more complex approaches to the service.

Keywords: Intensive Care Units, Pediatric; Infant, Premature; Intensivism; Genetics, Medical; Infectious Disease Medicine; Pediatric Assistants

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SEXUAL VIOLENCE: DESCRIPTIVE STUDY OF CASES FROM THE YEAR OF 2013 TO 2018 IN MINORS OF 20 YEARS IN THE MUNICIPALITY OF PORTO VELHO-RO

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Thematic Axis: Standing Committee on Sexual and Reproductive Health including
HIV/AIDS - SCORA

Introduction: Sexual violence is a social disorder of transgression of human privileges, and an imbroglio of public health, breach of coercion and hostility, from sexual oppression to physical outrage. Defloration by the spouse is hardly denounced by a phobia of reprisal and financial submission. These experiences have a long-lasting effect on the mental, sexual, general health and well-being of women. The humanization of care, the principles of dignity, non-discrimination, secrecy and privacy are increasingly sought, avoiding the exposure and wear of the victims, performing physical and gynecological examinations, other complementary ones such as serological tests and collection of traces in identification of the aggressor, as well as pharmaceutical assistance and multiprofessional support.

Objectives: To analyze libidinous acts, to characterize possible aggressors and victims and their consequences according to age over the years.

Methods: It was carried out in a qualitative, quantitative and descriptive manner, with a survey of the scientific reports and productions published in the period from 2013 to 2018, located in PubMed, Scielo, SINAN, DVEA, SEMUSA and IML.

Results And Discussion: In this study, it was demonstrated that the number of sexual violence in general increased gradually over the years, and specifically in the age group of 10 to 19 years, there was growth until the year 2015, with a small decrease for the year of 2016, being this age range that more occurred notifications. At ages 9 and up, most abuses occur to close friends, such as close family members. As the woman grows, the circle of contacts and friends increases, giving greater variability to the type of aggressor who will violate it. According to the IML data, a large number of libidinal practices were observed,

but almost no evidence of sex, due to the difficulty in obtaining evidence, since it involves more than finding seminal fluid in the genital region. The role of the gynecologist is extremely important, such as: welcoming the patient, listening to her, if she wants to talk, gynecological examination, collecting vaginal secretions for bacteriological examination, taking the vaccines, requesting serologies, requesting β HCG, prophylaxis for STDs (especially AIDS and hepatitis B), give the morning-after pill, among others. It is the gynecologist's duty to learn to recognize violence, to treat its consequences, and to assure the patient that violent acts against her are unacceptable.

Conclusion: From the articles evaluated and data collected from public health agencies, it was possible to construct a reasoning about the damages caused to victims of sexual violence and quantitatively observe the growing number of reported cases. The public policies imposed to try to reverse this situation are not having real effects on the population. So, it is hoped that this study will contribute to the awareness of all about the need to address the issue with a political commitment to promote women's health, giving greater visibility to the problem, having a planning that in fact modifies the evidenced reality.

Acknowledgments: I thank Dr. Rita de Cassia for the encouragement of this study and guidance at each stage. To the director of the Legal Medical Institute, Dr. Queiroga, for providing the legal elements of the present study. To Dr. Lúcia Nogueira Cabral, for serving as mediator for the collection of IML data. And finally, Dr. Itaci, for providing subsidies from the three health departments of Porto Velho.

Keywords: Libidinous practices. Carnal Conjugation. Rape.

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EXPERIENCE REPORT: MENTAL HEALTH CAMPAIGN FOR HIGH SCHOOL STUDENTS IN RORAIMA

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Thematic Axis: Standing Committee on Public Health - SCOPH

Introduction: The beginning of adult life, especially in Brazil, involves a troubled transition regarding the psychological and physical scope of each individual. The young person is exposed to a series of new responsibilities, which include the professional choice, approval in competitions and/or vestibular, domestic requirements and compliance with social standards. This situation results in a high prevalence of anxiety disorders and depression at an early age. Roraima, for instance, has a high place in the national rankings when it comes to suicide. Therefore, a campaign was carried out at a public reference school in the region (Instituto Federal de Roraima).

Objective: To intervene in the scenario of anxiety and depression that permeates students of the final years of high school in order to minimize this problem.

Methods: The action took place on November 22, 2017, in a format of conversation between volunteers from IFMSA Brazil UFRR and students from the institution. A total of 100 students participated in the action, divided into groups with 16 volunteers and 5 campaign coordinators. The experience we provided on the day of action was relevant to the participants' healthy transition to adult life. Using the Google Forms application, feedback questionnaires were developed. They provided important data on the impact achieved. 76.9% of the students who answered the questionnaire said they felt pressured in relation to the vestibular tests, and 92.3% stated that they think that talking about it alleviates tension in some way, that they liked to talk about it with the volunteers of the campaign and that they felt better to take the entrance exam after the conversation. One of the anonymous comments received was: "[The campaign] helped a lot to take away the worry and tension we felt before the college entrance exam, because sometimes we think that if we do not get

approved, our academic life will be a disaster, and it is not like that"; 84.6% would recommend that other high school finalists had this same type of conversation.

Discussion And Results: In Brazil, the problem of the incidence of mental disorders in young people is potentialized by the most widespread model of entry in higher education - Vestibular tests. They reflect a social situation of unnecessary competitiveness and serve as propagators of a cycle in which one generation exposes the next one to a hostile environment masked by the idea of meritocracy. This generates fear, discomfort and often the desistence of said dreams, or the attempt to seek dreams that are not really the individual's ones, but which are more socially accepted. It was this picture that the campaign fought.

Conclusion: It is concluded that the action approximated students in the final stage of school life with people who have already experienced similar situations. This way, contributing to reduce the problems arising from the numerous social requirements experienced by this age group was an important addition to the activities of IFMSA Brazil UFRR and a remarkable opportunity for both the volunteers and the target audience of the campaign, which should continue and be expanded.

Acknowledgments: We thank the Instituto Federal de Roraima students who participated in the campaign, some of them who are now students at UFRR's Medicine School.

Keywords: Academic Admission Test; Anxiety; Depression; Prevention of diseases.

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EPIDEMIOLOGY OF SCHIZOPHRENIA AND OTHER MENTAL, BEHAVIOR AND AFFECTION DISORDERS IN RORAIMA, BRAZIL

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Thematic Axis: Standing Committee on Public Health - SCOPH

Introduction: Schizophrenia is one of the most severe mental disorders and still demands profound studies. There are other important mental disorders with epidemiological significance, including mood or affective disorders and disorders associated to abuse of alcohol and psychoactive substances. In Roraima, these disorders are an important public health issue.

Objectives: The study's objective is to characterize the epidemiology of schizophrenia and other significant mental, behavior and affection disorders in Roraima, Brazil.

Methods: The study was a literature review about the theme composed by articles from the databases SCIELO and PUBMED, and an epidemiological research of the cases in Roraima from January 2014 through February 2018 from the Brazilian's health ministry online database named "Departamento de Informática do Sistema Único de Saúde (DATASUS)".

Results and Discussion: From January 2014 through February 2018, 1.030 cases of schizophrenia, affective disorders and disorders related to alcohol or psychoactive substances abuse occurred in Roraima. The highest prevalence is schizophrenia, with 463 cases, and the lower prevalence is mental and behavioral disorders related to alcohol abuse with 79 cases. About 62.52% of the patients are male and 37.47% are female. When analyzed by the patients' races, statistics showed that 76.39% of the men are brown-skinned, 1.86% are white-skinned and the lowest prevalence are black-skinned and indigenous, both with 1.08%. About 19.56% of men do not have a defined skin color/race in the system. Among the women, the majority of patients were also brown-skinned with 69.68%, followed by indigenous (3.88%), white-skinned (3.36%) and black-skinned (0.51%). There was a lower prevalence among the yellow-skinned with 0.25% and 22.27% of the women did not have their color skin/race defined in the system. About 2.1% of the total number of cases analyzed

in this study are indigenous patients, an important segment of Roraima's population. When analyzed by the patients' age, the higher prevalence of schizophrenia and other mental, behavior and affection disorders is the age between 20 and 39 years old (48.15%), followed by the age between 40 and 59 years old (18.44%), between 10 and 19 years (16,40%) and between 1 and 9 years old (13,49%). Finally, the lower prevalence is the age between 60 and 79 years old (2,81%).

Conclusion: Based on the statistics, new public health policies are necessary for better diagnoses, control and treatment of these mental disorders. In addition, it stands out the importance of public health databases with epidemiological information as useful resources to guide future policies and studies.

Acknowledgments: We would like to express our gratitude to the Medicine Course of Federal University of Roraima for supporting this study.

Keywords: Epidemiology, Schizophrenia, Mental Disorders.

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DISCUSSION OF MENTAL HEALTH ISSUES AMONG MEDICAL STUDENTS AND DOCTORS

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Thematic Axis: Standing Committee on Medical Education - SCOME

Introduction: Studying Medicine, for many people, is a synonym of abdicating the whole previous life and dedicating, exclusively, to a sort of priesthood. It is a synonym of not having right to complain, to feel overwhelmed nor to miss other activities. After all, according to the society, the student chose this life.

Objective: This study aims to discuss the mental health of medical students around the world.

Methods: A literature review was performed aiming to obtain data to support the discussion.

Results And Discussion: The heaviest workload among Medical Schools rests in Brazil: minimum of 7200 hours. The emotional and content loads compete between themselves to check which one is the most intense. These students behold the greater anxiety, depression and suicide rates amongst all graduating students. A paper analysed around 130 thousand medical students, from 43 countries. Of these, around 11% appeared to have suicidal ideation. The estimated prevalence of depressive symptoms was 27.2%. These rates are five times higher than the ones from the general population. Only 15% of all students looked for professional help. That means around 110 thousand medical students, right now, are whether depressed or thinking about suicide. Medical School also stands on the podium, once again in the first place, for intellectual doping: the use of brain stimulators to enhance wake and concentration. The reasons for this sad position are many, such as insufficiency sensation and pressure from professors, society, family and themselves. Workload, emotional load and content load are also decisive. In addition to that, the knowledge about pharmacology and the constant presence inside health institutions – which, in general, have drugs in their stocks. In the United Kingdom, where drug consuming is monitored thoroughly, 45% of medical students abuse alcohol and use cannabinoids routinely. Between 1990 and 2012, the rate of

medical students using Methylphenidate reached 16%. In Brazil, the scenario is similar. In the Federal University of Paraíba, from September to October of 2007, 57% of medical students used psychoactive substances. In 2017, in the city of Ponta Grossa, Paraná, around 10% of health students, from private schools, used some sort of brain stimulator. In the same year, in Federal University of Rio Grande, the prevalence of stimulators' using at least once in the life was 57.5% and 16.6% of the students consumed more than one substance. Another utopia for medical students is physical activity: from first to last academic year, there is a reduction of 75% in moderate and 80% in intense physical effort. Around 25% of sedentary students are overweight or obese. Information about the life expectancy of doctors are controversial – India's Medical Academy say their doctors live ten years less than the general population. Frank affirms that the physician's life expectancy is the same as any other American citizen. However, it is known that suicide rates, for instance, overcome five times the rates for the same reason of death for other people.

Conclusion: The abdication of previous life in the name of a typical medical student's life is certainly a factor associated with mental health disintegration. The professors' emotional rigidity, possibly, contributes to the students' emotional rigidity, which, suppressing their feelings, lose even more their psychological welfare. Health, in its full concept, is a relevant and concerning theme. It is worthy of multidisciplinary assessment, for it depends on several factors. Analysing the teaching system is urgent and ending negligence against mental sanity is as well. Intellectual doping, sedentary life habits and the alarming rates of suicide are, possibly, secondary to a medical education system that neglects the quality of life of the professionals it is launching in the market. It is concerned much more in preparing a sufficient number of professionals. In the background, lies quality. It is not viable to reach the ideal rates desired by the precursor studies of the Mais Médicos Law, looking to ameliorate in health system, when most of the leading figures of this system are profoundly ill.

Keywords: medical education, quality of life, mental health

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THE IMPORTANCE OF IFMSA BRAZIL UFRR FOR MEDICAL EDUCATION IN AN EDUCATIONAL INSTITUTION IN THE EXTREME NORTH OF THE COUNTRY

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Thematic Axis: Standing Committee on Medical Education - SCOME

Introduction: IFMSA Brazil is an entity that acts in 136 medical schools in all the states of the country, where it promotes discussions and activities in medical education, sexual and reproductive health, human rights, public health, national and international exchange programs and exercises of student representativeness. The local committee IFMSA Brazil UFRR has been working at the Federal University of Roraima since 2008, having been important since then for the health construction, involving students, doctors and the population.

Objective: Report the activities accomplished by IFMSA BRAZIL UFRR during the period from January 2017 to July 2018.

Methods: IFMSA Brazil UFRR's documents were gathered and analyzed under a critical perspective.

Results And Discussion: The organization is composed by over 50 students, who are stimulated to improve their communication skills, problem solving and scientific production. The communication is made via social media, through which discussions are stimulated and meetings are set. Bi-weekly meetings were held for the implementation of social intervention strategies and themes related to humanistic medical training of quality, as well as a presentation of the committee at the beginning of each school year. In addition, there were 14 activities addressing different topics such as the mental health of the medical student and the neglected populations. These interventions occurred as well in the university as in vulnerable places. Also were promoted 7 international exchanges and 20 nacional ones.

Therefore, IFMSA BRAZIL UFRR contributed to bringing students closer to their local reality, stimulating them to modify it positively. In addition, all academics were encouraged to exercise their representativeness and improve their communication skills, essential for a future successful professional performance.

Conclusion: The importance of the local committee IFMSA BRAZIL UFRR is notable in the formation of medical students, because it contributes to the training of professionals who will seek to make a difference in their reality.

Keywords: Medical education; Public health.

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THE NATIONAL PROGRAM OF TUBERCULOSIS CONTROL AS A PARTNER OF PRIMARY HEALTH CARE IN COMBATING PULMONARY TUBERCULOSIS

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Thematic Axis: Free category

Introduction: Primary Health Care (PHC) is the gateway for respiratory symptomatics (RS) for tuberculosis (TB) in Brazil, RS being the individual with a cough for at least three weeks. Until the current moment, Brazil is the 20th in the list of 30 priority countries for TB control, following the targets for the World Health Organization (WHO) quinquennium 2016-2020. There is an evident need to combat the disease: there is an incidence rate of 33.5 / 105 inhabitants (2017), new cases, and an average treatment abandonment of 10.55% (2001-2016, MS). Thus, the National Tuberculosis Control Program (PNCT, in portuguese), instituted in 2004, aims to decentralize and horizontalize the actions of TB surveillance, prevention and control and bases its actions upon parameters of the prevalence of SR symptomatic in the population. The PNCT is a great ally in the fight against TB in Brazil.

Objective: To analyze the importance of PNCT implementation in the management and treatment of tuberculosis in Primary Health Care in Brazil.

Results And Discussion: The PNCT, between 2004 and 2007, received 120 million reais from the Federal Government. The program promoted 313 refresher courses, reaching approximately 58 thousand SUS health care professionals, and hired 30 consultants to strategically plan their actions. The access door most used by users of the Unified Health System (SUS) for the diagnosis of TB is Basic Care. In Vitória, Espírito Santo, 63% of the TB cases diagnosed were found in the Family Health Units (FHU) and another 10% in the UBS, totalizing over 70% of all TB diagnosis. These data, when added to the results of the implementation of PNCT, which brought decentralization in the process of active search and reception, diagnosis and treatment of the patient/SUS user with signs and symptoms related to tuberculosis, reinforce the importance of Primary Care in the process of attempting to cure

this individual. After decentralization via PNCT in Dourados, Mato Grosso do Sul, the number of RS examined increased by 81.58% between 2003 and 2006. In the same city, the proportion of cases of smear-positive pulmonary TB increased from 38.4% to 71.6%, and the percentage of TB cases detected among the total estimated cases increased from 47.6% to 61.2%, both in the same period. The percentage of health services that implemented the Supervised Treatment Strategy (TS-DOTS) went from 7% in 2000 to 81% in 2006. Between 2001 and 2017, the incidence rate of new TB cases dropped from 42.8 to 33.5/100 thousand inhabitants. Between 2001 and 2016, the mortality coefficient of the disease fell from 3.1 to 2.1/100 thousand inhabitants. In addition, Brazil has established partnerships for the control of the disease, such as a cooperation plan with the BRICS.

Conclusion: The National Program for Tuberculosis Control has brought significant progress, among which we highlight the greater control of data, improvement of cure indicators, reduction of incidence and increase of adherence to treatment. However, the disease continues to be an important public health problem and social marker, which reiterates the need to strengthen existing strategies and create new ones, seeking to promote improvements in the health and quality of life of the population.

Keywords: tuberculosis, primary healthcare

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VOLUNTEERING: A PROJECT OF EXTENSION FOR VENEZUELAN IMMIGRANTS IN THE SITUATION OF SOCIAL VULNERABILITY IN THE CITY OF BOA VISTA - RR

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Thematic Axis: Standing Committee on Human Rights and Peace - SCORP

Introduction: Around 2015, the Brazilian city, Pacaraima - RR, for establishing a border with Santa Elena do Uairén, in Venezuela, has been increasingly a way for Venezuelans to enter Brazilian lands due to the political, economic and social crisis which affects the Bolivarian country (1). Then, thousands of these citizens migrate to Brazil, alone or with their families, bringing in the bag the hope of better living conditions (2). However, Roraima still does not have a sufficient and adequate structure to shelter in a dignified manner a high migratory contingent. Thus, many Venezuelan families are at the mercy of the streets, looking for work, marketing or asking for money at traffic lights. For lack of better conditions, they make squares their home, in movement and daily struggle for survival (3,4). In this sense, when perceiving inequalities, the situation of social vulnerability imposed on families, children, pregnant women and the elderly, in addition to the growing xenophobic movement, due to the lack of structure and low quality of services offered to the population, such as health, education and public safety, has arisen to the need to develop this extension project with the purpose of reducing social injustice through actions that promote health, education, culture and leisure for Venezuelan immigrants (5).

Objectives: Promote the development of social responsibility; interpersonal skills through volunteer work; working with other organizations in the development of social, educational, scientific, cultural and leisure projects; cooperate with the community; and provide health care to Venezuelan immigrants.

Methods: The project carries out a survey of the needs presented, afterwards, evaluation of the situation, planning of the possibilities of social intervention and, finally, mobilization of people and institutions to carry out the actions. Therefore, the interventions focus on

dimensions such as: health promotion, socio-educational/ludic-pedagogical strategies, access to work and provide better conditions that ensure the preservation of life in its potentiality and fullness.

Results and Discussion: By 2017 it is estimated that 40,000 Venezuelans fled the country's grave political, economic and social situation to seek support and refuge in Brazil. However, it is recurrent to encounter immigrants at the traffic lights of Boa Vista-RR, living on the streets and living in makeshift shelters and without minimal conditions of survival(6). In this sense, it is perceived that Venezuelans are not being accepted effectively and/or adequately, so this fact results in a serious situation of misery, hunger and disease. Thus, in view of the demands presented, it was noticed the need to carry out interventions that would reduce social and health problems that affect Venezuelan immigrants in situations of social vulnerability. In addition, through voluntary actions, the participating academic body is receiving a differentiated training in terms of becoming a "professional citizen", composed of social responsibility that contributes to the development of a just and solidary society.

Conclusion: It is estimated that through this extension project, the experience lived by university students provides critical reflections about the situation of social vulnerability, as well as to train citizens and solidarity professionals, as well as to contribute to the formation of students who are more aware of the reality surrounding them and better able to intervene in this. Thus, through the voluntary interventions of the project, it is expected that it can help reduce social, health and psychological problems. Because, by tightening the link with citizens in a situation of social vulnerability, academics are understanding this reality, understanding the social, cultural and political issues that the Venezuelan migrant passes through in Brazil. Therefore, the approximation of academics, with the situation reported, provides support, autonomy and better living conditions of immigrants. In addition, the project, far from having a charitable character, proposes a personal and professional enrichment that allows, among other things, to construct reflections on the losses that immigrants spend – which encompass their homes, belongings, families, language - enabling, as far as possible, the construction and empowerment of their personal strengthening (7,8).

Keywords: Venezuela; Immigration; Social vulnerability.

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CRITICAL ANALYSIS OF NATIONAL EXCHANGES DURING MEDICAL GRADUATION: EXPERIENCE REPORT

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Thematic Axis: Capacity Building/ National Exchange

Introduction: The globalized world provided new social, economic and intellectual conjunctures, promoting the “breaking” of borders, national and international, interconnecting people and cultures. The insertion of medical scholars in different social and educational contexts, through exchanges or academic mobility, reflects positively in the medical education promoted by each college. The possibility of experiencing health and education realities (public and private) in all regions of Brazil connects students, not only to share knowledge, but to create a networking and mutual help to solve problems common to most Brazilian medical schools. University exchange is a way to broaden students’ vision, share experiences and realities. In medical education is no different, the cultural and academic exchange is a good way to get out of the routine conviviality and to increase the view on the possibilities that the profession can offer in other localities of the country. At this point, the new learning experience can generate positive expectations for students who are perhaps fatigued from their routine. In this context, the International Federation of Medical students Associations (IFMSA) presents itself as facilitator of this networking among the affiliated colleges, promoting academic exchanges during all the months of the year.

Objectives: The objective of this article is to analyze critically, through an experience account, the influence of national academic exchanges between medical faculties carried out by IFMSA in Brazil.

Methods: This is an experience report, from a medical student, provided by IFMSA and held in Faculdade de Ciências da Saúde de Barretos Dr. Paulo Prata (FACISB), at Barretos, São Paulo, Brazil, in february 2018. This article analyzes the importance and contribution of exchange programs during medical graduation.

Results and Discussion: Nationally interconnected medical education makes it possible to experience health teaching realities, public and private áreas, in all regions of the country through clinical stages. Academic experiences outside the daily environment provide, to the exchange student, not only gain of technical content as personal maturation, besides the possibility of self-critical analysis, in relation to the level of content absorbed during the years of course, in compared to the students of the university of destination. The Federal University of Roraima (UFRR), although far from the major medical centers of Brazil, does not sin in quality and engagement, professional and student, for the improvement of the health quality of its region of action, however the difference of physical structure for the practices of medical skills makes much more stressful the teaching-learning process in institutions with the same problematic.

Conclusion: University exchanges certainly represent an important tool for diversification of clinical experience during medical graduation. By exposing the students to a different scenario than usual, they stimulate the professional and personal maturation of the exchangers, since they are encouraged to rethink their practices and their theoretical knowledge, as they leave their comfort zone. Such reflections are set up as a breakthrough for the medical education of Brazil, since they can foster the technical and humanistic improvement of the graduates.

Acknowledgments: To my parents, who supported me and made possible all my achievements to this day. To my companion for always helping me, supporting and encouraging, besides believing in me, even when neither I believe.

Keywords: Clinical Clerkship, Medical Education, Exchange.

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THE INFLUENCE OF ART THERAPY IN THE HOSPITAL CONTEXT AS A THERAPEUTIC AND HUMANISTIC DEVICE THROUGH THE SENSIBILIZARTE-UFRR PROJECT

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Thematic Axis: Standing Committee on Public Health - SCOPH

Introduction: The present work intends to report the application of art therapy, in the hospital context, through the project Sensibilizarte at the Federal University of Roraima (UFRR), which completes 5 years of activities in 2018. The Brazilian Association of Art Therapy defines it as "a way of working using artistic language as the basis of client-professional communication. It's essence would be aesthetic creation and artistic elaboration in favor of health" ¹. In addition, "it seeks to accept the various aspects of patients, such as affective, cultural, cognitive, motor, social, among others, so important in mental health." From this perspective, the project uses artistic and recreational modalities such as art therapy, which in addition to contributing to the formation of future professionals with more humanitarian aspects in the treatment of people, uses the artistic resources as an instrument for sensitization in order to slow down the routine hospital in the construction of a less stressful environment beyond the self-knowledge, opportunity of expressivity and personal development to provide a better recovery to the patients.

Objectives: To analyze the applicability of art therapy in the hospital context as a therapeutic device that facilitates symbolic spaces of reception, elaboration, expression and humanization.

Methods: Through the report of the experiences in front of the performance of the Sensibilizarte-UFRR, art therapy was investigated in the hospital context. In addition, the importance and benefits of this therapeutic device. It is perceived as a facilitating instrument in the humanization process, in which it is part of the project purpose. A bibliographic review

was carried out, through analysis of articles, books, theses and dissertations published in art therapy.

Results and Discussion: Through the experience on the front of craftsmanship was notorious the effectiveness and benefits of art therapy in patients' health. The use of art as therapeutics is presented as a fundamental device that comes to collaborate in mitigating the negative effects of diseases. "The promotion of the well-being of the person with psychic suffering is central, since the art therapy promotes changes in the affective, interpersonal and relational fields, improving the emotional balance". Art therapy is still seen as "soothing or reassuring, being a preventive measure to the psychic blunting, also acting as a facilitator of competences for the notion of acquiring daily life schemes". The hospital volunteers at the front demonstrated changes after the entries, becoming more sensitive to the reality of patients, their companions and other hospital professionals while incorporating the feeling of empathy. Throughout the activities, discussed the need to see the patients visited not only as a disease carrier but as a human being with particular desires and a life history outside health institutions, in which they impose various deprivations. Difficulties were also encountered during performances, such as the language barrier, due to the high number of venezuelan immigrants and the presence of indigenous patients. During the activities, the hospital volunteers attempted to improve the patient's hospitalization period or living in the hospital environment, respecting their context and understanding their individual needs.

Conclusion: When evaluating the aspects involved in the art therapy, experiences and results obtained, from the activities carried out in a participative and observational way in the project, we can see the importance of the work of this work front when using this device as a humanization and therapeutic resource. In addition, it was possible to verify the benefits in the current literature in art therapy with results of significant improvement of the patient in the physical and emotional scopes.

Acknowledgments: Sensibilizarte UFRR, as well as its managers and hospital volunteers, for the effort and dedication with philanthropic work.

Keywords: Artistic, handicraft, humanization, mental health, hospital volunteer.

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EXPERIENCE REPORT: ACCOMPANIMENT OF INDIGENOUS HEALTH ON VISIT TO BASE-POLES IN THE STATE OF RORAIMA

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Thematic Axis: Standing Committee on Public Health - SCOPH

Introduction: Among the principles of SUS, equity seeks to recognize differences in living and health conditions, considering that the right to health passes through social differences and must attend to diversity. However, in attending to the diversity of indigenous populations, health professionals have great cultural and geographic challenges in their work. As a result, the health of the indigenous population is often in a state of precariousness, since it does not have health professionals and equipment adequate to the indigenous particularities.

Objectives: To describe health care for the Indians of the Yekuana and Yanomami ethnic groups and the difficulties in the health-disease process faced by these peoples.

Methods: This work is a pioneering report, made possible by the Academic League of Psychiatry of Roraima (LAPSI-RR) and the East Indian Roraima Sanitary District (DSEI). This is a seven-day experience of a medical student visiting two indigenous health bases: Waikas, which serves the Yekuana ethnic group, and the base-pole Palimiú, that is responsible for the attendance to the part of the Yanomami population. To visit the poles, we counted on a health team consisting of: a psychiatrist, a psychologist, a pharmacist, a nursing technician, and a helper from each of the ethnicities approached. Regarding the place of care, in both base-poles the structure of the basic health unit was used, which in addition to housing the team, is comprised of attendance room and pharmacy. Some patients of the ethnic Yekuana were consulted in the Great House (place of celebrations and meetings of the tribe). Already for bedridden patients, home visits were made.

Results and Discussion: To begin, the experiment required air transportation to reach a geographically isolated area. In the first pole, of ethnic Yekuana, the team had to wait for the Indians' permission for the attendances, that began in the Great House. In almost all consultations to the female sex, there was a gynecological complaint, and the main symptom was pelvic pain linked to discharge suggestive of candidiasis or urinary tract

infection. This is related to poor water consumption, low voluntary urination and lack of condom use. In relation to the mental health of the Yekuanas, suicide was highlighted. This practice, in all reported cases, was related to amorous disappointment, being more frequent in females and adolescents. The act usually occurred at 2:00 p.m., as that is when the parents go to farmland. In addition, it is usually related to the use of a root called timbó, which causes muscle paralysis after a few hours of use. Regarding the patients in bed, the main complaint was of joint pain. They were malnourished and extremely dependent on the help of the relatives. In the consultations at the basic health unit, it was evidenced a lack of medications and basic devices, such as, scales and sphygmomanometers. In addition, all the visits made were characterized by a lack of information, especially in the most severe cases, which the patients needed removal to the city of Boa Vista, capital of Roraima, resulting in discontinuity in the flow of information and patient screening. As for the Palimiú base-pole, it was noted that the Yanomamis had more respiratory problems compared to the Yekuanas due to the fact that the Yanomamis ignited fires in their homes for food and heating, keeping them closed. At this pole there were also complaints of the lack of medication and feedback regarding the patients removed to the capital. Finally, a large presence of gold miners in the regions was observed, although it is considered illegal in Brazil. This situation has hampered the fishing activities of the area, due to the contamination of the rivers by heavy metals.

Conclusion: It is necessary that the entities that provide health care to the indigenous, DSEI and CASAI (Indigenous Health House), better record the health information of each patient, as well as to intensify the process of communication with the basic health unit located in the communities. Also, it is necessary to provide basic equipment and medications for the base poles. Finally, this experience must be expanded, so that more academics can get to know the indigenous culture and the differential health approach of the different ethnic groups that inhabit the state of Roraima.

Acknowledgments: We thank the support provided by DSEI and LAPSI-RR, which enabled this experience, the Waikas and Palimiú base-poles health team, and the Yanomami and Yekuana peoples.

Keywords: Health of Indigenous People; Medicine, Traditional; Mental Health in Ethnic Groups; Indigenous Population.

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EXOGENOUS INTOXICATION: VICTIMS' EPIDEMIOLOGICAL PROFILE IN THE EXTREME NORTH OF BRAZIL

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Thematic Axis: Standing Committee on Public Health - SCOPH

Introduction: Nervous pathophysiological changes by toxic agents are common in emergency services. Cases of exogenous intoxication should be suspected in pesticides exposure, drug use, household products, among others with characteristic clinical or laboratory alterations. The lethality associated with exogenous poisoning is, for instance, significant in suicide attempts. According to 2010 data from the National Toxic Information System, 17% of intoxications were associated with suicide attempts, one of the 3 main causes of death among teenagers and adults, about 64% of deaths due medications and 70% related to pesticides.

Objectives: Characterize the epidemiological profile of exogenous intoxications in Roraima.

Methods: This is a retrospective, descriptive, quantitative ecological study that used the DATASUS health information system as the main data source.

Results and discussion: Data research was conducted from 2014 to 2017 with 1487 reported cases obtained, with an average of 31 cases/month. 2015 was the year with the lowest number, 276 cases, and 2016 with the highest, 481 cases. About 60% of the cases were confirmed by clinical criteria (66.9%). Only in 2016 the laboratory clinical criteria was preeminent, and from the 125 confirmed cases during 2014 to 2017, 113 belonged to 2016. Regarding gender, there was a female predominance with 52.7% and concerning ethnicity the mestizos were more affected (63, 8%), followed by indigenous (13.1%). However, of the 195 reported cases in the indigenous population, 184 were restricted to 2016. The most affected age groups were 1 to 9 years (40.9%), followed by 20 to 59 years (35%). Regarding toxic agents, despite differences according to the year, the drugs were expressive during the

4 years, except in 2015 when food stood out. Regarding intoxication circumstances, accidents and suicides were the main causes, respectively, in all years, except in 2017, when food intake exceeded the rates of self-extermination.

Conclusion: The quantitative fluctuation of notification between the years analyzed may demonstrate underreporting by those responsible. For example, there is a significant increase in indigenous cases in 2016, with assessments of underreporting being required. Thus, it was possible to identify the main variables related to the disease, providing information and subsidies for control decisions in Roraima.

Acknowledgments: We dedicate this study to the enhancement of medical epidemiological data in Roraima – Brazil

Keywords: intoxication, exogenous intoxication, suicide.

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DISTRIBUTION OF CONGENITAL MALFORMATIONS IN RORAIMA

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Thematic Axis: Free category

Introduction: Congenital malformations may be due to genetic, environmental or multifactorial factors. Congenital defects caused by genetic factors may be originated from numerical or structural chromosomal anomalies and through mutant genes. Teratogens are inserted within environmental factors, however, most of the malformations resulting from teratogenic agents can be avoided as long as there is no maternal exposure to teratogens during the gestational period.

Objective: The primary objective of this study was to investigate the main congenital malformations in children in the state of Roraima. The specific objectives were: survey of medical records between the period from 2015 to 2017; analyze the main congenital malformations presented by children attending public health services in the state of Roraima and verify the association of genetic, environmental and multifactorial factors with the congenital malformations presented.

Methods: This study was approved by the Ethics Committee on Human Research of the Federal University of Roraima (CAAE: 70051417.6.0000.5302 /Number: 2,366,062). The first stage of the study involved consulting medical records of the Hospital Materno Infantil Nossa Senhora de Nazaré (HMI) and the Centro de Referência Saúde da Mulher (CRSM) from the 2015-2018 period. Between November 2017 and June 2018, pregnant women attended at the CRSM fetal medicine service who had fetuses with developmental abnormalities, observed by ultrasonography, were selected.

Results and discussion: Among the data from the medical records and the information obtained from the application of the epidemiological record among the pregnant women of the CRSM and HMI, a total of 88 congenital malformations were observed. Among the children with malformation, 64 (72.72%) had isolated malformation, ten (11.36%) associated malformation, eight (9.09%) multiple malformations and six (6.83%) genetic

syndromes. The distribution of congenital malformations was as follows (with associated malformations and multiple malformations being inserted into more than one category of malformation): 35 neurological malformations, among them the presence of microcephaly, hydrocephalus, and others; 22 were malformations of the cardiovascular system, patients presented mainly cardiomegaly and arterial stenosis; 13 craniofacial, identified primarily cleft palate and unilateral and bilateral cleft lip. In addition, eleven patients with abdominal wall alterations, eight genitourinary, five genetic syndromes, five gastrointestinal, five musculoskeletal, two pulmonary syndromes and two presenting abdominal cyst were observed. Compared with studies conducted in other Brazilian states, the prevalence of neurological malformation has been broad across the national territory. A study carried out in the nursery of newborns in the state of São Paulo, shows that neurological malformation is prevalent, affecting 33.33% of its study population. In 2011, Pante et al. Carried out a study in Rio Grande do Sul, at the General Hospital of Caxias do Sul, where there was an increase in cesarean deliveries, lower average neonatal weight, need for admission to a neonatal intensive care unit and related early neonatal mortality with neurological malformations. In addition, the researchers observed a relationship between these malformations and the use of anticonvulsant drugs during pregnancy, especially valproic acid and other drugs that interfere with folic acid metabolism. They also reported the role of glycemic control in preconception and first trimester gestation in patients with type 1 and type 2 diabetes mellitus. Regarding the care that pregnant women must have in the first trimester, Kondo et al. (2009) bring maternal hyperthermia as a risk for the development of neurological malformation. A study carried out in Ceará, in three referral centers of tertiary level, one of them, classified as maternity and the others as general hospitals with maternity, also showed a prevalence of neurological malformations, affecting 21.1% of its analysis group. All these studies converge with the results found in the state of Roraima.

Conclusion: It can be observed that the main malformations found in children in the state of Roraima involve the central nervous, cardiovascular, gastrointestinal and genitourinary systems.

Keywords: Embryology; Congenital abnormalities; Teratology.

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LEAVING ANONIMATE

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Thematic Axis: Standing Committee on Human Rights and Peace - SCORP

Introduction: In the last decade, several different topics considered taboo began to gain visibility due to social networks. However, what is perceived, is that most of these themes do not leave this technological sphere. Noting the reality of health courses, it is evident that even basic care, domestic violence, racism, abortion, obstetric violence, LGBT health, among others, are extremely neglected. From this, the Out of Anonymity Project had as a goal to draw the attention of the community, be it academic or not, for such matters. The project had an extremely didactic format, organized in the form of a talk wheel and with the intention of presenting information and data that stimulate critical thinking, in the presence of professionals with property on the most varied subjects.

Objectives: to discuss themes: racism; how to use SUS; LGBT health / gender issues; abortion; femicide / domestic violence; gophobia; obstetric violence; and culture of rape, with the objective of clarifying the public about the issues mentioned within the area of human rights, as well as reflecting on how health care can change to better serve marginalized groups. Through the wheels of conversation, it is intended to enable the students present and the rest of the public to better direct and explain what legal procedures patients should perform in adverse cases.

Methods: The event started in March has a duration of 8 months, and accompanies the academic calendar of the School of Health Sciences / University of the State of Amazonas, where it is held. Each month there is a talk round with the presence of speakers who have ownership of the theme, as well as guests who can relate situations they themselves experienced in relation to the topics covered. Each wheel lasts for at least two hours, and at the end of each meeting, a questionnaire is delivered with 17 questions, of which 5 are discursive and 12 are objective. This instrument was built by the coordinators of the action and serves to assess the impact of the action.

Results and Discussion: During the 4 months of the project, a total of 109 people participated in the conversation. Questionnaires have been implemented since the first event. Since it is not

mandatory to complete the questionnaire, 85 questionnaires have been answered to date. The subjects that were less sought until the moment were: how to use SUS and LGBT health and gender issues. These issues have less demand when compared to the issue of racism and abortion. Therefore, it is clear that the more currently commented on a topic, the more the search for it will be effective. From the data collected, it is possible to observe the profile of the participants, being able to conclude that the diversity of the courses is immense, and among those who attend most are the nursing and law course. In addition, one data stood out important, among the least attended were the medical course. Which clearly raises the question: why was there no adherence of the project by medical scholars? The hypotheses are varied, but it risks saying that these subjects are still little approached, precisely because medical teaching is extremely biomedical and technical. This model of teaching together with social construction can distract and not teach future professionals not to receive, treat and direct each patient properly. Of all those who composed the sample, 46 knew the subject, 21 dominated the subject, 13 knew little. During the meetings, only one person reported not feeling comfortable expressing their opinion, which if well analyzed can demonstrate that the environment provides a healthy and respectful debate. You can see that 65 people said they had their level of education modified, helping them to consider other points of view.

Conclusion: In view of the association between the themes addressed and the results presented in the research, it is necessary to continue with educational interventions that can reach the various masses of society, considering that intolerance and ignorance still persist as factors influence in the discussions on various subjects. In the case of the Out of Anonymity Project, the importance of debates as a mechanism for the exchange of ideas and the consequent propagation of knowledge, especially within the academic field where conflicts between opinions are constantly present, is confirmed.

Acknowledgments: We thank all those who participated in the project up to the given moment, contributing to the exchange of ideas and experiences about the themes. We also thank the teachers and professionals who assisted us in mediating the event and being a reference for answering the public's questions. Without these people, none of this would have been possible.

Keywords: Human rights; Public health; Health education; Tabu, Teaching.

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EXPERIENCE REPORT: PERFORMANCE AND EFFECTS OF MUSIC THERAPY IN THE HOSPITAL ENVIRONMENT DURING THE PERFORMANCE OF THE PROJECT SENSIBILIZARTE UFRR IN THE YEAR 2018

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Thematic axis: Standing Committee on Public Health - SCOPH

Introduction: The application of music for therapeutic purposes is an efficient, non-invasive and economical treatment modality that provides the relief of pain and symptoms, restoring patients; health. According to Hatem, Lira and Mattos¹;[...] The action of music in the autonomic function causes a stimulation of the pituitary, resulting in the release of endorphins, reducing the pain and taking patients who receive music therapy potentially reduce the need of analgesics. There also appears to be a decrease in the release of catecholamines, which could explain the reduction in heart rate and blood pressure. Thus, through this tool is that the volunteers from the Music Therapy front of the Sensibilizarte UFRR project assist in the physical and psychological rehabilitation of the patients visited.

Objectives: The main objective is to describe the action of the project SensibilizArte UFRR in specific of the music therapy front. Concomitantly, to address the therapeutic effects of the application of music in the hospital context.

Methods: It is an experience report, whose objective is to describe the performance of the music therapy front in the hospital environment, in the year 2018 in relation to the first semester. In addition, to describe the effects deriving of this for the clinical improvement of the patients in comparison to that described in the literature.

Results and Discussion: The volunteers of the music therapy front are prepared in regular specific trainings, which count on lectures on the theme and repertory essays, which is always suitable for the target audience, ranging from children to the elderly. Hospital visits are held fortnightly and always take place on Sunday afternoons, where volunteers are divided into smaller groups in order to cover a greater number of beds and not hinder the hospital routine. In each bed, the groups perform a small musical presentation, for the patients and companions, with choreographies and songs previously rehearsed. Several scientific publications approaches with

the effects of the use of music in the hospital environment. Among these, we can mention: reduction of anxiety level, heart rate, blood pressure, and depressive symptoms, among other benefits. The use of music as art aims, therefore, to make the hospital environment more joyful, besides to provide to patients, relatives and health professionals, a moment of relaxation, pleasure and joy. The hospital environment, by itself, already demands anxiety and suffering, both for the patients and their companions, as for the professionals involved. Therefore, the work to be performed with the patients must go beyond the biological field, understanding the health-disease process as a complex phenomenon, seeing the human being in its entirety. With the intention of a more humane care, the Ministry of Health created the National Humanization Policy (NHP), where it seeks to add technical and scientific efficiency to an ethical position that respects the singularity of the needs of users and professionals, accepting the limits of each one and the coexistence with the unknown and the unpredictable². Humanization is based on the valorization of the human person, constituting a process that aims at the transformation of the institutional culture, based on humanistic and ethical principles of conduct, the movement against institutional violence in the health area, public policies for attention and management of Unified Health System (UHS), of the auxiliary methodology for participatory management and technology of care in health assistance. During the academic life, students are exposed to contents that aim to encourage a sensitive and humanized look, but several authors show that this is still insufficient, according to Casate and Corrêa³, it is necessary to use experiential strategies related to practical activities developed by students, stimulating reflection and critical action. Therefore, the project SensibilizArte seeks to bring the academic closer to his future reality, awakening and improving a sensitive view, the notion of humanism, and the professional / patient bond that will extend throughout his professional life benefiting not only the academic in formation but also the patient through recreational and playful activities in an environment that is usually heavy.

Conclusion: From experience, what is covered in the literature about the use and effects of music is, in fact, made effective during the entrance of the Sensibilizarte in hospitals project. It is evident that not only the music therapy front, but also the project as a whole, fulfill the role of contributing to the academic formation of each one providing the experience of a humanized health practice.

Acknowledgments: To the founders, coordinators and volunteers of the project, patients and Local Committee of IFMSA Brasil-UFRR, our thanks for making the project part of the identity of those who passed through it.

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