

COVID-19 PANDEMIC: REFLECTIONS FOR THE COLLECTIVE HEALTH FIELD

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Global health has emerging and reemerging diseases as challenges for many years in terms of their control and mitigation. The outbreak of an emerging infectious disease epidemic in Wuhan, China, and its identification as a new type of coronavirus, led the World Health Organization (WHO), in March 2020, to declare the 2019-nCoV disease pandemic or CoVid-19 - Coronavirus Disease 2019⁽¹⁾.

It is noteworthy that, due to its erratic behavior and rapid spread throughout the world, the disease has become a public health emergency that imposes on epidemiological surveillance, international relations and the organization of public policies challenges that affect health systems and impact on health professionals' care and work conditions.

The epidemiological and clinical characteristics of the confirmed cases of CoVid-19, in Wuhan's perspective, demonstrate that the average age was 49 years, with a prevalence of males. Important signs and symptoms of this disease were considered: fever (98%), dry cough (76%), lymphope-

nia (63%), dyspnoea (55%) and myalgia or fatigue (44%). Respiratory secretions were considered as the main means of transmission⁽²⁾.

The speed in the epidemic curve in Brazil shows parity in the clinical and epidemiological aspects of CoVid-19 with the other affected countries, respecting the social vulnerabilities and characteristics of each place. However, the still insipid recognition of the natural history of the disease and the impossibility of immediate control of the pandemic with the reduction of susceptible people through vaccination, worldwide experiences point to the need to control the speed of the curve's progression through social isolation⁽³⁾.

This measure aims to reduce the need for ventilatory support and hospitalization in intensive care units in a short period of time, given that with the expressive and rapid spread of cases it would not allow the adequacy of the assistance capacity in the health system. In this context, and parallel to the isolation measure, Brazil also needs to invest in public policy debates aimed at health worke-

rs, in particular, in what the individual protection equipment, in addition to the reorganization of the care network comprised in the Unified Health System - SUS.

Therefore, the moment reinforces prevention measures against infection, according to WHO guidelines, such as hand hygiene, inputs and food that will be consumed, but also, specifically for health professionals, with the use of protective equipment by using glasses or face shield, N95 mask, apron and gloves when providing care to patients with suspected or confirmed CoVid-19 infection.

Finally, the understanding of this new disease in the populations of the world and its repercussions on care and assistance, invite the scientific community in the area of health to promote new research and develop ethically and quickly, knowledge production based on conduct of leading professionals in the health care. ■

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