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Importance of pharmaceutical assistance in the family health strategy in health units in the municipality of Caruaru-PE

Importancia de la asistencia farmacéutica en la estrategia de salud familiar en las unidades de salud del municipio de Caruaru-PE

Importância da assistência farmacêutica na estratégia saúde da família em unidades de saúde do município de Caruaru-PE

ABSTRACT

This study aimed to demonstrate the importance of Pharmaceutical Assistance in the Family Health Strategy (FHS) from the point of view of users assisted in ten health units in the municipality of Caruaru-PE. Data collection was carried out through a questionnaire, allowing the profile of patients who purchased their drugs at units in the city to be drawn. Low per capita family income (53%) and low education (73.5%) were observed in the studied population, which represents aggravating factors in the effectiveness of pharmacotherapy as well as access to medicines. In the analysis of adherence to pharmacological treatment, 57% of users said they had difficulties completing their treatment due to the lack of medication in the units. 91.6% of the interviewees believe that the presence of the pharmaceutical professional in the FHS can guarantee greater access for users to medicines as well as their rational use, in addition to contributing to the enhancement and improvement of the pharmaceutical assistance service.

DESCRIPTORS: Pharmaceutical Services; Family Health Strategy and Drug Utilization

RESUMEN

Este estudio tuvo como objetivo demostrar la importancia de la Asistencia Farmacéutica en la Estrategia de Salud Familiar (ESF) desde el punto de vista de los usuarios atendidos en diez unidades de salud del municipio de Caruaru-PE. La recogida de datos se realizó a través de un cuestionario, lo que permitió trazar el perfil de los pacientes que adquirieron sus medicamentos en unidades de la ciudad. En la población estudiada se observaron bajos ingresos familiares per cápita (53%) y baja escolaridad (73,5%), lo que representa factores agravantes en la efectividad de la farmacoterapia y en el acceso a medicamentos. En el análisis de adherencia al tratamiento farmacológico, el 57% de los usuarios manifestó haber tenido dificultades para completar su tratamiento debido a la falta de medicación en las unidades. El 91,6% de los entrevistados cree que la presencia del profesional farmacéutico en la ESF puede garantizar un mayor acceso de los usuarios a los medicamentos así como su uso racional, además de contribuir a la potenciación y mejora del servicio de asistencia farmacéutica.

DESCRIPTORES: Servicios Farmacéuticos; Estrategia de Salud Familiar y Utilización de Medicamentos.

RESUMO

O presente estudo objetivou demonstrar a importância da Assistência Farmacêutica na Estratégia Saúde da Família (ESF) no ponto de vista de usuários assistidos em dez unidades de saúde do município de Caruaru-PE. A coleta de dados foi realizada por meio de um questionário, permitindo traçar o perfil dos pacientes que adquiriam seus medicamentos nas unidades do município. Foi observada baixa renda familiar per capita (53%) e baixa escolaridade (73,5%) na população estudada, o que representa fatores agravantes na efetividade da farmacoterapia bem como o acesso aos medicamentos. Na análise da adesão ao tratamento farmacológico, 57% dos usuários afirmaram ter dificuldades para completar seu tratamento dada a falta de medicamentos nas unidades. 91,6% dos entrevistados acreditam que a presença do profissional farmacéutico na ESF pode garantir maior acesso dos usuários aos medicamentos bem como o uso racional dos mesmos, além de contribuir para a valorização e aperfeiçoamento do serviço farmacêutico assistencial.

DESCRITORES: Assistência Farmacêutica; Estratégia Saúde da Família e Uso de Medicamentos.

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INTRODUCTION

The Unified Health System (SUS) was the first Brazilian model of the health system to adopt Pharmaceutical Assistance (PA), enabling pharmacists to participate more effectively in public health and develop specific forms of technologies involving medicines and the provision of health services. ⁽¹⁾ PA is defined as “a set of actions aimed at the promotion, protection and recovery of health, both individual and collective, with medication as an essential input”. ⁽²⁾

Within the scope of the Unified Health System (SUS), the primary objective of PA is to guarantee the continuous supply and rational use of medicines in Basic Health Units, through selection, programming, acquisition, storage, prescription and dispensing processes. ⁽³⁾ Laws 8080/90 and 8142/90 enshrine the principles of decentralization of health services and municipalization of management, highlighting Article 6 of Law No. 8080 that “ensures the provision of comprehensive Therapeutic Assistance, including Pharmaceutical Assistance”. ⁽¹⁾

With the decentralization of health actions, municipalities started to assume direct responsibility for health care, including actions related to PA through the Family Health Program, which emerged as a strategy for reorienting the old care

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model, being later transformed into Family Health Strategy (FHS). ⁽⁴⁾ With the decentralization of health actions, the municipalities started to assume direct responsibility for health care, including actions related to PA through the Family Health Program, which emerged as a strategy for reorienting the old care model, being later transformed into Family Health Strategy (FHS). ⁽⁵⁾

Among the services provided to the population in health units is the distribution of medicines, which aims to facilitate the population's access to essential medicines. ⁽⁶⁾ With the practice of distributing medicines in an ESF unit, there is a need to ensure greater sanitary control of these medicines, based on RDC No. 328/99, which provides for good dispensing practices for pharmacies and drugstores and ensures that the pharmaceutical professional is responsible for supervising the set of processes that characterize PA. ⁽⁷⁾

The incorporation of the pharmacist to the FHS becomes an essential measure for guaranteeing PA, and it can reduce possible problems related to the treatment of patients, achieving defined results for improving their quality of life. ⁽⁸⁾ However, despite its importance in the composition of the FHS, the role of the pharmacist in basic health units is still an uncommon reality.

Thus, the present study aims to de-

monstrate the importance of the pharmacist in the FHS from the point of view of the users who are assisted by it, who purchase medicines in the basic health units in the municipality of Caruaru, Pernambuco, Northeast region of Brazil.

METHOD

The study is characterized as descriptive cross-sectional population-based, carried out with users ten basic health units assisted by SF in the urban area of a municipality located in the state of Pernambuco, between the months of January 2016 to December 2017. The Data collection was performed using a pre-coded questionnaire, previously tested. Information was collected on sex, age, family income per capita, history of chronic diseases reported by the individual, possession of a private health plan, work practices of professionals who dispense medication in the units and general knowledge about PA in the FHS.

The sample universe consisted of 200 users in 10 health units, one unit per neighborhood. 5-10% of users were interviewed, according to the number of monthly medical care in each unit, which, according to the municipality's Health Department, has 250 to 550 / month, varying from unit to unit. Participated in the research, individuals of legal age who were part of the coverage area of UBS, and who purchased their drugs in the unit addressed. Excluded from the research were people with some difficulty in responding to the protocol (Ex.: psychic or neurological diseases) and who were not with an adult companion who can answer for

The professionals appointed in the research as being responsible for dispensing medications in the units, 45% were nurses, 44,5% nursing technicians and 8,5% Community Health Agent.

them. The data were stored in a database using the Microsoft® Excel application, with the percentage of variables being calculated and obtained for each section of the applied questionnaire. The research was initiated after approval by the Research Ethics Committee (CEP), of the Centro Universitário Tabosa de Almeida (ASCES-UNITA), under letter n° 1,821,970 and CAAE 60885916.4.0000.5203.

RESULTS

The analysis of the effectiveness of pharmacotherapy for users assisted by the FHS, carried out through the socioeconomic and cultural data of the population, presented worrying data regarding therapeutic guidance and access to drugs. The results obtained showed that 73,5% of the interviewees had a low level of education and that 53% had a family income per capita less than or equal to a minimum wage.

Assessing the profile of medication distribution in health units, the results showed a high rate of users dependent on the drugs distributed in the UBS, equivalent to 98%, of which 93% make monthly purchases of the same drugs. As for adherence to pharmacological treatment, the results showed that 17,24% of users interrupt the treatment after their clinical condition improves.

The professionals appointed in the research as being responsible for dispensing medications in the units, 45% were nurses, 44,5% nursing technicians and 8,5% Community Health Agent. In no unit was the presence of the pharmacist exercising this function, and in none of the units was there even the presence of this professional composing the FHS. Part of the interviewees did not know the pharmaceutical assistance services and stated that they had never been guided by a pharmacist, which demonstrates that the duties of this professional in the FHS is still a little-known reality (Table 1).

The socioeconomic and cultural conditions of a given population, as well as the level of education and family income per capita, requires that doctors and pro-

Table 1. Information on pharmaceutical assistance services

Questões	Variáveis (%)		
	SIM	NÃO	NS/NR
Já ouviu falar nos serviços farmacêuticos assistenciais	25,5	73	1,5
Já foi orientado por um profissional farmacêutico	17	80	3
Os serviços farmacêuticos contribuiriam para o URM	91,6	7,4	1

*URM- Rational Use of Medicines

*NS/NR – Don't know / Didn't answer

professionals responsible for guiding and dispensing medications, greater dedication to the information given to the patient, in order to guarantee success treatment.⁽⁹⁾ In general, drugs represent the most cost-effective therapeutic interventions, when prescribed and administered in a rational manner. Medicines for primary care are considered even more important because they meet the population's health priorities.⁽¹⁰⁾ Thus, the lack of medications in the public sector becomes worrying since it requires SUS users to seek essential medicines from private pharmacies, compromising the patient's income and consequently their treatment.⁽¹¹⁾

Therapeutic abandonment is a major challenge for the effectiveness of pharmacotherapy, which can worsen the patient's

health status.⁽¹²⁾ To Bovo et al⁽¹³⁾ another major problem faced in the public system is in the act of dispensing medicines, where, in his study, he can see that 64% of users did not receive any guidance. According to RDC No. 328/99, the pharmacist is the professional responsible for supervising the dispensing of medicines and has specific scientific knowledge for such activity.⁽⁷⁾

A study by Canabarro and Hahn⁽⁶⁾ demonstrated that in 9 out of 15 health units, the nurse was the professional responsible for the stock of medications, and that in 11 teams the doctor was the one who distributed the medications to patients, guiding them in all cases. However, it is important to remember that the pharmacist is at the interface between the dis-

tribution of medicines and their use, being able to identify, correct or reduce possible risks associated with therapy even within the health system.^(15,16)

CONCLUSION

In view of the deficient distribution of medicines in the basic health units studied, the insertion of the pharmacist is fundamental to guarantee access to medicines and their rational use, contributing to the valorization and improvement of the pharmaceutical assistance service. Thus, it is up to the competent organs and professional bodies that make up the ESF to analyze the efficiency of this strategy as a drug distributor, by reviewing the set of processes that encompass PA. ■

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