

187 - SKIN PROBLEMS EVIDENCED IN THE PROGRAM FAMILY HEALTH: STUDY REVIEW

DANIELE VIEIRA DANTAS

SANDRA MARIA DA SOLIDADE GOMES SIMÕES DE OLIVEIRA TORRES

SIMONE CUNHA DOS SANTOS

FLAVIA REJANE DE SOUZA

ANA MARIA FREIRE

Programa de Pós-Graduação em Enfermagem /UFRN - Natal/RN, Brasil

daniele00@hotmail.com

INTRODUCTION

According to the Ministry of Health, the Family Health Program (PSF) is an innovative strategy of change the health care model, aiming to promote greater reorganization of health care practice on a new basis and criteria, replacing the traditional model of service-oriented cure and centered in the hospital (BRAZIL, 1994).

In the conception of Sousa (2000), the effective implementation of this strategy comes to enable the search for comprehensive care and the creation of links of commitment and shared responsibility between health services and population.

The PSF appears as a possibility reorganization of the model and proposes a new dynamic to the structuring of health services, as well as its relationship with the community and between different levels of complexity (SOUSA, 2000).

Also assumes the committed to provide universal assistance, integral, equitable, continuous and, above all, resolving the population in the clinic and at home, and always according to your needs, identifying risk factors to which it is exposed and acted on them appropriately (SOUSA, 2000).

Among the risk factors that communities are exposed, the diseases of skin diseases are considered important and challenging for the health team. According to the Brazilian Society of Dermatology (2006), despite the high frequency of skin diseases in Brazil, the epidemiological information is limited, it is estimated that approximately 10% of consultations in public are by skin problems.

The skin is the body considered as a first line of defense of our body against pathogens, serving to protect the body against the environment, abrasions, loss of fluids and electrolytes, substances and invading microorganisms. It also serves as a thermal insulator, provides sensitivity through the superficial nerves and their terminals, operates in the excretion through the elimination of waste as electrolytes, water and metabolism, with synthesis of vitamin D and is responsible for the appearance by setting the image body of each individual and identifying it uniquely (HESS, 2002; JORGE; DANTAS 2003).

With all these functions of the skin, it is apparent, however, the importance of maintaining its integrity, since it is fundamental to human life and the perfect physiological functioning of the body (BORGES, 2001).

In the PSF units the main skin diseases identified by the health team are: impetigo, skin abscess, cellulitis, dermatitis, pruritus, urticaria, erythema, sunburn, skin changes due to radiation exposure, nail disorder, alopecia, acne, ulcer (MATO GROSSO, 2005).

Given the importance of this theme, this article aims to characterize the major skin problems evidenced in the Family Health Program in the brazilian scientific literature, as the author, year, type of study and approach, type of injury and treatment adopted.

METHODOLOGY

The research is an exploratory descriptive retrospective data and a quantitative approach, held in a source of electronic data available on the Internet (databases and journals).

The research includes the descriptive literature and / a documentary. In this study we chose a literature review, according to Barros and Lehfeld (2000) seeks to solve a problem or acquire knowledge from information derived from the material researched.

The quantitative approach allows a systematic collection of numerical information under conditions of too much control, analyzing this information through statistics (POLIT; BECK; HUNGLER, 2004).

The survey was conducted in October 2009, in the Virtual Health Library (BVS), SCIELO Brazil, Scholar google and scientific journals related to areas of public health and dermatology available electronically. The descriptors used for data collection were: "skin disease" and "Family Health Program," according to the Descriptors in Health Sciences (DECS).

The criteria for inclusion of articles for this integrative review pointed to studies on the topic of skin diseases evidenced in the Family Health Program, published between the years 2005 to 2009 in the form of the full text. The exclusion criteria have focused for the studies that did not respond to our question and they were published in more than one source of information.

During the collection, there were a total of 9 articles distributed as follows: 4 in SCIELO BRAZIL, 4 on Scholar google and 1 in the Journal of Nursing of the Federal University of Pernambuco On Line (REUOL). In the other sources of information there are no studies that met the inclusion criteria of the study.

The data collected were sketched on a table for better visualization and understanding.

RESULTS AND DISCUSSION

The results were summarized as the data collected during the literature review is provided in Table 1.

Table 1. Characterization of skin problems evidenced in the Family Health Program.

| DATA SOURCE | AUTHOR (YEAR) | TYPE OF STUDY / APPROACH | TYPE OF INJURY | THERAPY |
|-----------------------|----------------------------------|--------------------------------|----------------------------------|--|
| Journal REUOL | Torres et al. (2009) | Descriptive / qualitative | Venous ulcers | Multidisciplinary team, compression therapy and products and adequate protection |
| SCIELO Brazil | Lima, Alves e Franco (2007) | Descriptive / qualitative | Mycoses | Antifungals |
| SCIELO Brazil | Volkmer, Ribeiro, Batista (2007) | Descriptive / qualitative | Pruritic dermatitis | Anti-inflammatory topical and environmental control |
| SCIELO Brazil | Scott (2006) | Literature review /qualitative | Mycoses | Antifungal and measures of personal and domestic hygiene |
| Scholar google Brazil | Lemos (2006) | Descriptive / qualitative | Dermatitis Atopic | Anti-inflammatory and topical antihistamine |
| Scholar google Brazil | Silva (2006) | Descriptive / qualitative | Mycoses | Antifungal and measures of personal and domestic hygiene |
| SCIELO Brazil | Nascimento et al. (2005) | Descriptive / qualitative | Injuries contaminated by myiasis | Use tweezers and ether to remove the larvae |
| Scholar google Brazil | Leite e Bercini (2005) | Descriptive / qualitative | Mycoses | Antifungals |
| Scholar google Brazil | Mato Grosso (2005) | Descriptive / qualitative | Mycoses, burns and ulcers | Phytotherapy |

According to the survey, most studies were located in SCIELO Brazil (44.4%) and Scholar google (44.4%) in the years 2005 (33.3%) and 2005 (33.3%), using is the descriptive study (88.9%) and literature review (11.1%), with a qualitative approach (77.8%).

As to the type of study, Cervo and Bervian (1996) report that a descriptive research is characterized by observing, record, analyze, and correlate facts or phenomena (variables) without manipulating them, making accurate descriptions of the situation and finding the links between the elements of research.

Already the literature review is an examine the scientific literature, to survey and analysis of what has been written about a particular subject (RIBEIRO; SOUZA, 2009).

The qualitative approach is based on the existence of a dynamic relationship between the real world and the subject, a living interdependence between subject and object, an inseparable link between the objective world and the subjectivity of the subject (CHIZZOTTI, 1995).

The predominant injuries were varied with a predominance of mycoses (55.6%). According to the Brazilian Society of Dermatology (2006) the mycoses are responsible for 8.7% of all skin problems of the country.

The superficial mycoses are fairly infections common, usually mild, affecting skin, hair, nails and mucous membranes (oral and vaginal). Not life threatening, but enough to annoy your carrier (HARRIS, 2002; CAMPANHA; TASCA; SVIDZINSKI, 2007).

The occurrence of dermatomycoses shows regional variation. In Brazil, it is more frequent in children up to puberty Tinea capitis (most common agent is Microsporum canis) in adults the other types of tinea (most common agent is Trichophyton rubrum) (CAMPANHA; TASCA; SVIDZINSKI, 2007).

In research, the therapeutic established for treatment of mycoses was the use of anti-fungal and measures of personal and domestic hygiene, in addition, one of the studies recommended the use of phytotherapy in the care of these skin problems.

According to Del Palacio, Garau and Cuétara (2002) and Campanha, Tasca and Svidzinski (2007), since the spontaneous cure of mycoses is unlikely, it is necessary to establish the topical treatment and / or systemic, usually centered on the use of antifungal agents. This treatment should be performed for long periods, requiring persistence by the patient.

Moreover, it is worth mentioning that an appropriate level of personal and domestic hygiene are essential to prevent recurrences of skin diseases and other health problems, however, they are not always possible because of the serious social and economic problems of community served by the Family Health Program in our country.

CONCLUSION

From the results of this study, we observed that most studies were located in SCIELO Brazil and Scholar google in the years 2005 and 2006, using the descriptive and qualitative approach.

The predominant injuries were varied with a predominance of mycoses, responsible for high prevalence of skin diseases in Brazil. As the treatment was the use of antifungal agents for parasites control and measures of personal and domestic hygiene.

The skin changes are often localized and usually of low lethality, perhaps because they are not properly valued by those setting health policies. However, it is important to note that skin diseases have significant impact on quality of life of affected and may be limiting, cause absenteeism at school and at work and often act negatively on one's social life, especially in the chronically ill. Is therefore necessary your valorization as health problems for which public policies should be properly formulated.

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Main Author: DANIELE VIEIRA DANTAS. Endereço: Rua dos Potiguares, 2323, Residencial Victória, Bloco 01, Ap. 402, Lagoa Nova. CEP: 59054-28. Natal/RN, Brasil. Tel. (84) 8809-7740. E-mail: danielle00@hotmail.com.

Co authors:

SANDRA MARIA DA SOLIDADE G. S. OLIVEIRATORRES: sandrasolidade@hotmail.com
SIMONE CUNHA DOS SANTOS : simonepreta2003@yahoo.com.br
FLAVIA REJANE DE SOUZA: flavia_rejane@hotmail.com
ANA MARIA FREIRE: anafrreira@supercabobr.com.br

**SKIN PROBLEMS EVIDENCED IN THE PROGRAM FAMILY HEALTH: STUDY REVIEW
ABSTRACT**

In units of the Family Health Program the major skin diseases identified by the health team are: impetigo, skin abscess, cellulitis, dermatitis, pruritus, urticaria, erythema, sunburn, skin changes due to radiation exposure, nail disorder, alopecia, acne, ulcer. This article aims describes the main skin problems evidenced in the Family Health Program in the brazilian scientific literature, as the author, year, type of study and approach, type of injury and treatment adopted. The research is a descriptive (literature review) and quantitative approach, carried out in the BVS, SCIELO Brazil, Scholar google, scientific journals related to areas of public health and dermatology available electronically, using the key words "skin diseases" and "Program Family Health ", with works published between the years 2005 to 2009, in the form of the full text. During the collection, were found 9 products: 4 in SCIELO BRAZIL, 4 on Scholar google and 1 in the Journal of Nursing of the Federal University of Pernambuco On Line (REUOL). In the other sources of information there are no studies that met the inclusion criteria. The data collected were sketched on a table for better understanding. Most studies were located in SCIELO Brazil (44.4%) and Scholar google(44.4%) in the years 2005 (33.3%) and 2005 (33.3%), using the descriptive study (88.9%) and literature review (11.1%), with a qualitative approach (77.8%). The predominant injuries were varied, with emphasis of mycoses (55.6%), which are treated with antifungal and hygiene measures. Skin diseases have significant impact on quality of life of affected and may be limiting, cause absenteeism at school and at work and often act negatively on one's social life, especially in the chronically ill. Is therefore necessary your valorization as health problems for which public policies should be properly formulated.

KEYWORDS: skin diseases, the Family Health Program, review.

LES PROBLEMES DE PEAU MIS EN EVIDENCE DANS DU PROGRAMME DE SANTE FAMILIALE: L'EXAMEN DES ETUDES

Dans les unités du programme de santé familiale des maladies de peau majeurs identifiés par l'équipe de santé sont les suivantes: impétigo, abcès cutané, cellulite, dermatite, prurit, urticaire, érythème, coup de soleil, de modifications cutanées dues à l'irradiation, troubles des ongles, alopecie , acné, ulcère. Le présent document décrit les principaux problèmes de peau mis en évidence dans le Programme de santé familiale dans la littérature littéraire scientifique, comme l'auteur, année, type d'étude et d'approche, le type de blessure et de traitement adopté. La recherche est un descriptif (revue de la littérature) et l'approche quantitative, réalisée dans le BVS, SciELO Brésil, Google et des revues universitaires liés aux domaines de la santé publique et de la dermatologie disponibles par voie électronique, en utilisant les mots-clés «maladies de la peau» et "Programme santé familiale ", avec des œuvres publiées entre les années 2005 à 2009, sous la forme du texte intégral. Lors de la collecte, a trouvé 9 produits: 4 SciELO Brésil, 4 sur Google scholar et 1 dans le Journal of Nursing, Université fédérale de Pernambuco On

Line (REUOL). Dans les autres sources d'information, il n'existe pas d'études qui répondaient aux critères d'inclusion. Les données recueillies ont été tracées sur une table pour une meilleure compréhension. La plupart des études étaient situés dans Scielo Brésil (44,4%) et Google Scholar (44,4%) dans les années 2005 (33,3%) et 2005 (33,3%), en utilisant l'étude descriptive (88,9%) et revue de la littérature (11,1%), avec une approche qualitative (77,8%). Les blessures prédominants étaient variées, avec un accent des mycoses (55,6%), qui sont traités avec des antifongiques et d'hygiène. Maladies de la peau ont un impact significatif sur la qualité de vie des personnes touchées et mai être limitatif, cause d'absentéisme à l'école et au travail et, souvent, agissent négativement sur la vie sociale, surtout dans les malades chroniques. Est donc nécessaire à la récupération comme des problèmes de santé pour lesquels les politiques publiques doivent être correctement formulée.

MOTS-CLÉS: maladies de la peau, le Programme de santé familiale, révision.

PROBLEMAS EN LA PIEL ENCONTRADOS EN EL PROGRAMA SALUD DE LA FAMILIA: ESTUDIO DE REVISIÓN

En las unidades del Programa de Salud de la Familia de las enfermedades de la piel principales identificados por el equipo de salud son: impétigo, abscesos de la piel, celulitis, dermatitis, prurito, urticaria, eritema, quemaduras de sol, cambios en la piel debido a la exposición a la radiación, alteraciones de las uñas, alopecia, acné y úlcera. Este artículo describe los principales problemas de la piel encontrados en el Programa de Salud de la Familia en la literatura científica, por autor, año, tipo de estudio, enfoque, el tipo de lesión y el tratamiento adoptado. La investigación es descriptiva (revisión de la literatura) y el enfoque cuantitativo, realizado en la BVS, Scielo Brasil, Google y las revistas académicas sobre temas de salud pública y dermatología disponibles en formato electrónico, utilizando las palabras clave "enfermedades de la piel" y "Programa de Salud de la Familia", con obras publicadas entre los años 2005 a 2009, en la forma del texto completo. Durante la reunión, que se encuentra 9 productos en 4 Scielo Brasil, 4 en Google scholar y 1 en el Diario de Enfermería, Universidad Federal de Pernambuco On Line (CIM). En las otras fuentes de información no existen estudios que cumplieron con los criterios de inclusión. Los datos recogidos se esbozaron en una mesa para una mejor comprensión. La mayoría de estudios se encuentra en Scielo Brasil (44,4%) y Google scholar (44,4%) en los años 2005 (33,3%) y 2005 (33,3%), utilizando el estudio descriptivo (88,9%) y la revisión de la literatura (11,1%), con un enfoque cualitativo (77,8%). Las lesiones predominantes fueron variados, con énfasis de las micosis (55,6%), que son tratados con antifúngicos y la higiene. Enfermedades de la piel tienen un impacto significativo en la calidad de vida de los afectados y puede ser limitante, motivo de absentismo laboral en la escuela y en el trabajo y con frecuencia actúan negativamente en la vida social, especialmente en los enfermos crónicos. Es necesario, por tanto la recuperación como problemas de salud para que las políticas públicas deben estar correctamente formulada.

PALABRAS CLAVE: enfermedades de la piel, Programa de Salud de la Familia, revisión.

PROBLEMAS DERMATOLÓGICOS EVIDENCIADOS NO PROGRAMA SAÚDE DA FAMÍLIA: ESTUDO DE REVISÃO

Nas unidades de Programa Saúde da Família as principais doenças de pele identificadas pela equipe de saúde são: impetigo, abcesso cutâneo, celulite, dermatites, prurido, urticária, eritema, queimadura solar, alterações cutâneas devido a exposição a radiação, afecções das unhas, alopecia, acne, úlcera. Este artigo objetiva caracterizar os principais problemas dermatológicos evidenciados no Programa Saúde da Família presentes na literatura científica brasileira, quanto a autoria, ano, tipo de estudo e abordagem, tipo de lesão e terapêutica adotada. A pesquisa é do tipo descritivo (revisão bibliográfica) e abordagem quantitativa, realizada na BVS, SCIELO Brasil, Google acadêmico e revistas científicas relacionadas às áreas de saúde coletiva e dermatologia disponíveis eletronicamente, utilizando-se os descriptores "doenças de pele" e "Programa Saúde da Família", com trabalhos publicados entre os anos a 2005 a 2009, na forma de texto completo. Durante a coleta, foram encontrados 9 artigos: 4 na SCIELO BRASIL, 4 no Google acadêmico e 1 na Revista de Enfermagem da Universidade Federal de Pernambuco On Line (REUOL). Nas demais fontes de informação não foram encontrados estudos que se enquadrasssem nos critérios de inclusão. Os dados coletados foram esquematizados em uma tabela para melhor compreensão. A maioria dos estudos estava localizada na SCIELO Brasil (44,4%) e Google acadêmico (44,4%), nos anos de 2005 (33,3%) e 2005 (33,3%), utilizando-se o estudo descritivo (88,9%) e revisão de literatura (11,1%), com abordagem qualitativa (77,8%). As lesões predominantes foram variadas, com ênfase das micoses (55,6%), sendo estas tratadas com antifúngicos e medidas de higiene. As dermatoses têm significativo impacto na qualidade de vida dos acometidos, podendo ser limitantes, provocar absentismo escolar e no trabalho e atuar muitas vezes de forma negativa na vida social do indivíduo, especialmente nos cronicamente doentes. Sendo, portanto, necessário sua valorização como problemas de saúde para os quais políticas públicas devem ser adequadamente formuladas.

PALAVRAS-CHAVE: doenças de pele, Programa Saúde da Família, revisão.

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