



Low adherence to rapid testing for sexually transmitted infections

<https://doi.org/10.56238/homeIIsevenhealth-148>

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1 INTRODUCTION

Sexually Transmitted Infections (STIs) are caused by viruses, bacteria, or other microorganisms, and transmission is carried out through sexual contact (oral, vaginal, anal) without the use of condoms, being frequent and recurrent, having an important impact on the sexual and reproductive health of the population, being an important public health problem worldwide (FERREIRA *et al*, 2020).

The transmission of an STI can also happen from mother to child during pregnancy, childbirth or breastfeeding, but can also be transmitted through non-sexual means, through contact of mucous membranes or unbroken skin with contaminated body secretions, such as the palm of the hand, eyes and tongue (FERREIRA *et al*, 2020; BRASIL, 2023).

There are several types of sexually transmitted infections, the most popular being: Genital herpes, Gonorrhea and Chlamydia infection, Syphilis, Pelvic Inflammatory Disease (PID), HIV infection, Human Papillomavirus (HPV) infection, Viral hepatitis B and C, Soft cancer (chancroid), Lymphogranuloma venereum (LGV), Trichomoniasis, HTLV infection, Donovanosis (MCCOMACK, KOONS, 2019; BRAZIL, 2023).

The body should be observed during personal hygiene, which can help identify an STI at an early stage. Early and accurate diagnosis improves quality of life, interrupts the chain of transmission and is an essential tool for preventing complications from these infections (BRASILa, 2022).

This highlights the importance and need for rapid tests to detect these diseases, effective early diagnosis, in addition to ensuring the quality of life of the user with STIs, ensures greater



epidemiological control, reducing the rampant spread of fatal diseases (MCCOMACK, KOONS, 2019).

The Unified Health System (SUS) offers free tests for HIV diagnosis, as well as for syphilis and hepatitis B and C diagnosis. In Brazil, there are two types of tests: laboratory tests and rapid tests. Rapid tests are practical and easy to perform; they can be performed by collecting a drop of blood from the fingertip or an oral fluid sample, and provide the result in a maximum of 30 minutes (BRASILb, 2022).

Whenever any sign or symptom is noticed, the health service should be sought, regardless of when the last sexual intercourse was and warn the partners, remembering that if left untreated, they can lead to several serious complications in the health of the infected individual, including death (BRASIL, 2023).

Sexually Transmitted Infections (STIs) are public health problems due to their magnitude and difficulty in accessing adequate treatment. STIs are among the 10 most frequent causes of demand for health services, with health, social and economic consequences (NEWMAN, *et al.* 2015).

The lack of access to effective and reliable health services is reflected in the increase in STIs in many countries and these infections can represent up to 17% of economic losses, caused by the health-disease binomial (PINTO *et al.*, 2018).

However, some STIs may not present signs and symptoms, and if not diagnosed and treated, can lead to serious complications, pelvic inflammatory disease (PID), ectopic pregnancy, male and female infertility, cancers, abortions, prematurity, stillbirths, neonatal mortality and congenital infections, increases the risk of HIV transmission and can lead to death (BRASIL, 2019; BRASIL, 2023).

In Brazil, the true epidemiological situation of these diseases and their complications are not well known, due to the fact that most STIs are not compulsorily notifiable, in addition to the scarcity of sentinel and population-based studies (PINTO *et al.*, 2018).

However, it was observed that in the Family Health Unit (USF) of the Santa Isabel neighborhood in the municipality of Cuiabá - MT, there is a low adherence to rapid tests, demonstrating that the population takes little advantage of this free resource.

In view of the above, it becomes important to use situational strategic planning (SSP), which is a plan of activities that takes into account the current moment of the USF, but in a way that remains flexible to adapt to the constant changes of a real organizational situation.



2 OBJECTIVE

Carry out a strategy to increase the demand for rapid tests provided by the USF of the Santa Isabel I neighborhood in the municipality of Cuiabá - MT, based on the creation of means to bring information to the community.

3 METHODOLOGY

The present study is an experience report of 09 (nine) undergraduate students of the Medicine course of the University of Cuiabá - MT, through four actions that were applied in the Family Health Unit (USF) of the Santa Isabel I neighborhood in the period from September 27 to November 08, 2022 in the municipality of Cuiabá - MT.

4 EXPERIENCE REPORT

The first action of the academics consisted of making and installing a banner on 27/09/2022 at the main entrance of the USF of the Santa Isabel I neighborhood, since, strategically, this is the place of positioning that guarantees a greater exposure of the material to the patients who attend the unit. The banner denotes an impact phrase: "Did you know? Here we perform rapid tests for sexually transmitted infections (STIs)", in addition to highlighting the free cost and the speed of obtaining the results provided by the 04 available tests (hepatitis B, hepatitis C, syphilis and HIV), all aimed at bringing knowledge to the population about the availability of this little-explored resource.

The second action includes the production and consequent implementation also on 27/09/2022 of 04 (four) colored posters on the walls and doors of the rooms of the USF where there is a greater flow / cluster of people, such as waiting rooms, bathrooms and corridors. These posters contain information on the definition, symptoms and means of transmission of the four STIs covered by the rapid tests offered by the unit, with the aim of disseminating among uninformed people the need for early diagnosis and reinforcing the importance of correct treatment of these diseases. The materials used for this action were posters, pens and adhesive tape.

The third action requires the participation of 03 (three) Community Health Agents (CHA), in a meeting with them, they will be instructed, during their home visits, to inform the population of the Santa Isabel I neighborhood about the offer and constant availability of rapid tests at the USF, as well as the importance of performing them, thus taking advantage of their position of proximity and knowledge, both of the community and the region.

The fourth and final action involves the attendance of academics at the USF of the Santa Isabel I neighborhood on 10/04/2022 to offer the tests, on free demand. For this dynamic, the academics are subdivided into group A and group B, while the first group is responsible for disseminating to patients



about the importance and availability of the tests, the second group is in charge of performing the procedure and providing the necessary guidance to the participating individuals.

5 RESULTS AND DISCUSSION

The activities carried out by the group, in view of what was proposed by the Situational Strategic Planning (PES), brought significant results, which show a remarkable growth in the demand for rapid tests by the community of the Santa Isabel I neighborhood.

Using a panoramic view for comparison purposes, it can be observed that during the period from January to August 2022 (before the application of the PES), the USF recorded a total of 81 rapid tests for STIs, an average of approximately 10 tests performed per month, in a time span of approximately 240 days.

Now, using as a parameter the periods from September 27 to November 8, 2022 (after the beginning of the activities proposed by the PES), the USF registered a total of 105 tests performed, all in a space-time less than 60 days, which shows a monthly average 5 times higher than in the period prior to the application of the PES (approximately 53 monthly tests), proving its effectiveness.

6 FINAL CONSIDERATIONS

As already shown in the results above, there was a vertical increase in the performance of rapid tests for STIs in the community of the Santa Isabel I neighborhood, reflecting the various actions of the group aimed at changing the local reality, through the use of mechanisms aimed at delivering information, which seek to warn the population in general about STIs and how to diagnose them early.

The actions carried out by the group were executed according to plan, and brought as a final product satisfactory results, with regard to the goals and objectives previously elaborated, contributing significantly both to the health promotion of the community and to the USF Santa Isabel I itself, which now has a better insight into the concrete reality of its coverage area.



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