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# The Current Situation of Brazilian Public Health in Neurology Care



Ramon William da Silva Rezende\*, Heruenna Castro da Silva Conceição, Letícia da Cunha Andrade and Karolina Ribeiro dos Santos

Department of Neurology, Universidade do Estado do Pará, Brazil Submission: October 03, 2019; Published: October 14, 2019

\*Corresponding author: Ramon William da Silva Rezende, Department of Neurology, Universidade do Estado do Pará, Brazil

#### Abstract

Brazil is a country of continental size located in South America with a population of approximately 210 million and living under a republican and democratic regime. Throughout the Brazilian historical construction, the increase of social and economic inequalities perpetuate to the present day. Such situations of disparity reflect directly on collective health processes, since most of the population often does not have access to the best health services in a timely manner, especially those of greater complexity such as neurological clinic and neurosurgery. Thus, the purpose of this manuscript was to describe the current situation of Brazilian public health with regard to specialized neurological care. Given the great complexity and importance of the service of neurology in Brazil in its institutional and epidemiological aspects, it is of utmost importance the best public engagement in order to ensure better conditions for comprehensive and fair care for the entire population regardless of location. The technical means must be better distributed in the national territory, because thus the specialized labor, especially the neurology, will be available in a more homogeneous and equal way in the national territory. This movement is part of the need to enhance multiprofessional qualification, because primary care will have, above all, subsidies to consolidate diagnoses of neurological conditions. All this mutual effort involving Brazilian institutions and health professionals can help to reduce statistics related to morbidity and mortality of the Brazilian population.

Keywords: Public Health Care; Neurology; Neurosurgery; Statistics; Morbidity; Mortality; Brazilian population; Health processes; Neurological clinic; Comprehensive care; Autonomous neurology; Patients; Dyslipidemia; Hypertension; Diabetes

## Introduction

Brazil is a country of continental size located in South America with a population of approximately 210 million and living under a republican and democratic regime. Throughout the Brazilian historical construction, the increase of social and economic inequalities perpetuate to the present day. The most peripheral Brazilian regions, such as the north and northeast, have the worst rates of human development, as they are a reflection of this historical process. However, within the most developed regions of Brazil they are also found areas of poverty and deplorable health conditions. Such situations of disparity reflect directly on collective health processes, since most of the population often does not have access to the best health services in a timely manner, especially those of greater complexity such as neurological clinic and neurosurgery.

At the end of the last century, Brazil consolidated one of the largest public health systems in the world. Although the current situation of Brazilian health institutions falls short of the ideal under a practical view, the guidelines of the Sistema Único de Saúde (SUS) are impeccable in theory. Issues beyond the scope

of this manuscript, such as Brazilian political corruption, are responsible for the fragility of the current public health system. In general, the SUS aims to ensure comprehensive care, at any level of complexity, and completely free of charge for each individual [1].

In Brazil's public health system, there is still great difficulty for the population to access specialized services, especially in neurology. Around 2010 the Brazilian government implemented an organizational network for the distribution of health services according to the epidemiological needs and demands of each Brazilian region. Unfortunately, this measure did not yield significant results, as patients still faced long queues that had a waiting time of about 1 year for a simple consultation [2]. From the perspective of the complexity set up to ensure better patient care, some autonomous neurology and neurosurgery services in the country have created their own stratification and patient care management systems. This measure aimed to establish priority levels for these patients according to their neurological disorders and thus classify them according to their severity and

need for immediate care so that one of the principles of the SUS could be fulfilled, which is: ensure priority in care to the most severe patients [3].

Another way to improve neurological care in public health was to train primary care physicians in some Brazilian states to better recognize and characterize signs and symptoms such as headache and epilepsy, for example. These are the main reasons for referral to specialized secondary care in neurology. The training was conducted from theoretical classes with neurologists and moments of practice in outpatient clinics for the purpose of clinical improvement and which eventually showed good results [3]. Having made a general analysis of the public health institutions in the country and their particularities, especially those that provide services in neurology and neurosurgery, a better characterization of the Brazilian epidemiological profile of patients with neurological disorders is also necessary. Thus, it is possible to realize the challenges of the public health system in ensuring full care to these patients in all their levels of complexity regardless of the severity of the disease [4]. Brazilian studies indicate that most patients with neurological disease have a clinical diagnosis of stroke, spinal cord trauma and, to a lesser extent than the first two, Parkinson disease. Also noteworthy are the systemic diseases associated with these individuals, such as systemic arterial hypertension, diabetes mellitus and dyslipidemia mainly. It is noteworthy that large portions of these patients are elderly and already have locomotor impairment, therefore dependent on wheelchairs and caregivers [4].



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### Conclusion

Given the great complexity and importance of the service of neurology in Brazil in its institutional and epidemiological aspects, it is of utmost importance the best public engagement in order to ensure better conditions for comprehensive and fair care for the entire population regardless of location. The technical means must be better distributed in the national territory, because thus the specialized labor, especially the neurology, will be available in a more homogeneous and equal way in the national territory. This movement is part of the need to enhance multiprofessional qualification, because primary care will have, above all, subsidies to consolidate diagnoses of neurological conditions. All this mutual effort involving Brazilian institutions and health professionals can help to reduce statistics related to morbidity and mortality of the Brazilian population.

#### References

- Brazil Ministry of Health (2012) Department of Primary Care, Secretariat of Health Care. National Policy for Primary Care. Health Legislation.
- Spedo SM, Pinto NRS, Tanaka OR (2010) The difficult access to SUS medical complexity services: the case of the city of São Paulo, Brazil. Physis Journal of Collective Health 20(3): 953-972.
- 3. Areal AFB (2018) Reduction of waiting for consultation with neurologist after reorganization of health care in the Northern Region of the Federal District. Health Sciences 29(Suppl 1): 39-44.
- 4. Baptist Anny J (2018) Epidemiological profile of the neurology department of the ingá college physiotherapy school clinic in 2013. Revista uningá review 17(2).

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