

PÔSTER DIGITAL

Rural Population Health and Health Services/Systems

Basic health riverine unit: qualifying access to health at Amazonas

Nilson Massakazu Ando. Secretaria Municipal de Saúde de Manaus (SEMSA). nilsonando@gmail.com

Jean Cláudio Colares Sales. Secretaria Municipal de Saúde de Borba (SMS). jeanclaudioc@hotmail.com

Luiz Antônio Dalama. Secretaria Municipal de Saúde de Manaus (SEMSA). luizdalama@hotmail.com

Maria Adriana Moreira. Secretaria Estadual de Saúde do Amazonas (SUSAM). adrianamoreira2005@yahoo.com.br

Antônio Evandro Melo de Oliveira. Secretaria Municipal de Saúde de Manaus (SEMSA). evandrooliveira52@gmail.com

Introduction: The distance is a critical factor in the Amazonas, limiting people's access to Primary Health Care centers, a challenge for public health in the development of Primary Health Care (PHC) in Amazon communities rural in the rivers. For the development of health in the riverine areas were adopted strategies that involve the use of a Basic Health Riverine Unit, using vessel adapted for outpatient use.

Objective: Describe the improvement in access to health of riverine populations, by implanting of Basic Health Riverine Units in the Amazon.

Methodology or experience description: Each Basic Health Riverine Unit contain medical and dental offices, procedure and vaccine rooms, pharmacy and laboratory. Has a multidisciplinary team of physicians, nurses, dentists, biochemical, social worker, nurse technicians, auxiliary oral health and pathology. It also has the support of Community Health Agents present in the communities served. Each Unit, in turn, performs, on average, 20 days of travel a month watching the riverine communities.

Results: With the development of the activities of Basic Health Riverine Units, we highlight the implementation and consolidation of actions in the area of women's health (prevention of cervical and breast cancer, family planning and prenatal care), child health, oral health, control hypertension and diabetes, eradication of leprosy and tuberculosis control in the assisted riverine communities. Also emphasize the continuity of actions and the implemented a system for the regulation of references. Currently, the municipalities of Borba and Manaus are noteworthy in the deployment and implementation of the Basic Health Riverine Units.

Conclusions or Hypothesis: Among the strategies adopted, the use of Basic Health Riverine Units has shown excellent results, enabling access to health in communities geographically isolated and solving, even partially, the problem of permanent staff in these areas. The continuity of actions is another plus, allowing the construction and monitoring of indicators related to health in rural riverine area of the Amazonas.

Palavras-chave: Primary Health Care. Basic Health Riverine Unit. Riverine Population.