

GARD activities 2016/17 in Brazil

Camargos P, Stelmach R, Cruz A.
GARD Country/GINainBrazil/ARIA Brazil

Burden of asthma and COPD

- Prevalence of asthma in children: 20-23,2% (ISAAC and PeNSE studies)
- Prevalence of asthma in adults: 13%
- Number of hospitalizations: 100,000/year (2016)
- Number of deaths due to asthma ≈ 3,000/year (Global Burden of Disease estimates, 2015)
- Prevalence of COPD (above 40 years old): 11-15%
- Hospitalizations from COPD: 150,000 admissions/year
- Number of deaths due to COPD: 70,000/year

Health care system

1. Asthma and COPD guidelines: launched by the MoH in 2010 (need urgent update)
2. COPD: protocols implemented at State/Province level
3. Essential medicines: beclomethasone-pMDI (1.3 million canisters dispensed in 2016) and albuterol-pMDI (7.0 million canisters dispensed in 2016), available for free across the country (“Farmácia Popular” Program lead by MoH); moreover ICS+LABA combination and tiotropium provided by some State/Province Health Authority
4. Home oxygen therapy: provided by some State/Province Health Authority
5. Asthma management Programs: managed and supported by several Municipal Health Authorities at Municipal level
6. Severe/difficult to treat asthma/severe-resistant to treatment asthma: a special program managed by several tertiary referral centers (Universities and other institutions) across the country
7. Spirometry: available only at referral institutions (not at primary health care facilities) across the country
8. Outreach Educational Programas: Collaborative Care (Matrix support) and Practical Approach to Care Kit (PACK)

Collaborations

- National organizations: ARIA-Brazil, GINainBrazil, Brazilian Society of Allergy and Immunology, Federal Universities (Bahia, São Paulo and Santa Catarina), Santa Catarina State/Province Health Authority, Respiratory Group of Brazilian Society of Family and Community Medicine (GRESF BRAZIL)
- International organizations: University of Cape Town Lung Institute; International Primary Care Respiratory Group (IPCRG)
- Private sector: funding from pharmaceutical companies to GARD/ARIA/GINABRAZIL initiatives

Interventions

Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013- 2020

- Social Media campaign through Facebook, Youtube and Instagram: Educational Videos, Posts and GIFs: “death for asthma never more”: almost 10 million interactions; (photo below)
- Outreach Educational Programas:
 - Collaborative Care (Matrix support): São Bernardo do Campo (right side photo)
 - Practical Approach to Care Kit (PACK adults): State/Province of Santa Catarina, southern Brazil (Florianópolis city)
 - Asthma and COPD training programs (figures below)

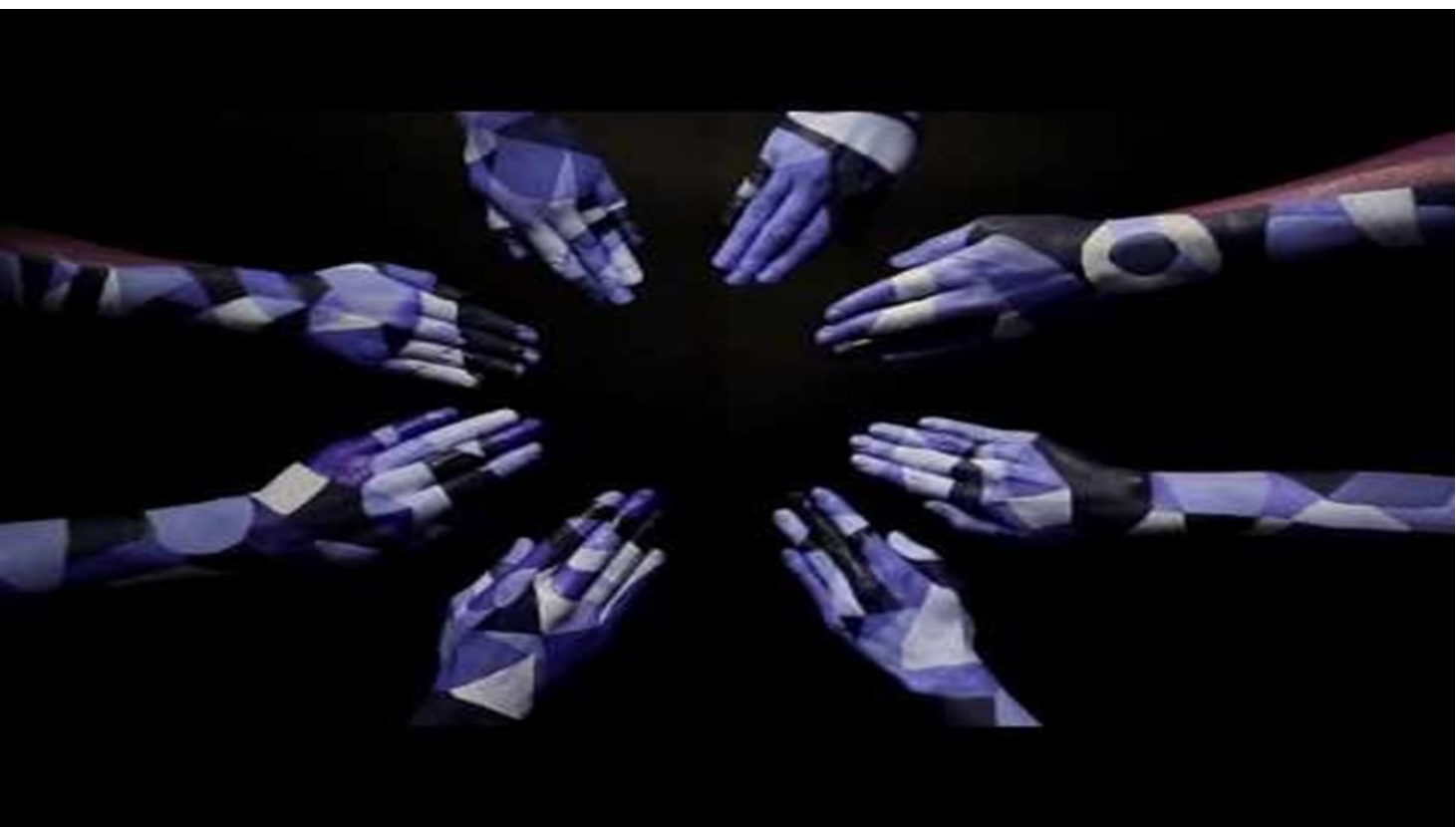


Cities&Heath staff trained – Outreach Education

year	City	Physicians	Nurses & Others	TOTAL
2015	Vale do Ribeira	45	59	104
2015	Americana Santa Barbara do Oeste	48 GPs 10 Pediatricians	61	129
2015	Uruguaiana (RGS)	38	82	120
2016	Sumaré	24 GPs 08 Pediatricians	31	63
2016	Goiania	30	60	90
	TOTAL	150	293	377

Interventions during the period 2017

- Facebook, Youtube and Instagram: Educational Videos, Posts and GIFs
 - Ongoing: focused “asthma is not a trick or a lie”; 15 million interactions
 - Facebook group: asthmatics in Brazil
- Practical Approach to Care Kit (PACK adults): RCT comparing Health Units in Florianopolis – with or without strategy educational tools (right side photo)
- Collaborative Care (Matrix support): Pindamonhangaba



#GINAnoBRASIL - In OUR HANDS - A great challenge (campaign) to avoid asthma deaths in Brazil

Results and future activities

GARD Brazil was launched on October, 2006, but till now, CRDs are modestly recognized as a public health problem by the Brazilian MoH. Progress has been made over the last 10 years but we need to improve CRD programmes in our country to reduce suffering from allergic rhinitis, asthma and COPD and other CRDs. Some initiatives of the MoH, e.g., “Farmácia Popular” Program, tobacco smoking ban in public spaces are in line with a CRDs program assumptions, but there is not a real organized plan at national level. Most of the existing initiatives on that were taken into account by State/Province and/or Municipal Health Authorities that received an integral and encouraging support from GARD/GINA/ARIA Brazil.

Challenges for the next few years are, as follows:

- Implementing and expanding PACK in the State of Santa Catarina, Southern Brazil, specially in Florianópolis city, the State’s Capital
- Launching the 2nd edition of the successful media campaign on “death for asthma never more”
- Looking for funding to develop a research protocol on the prevalence of wheezing/symptoms related to asthma among Brazilian pre-schoolers
- Encouraging/negotiating the expansion of the spirometry among Municipal and State Health Authorities
- Research programme proposed to NIHR-UK to prevent asthma exacerbations at primary health care level in Salvador, Bahia, waiting for funding (collaboration between scientists from UK and Brazil)
- “Breath Well”: Research programme proposed to NIHR&Birmingham University: COPD case finding and management project (collaboration between scientists from UK, Brazil, China, Georgia and Macedonia)
- Disseminate MASK app across the country (in collaboration with ARIA Brazil)
- Asthma Checkapp Trial: controlled trial project to validate an asthma management score (in preparation)

Results

- 66% reduction of asthma hospitalizations in the entire country in the past 10 years
- Tobacco smoking prevalence: reduced from 33% to 15% in the past 25 years
- Reduced proportion of underdiagnosis of asthma among adolescents (increase in the proportion of asthma diagnosis and reduction in prevalence of symptoms in the last year) (PENSE Study 2015 – in press).
- Increased 17,5% COPD diagnoses (Platino J Bras Pneumol.2014)

Conclusions

The main issue is to get the MoH openly and formally committed with GARD/GINA/ARIA activities and initiatives. For instance, Brazil urgently need a wide public health policy addressed to CRDs, where the role of National, State and Municipal Health Authorities would be clearly defined, as well the role of a broad spectrum of stakeholders. To achieve that goal, at least within the next few years, GARD/WHO should work closely to the Brazilian MoH.

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Pack - Training the trainers in Florianópolis



Colaborative Care (Matrix support) education



#GINAnoBRASIL – “asthma is not a trick or a lie”
Asthmatics in Brazil group