

Study of the *jornada da saúde* on COVID-19 and its repercussions in Guaratinguetá

RESUMO | Objetivo: Entender a situação da COVID-19 em Guaratinguetá e suas repercussões na saúde física e mental da população local. Método: Estudo quantitativo descritivo, com coleta de dados por meio de um questionário aplicado aos pacientes atendidos durante a Jornada da Saúde em Guaratinguetá, realizado em outubro de 2020. Resultados: 2% dos entrevistados responderam que tiveram COVID-19 e 44% relataram conhecer alguém que teve a infecção. 82% relataram concordar com as medidas de prevenção. 51% dos entrevistados responderam que se sentiram mais ansiosos ou deprimidos durante este mesmo período. Conclusão: as repercussões da pandemia não se restringem aos casos de infecção, destacando a necessidade de cuidado com a saúde física e mental da população, um grande desafio para o sistema de saúde brasileiro, com repercussões a longo prazo.

Descritores: COVID-19; Pandemia; Transtornos Somatoformes; Saúde Pública; Questionário.

ABSTRACT | Objective: To understand the situation of COVID-19 in Guaratinguetá and the repercussions of the pandemic in the local population's physical and mental health. Method: Quantitative descriptive study, with data collected by a questionnaire applied to patients attending the Jornada da Saúde in Guaratinguetá held in October 2020. Results: 2% of interviewed answered that they had COVID-19 and 44% reported knowing someone who had the infection, 82% reported agreeing with the preventive measures, 51% replied that they felt more anxious or depressed during this same period. Conclusion: the repercussions of the pandemic are not restricted to cases of infection, emphasizing the need to care for the physical and mental health of the population, a major challenge for the Brazilian health system, with long term repercussions.

Keywords: COVID-19; Pandemics; Somatoform Disorders; Public Health; Questionnaires

RESUMEN | Objetivo: Conocer la situación del COVID-19 en Guaratinguetá y su impacto en la salud física y mental de la población local. Método: Estudio descriptivo cuantitativo, con recolección de datos mediante cuestionario aplicado en pacientes atendidos durante la Jornada da Saúde en Guaratinguetá realizado en octubre de 2020. Resultados: 2% de los entrevistados ya habían tenido COVID-19 y 44% conocer a alguien que ya la había tenido. El 82% informó estar de acuerdo con las medidas de prevención para la misma y 51% respondió sentirse más ansioso o deprimido durante la pandemia. Conclusión: las repercusiones de la pandemia no se limitan a los casos de infección, destacando la necesidad de cuidar la salud física y mental de la población, un gran desafío para el sistema de salud brasileño, con repercusiones a largo plazo.

Palabras claves: COVID-19; Pandemia; Trastornos somatomorfos; Salud Pública; Cuestionarios.

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INTRODUCTION

With the beginning of the COVID-19 pandemic, in December 2019, the world population has been the target of alarming measures and indicators on issues that surround the theme. 1

In 2019, pneumonia of unknown etiology triggered several cases of respiratory syndrome in the city of Wuhan, China. In early 2020, the etiological agent was discovered, a new beta-coronavirus called SARS-COV-2, responsible for COVID-19. 1

Due to the ease of transmissibility and the population's ability to move between states and countries, the disease quickly spread to all continents, prompting the World Health Organization to declare a pandemic. 1 COVID-19 has high transmissibility and a

broad clinical spectrum, with 80% of cases being mild and 20% severe, with 5 to 10% being very severe, with respiratory failure. 2

In this context, it was declared a Public Health Emergency of international magnitude, constituting a pandemic from the month of March, due to the various outbreaks that occurred in several countries around the world. 3

We can list the main signs and symptoms most commonly observed, such as fever, dry cough and dyspnea. 4 Transmission occurs through droplets expelled by infected people when coughing, sneezing or talking and through direct or indirect contact with infected people or contaminated surfaces and objects. In addition to the aforementioned forms, we can also highlight transmission by aerosols such as saliva, through physical contact between people or contact between contaminated surfaces and objects. 5

The preventive forms currently are hand hygiene, the use of masks and social isolation, prophylaxis that are not new in Brazil. 6 On October 15th, 1918, an epidemic state was decreed in the capital of São Paulo, with measures similar to those currently implemented to control the Spanish flu. 7

Thus, the study aimed to understand the understanding of the population served on the preventive measures of COVID-19 and the repercussions of the pandemic on the physical and mental health of patients.

METHOD

This is a research with a descriptive quantitative approach, carried out in October 2020.8 A questionnaire prepared by the authors was applied to obtain information regarding COVID-19 in the population residing in Guaratinguetá through the IX Health Journey promoted by academics of the 8th semester of the Medicine Course at the University of Santo Amaro (UNISA). The study

Chart 1. Questionnaire about understanding of COVID-19, Guaratinguetá-2020. São Paulo-SP.

1- Have you ever had COVID-19?	Yes	No
2- Do you know someone who has had COVID-19?	Yes	No
3- Have you ever had contact with someone who had COVID-19?	Yes	No
4- Do you know someone who has passed away from COVID-19?	Yes	No
5- Do you think the preventive measures of COVID-19 are too radical? (example: wearing a mask, quarantine, social distancing)	Yes	No
6- In this period of quarantine, did you develop any symptoms that you didn't have before? (example: backache, stomachache, headache, ...)	Yes	No
7- Do you feel/felt anxious or depressed during this pandemic period?	Yes	No
8- Are you afraid of contaminating yourself by COVID-19?	Yes	No
Source: author,2020.		

sample consisted of 124 patients treated during the action, held between October 24 and 25, 2020 in the municipality of Guaratinguetá, making up the sample through people who were willing to participate voluntarily.

Patients received care from academics under the coordination of professors from the aforementioned university. The technique used for data collection was through the application of the questionnaire containing eight questions regarding Covid-19, presented in Table 1. The interviews took place individually in order to provide data on the situation of COVID-19 in the city, in addition to the population's understanding of the health measures implemented, as well as the presence of mental and physical symptoms since the beginning of the pandemic.

Patients were informed about the purpose of the study as well as the objective, guaranteeing anonymity and confidentiality and the possibility of interrupting their participation at any time without any kind of prejudice. After acceptance, they signed the Free and Informed Consent Term (FICT). Corroborating and respecting the pre-established norms, rules and guidelines of the Research Committee involving human beings, defined in Resolution 510/16 of the National Health Council - Ministry of Health,

9 this research was submitted to the Ethics Committee in Research with Human Beings of UNISA, approved under CAAE 38044520.3.0000.0081 and 36860320.3.0000.0081. As for the analysis, the data were presented through descriptive analysis, in table and chart.

RESULTS

In the present study, an interview was conducted with 124 patients. Results on patients who have had COVID, know someone who has had it, know someone who has died from SARS-CoV-2, and come into contact with someone in the active phase of infection as described in Table 1. Data collected on understanding preventive measures are displayed in table 1.

DISCUSSION

Guaratinguetá is a municipality in the interior of the state of São Paulo (SP). According to data from the Brazilian Institute of Geography and Statistics, the 2020 census estimates 122,505 inhabitants, with a population density of 148.91 inhab/km. 10 The municipal human development index is 0.798 (2010 data), infant mortality is 13.79 deaths per thousand live births (2017 census) and per capita GDP (also ac-

ording to the 2017 census) is BRL 43,828.48.

Regarding COVID-19, in the week of October 20th to 26th (period of the XI Jornada da Saúde), the moving average was 148 cured, 91 confirmed cases and 1 death. Regarding the general statistics of the city, on that date (update on October 22), 2,092 cases had been confirmed, with 53 deaths. Pedregulho (where the action was carried out) was the neighborhood with the most confirmed and suspected cases, with fourth position in relation to deaths.

The epidemiological bulletin of Guaratinguetá shows low levels of contamination when compared to other municipalities in Brazil and in the state of São Paulo. These data were similar to the results found in the first interview question, in which only 2% of patients responded that they had already had COVID.

However, the responses of the participants when asked if they knew someone who already had COVID-19, if they had contact with someone infected and if they knew someone who died from the disease showed significantly higher percentages, respectively, 44, 12 and 33%.

Considering Pedregulho as the neighborhood with the most confirmed cases, we can interpret that, despite the low number of cases, many of the patients treated in the action knew and even had direct or indirect contact with people who had the disease.

Social distancing is an effective measure to prevent COVID-19, however, it has clinical and behavioral repercussions, which can result in mental illness and changes in lifestyle, such as reduced physical activity, increased stress (family disharmony, affective conflicts and domestic violence), consumption of alcohol, tobacco and unhealthy foods.^{11,12}

In this way, we can correlate the consequences described with the data obtained in table 1, which shows that

Table 1 - Comparison regarding the understanding of COVID-19, São Paulo, 2021.

Questions	Yes	No
1- Have you ever had COVID-19?	33%	67%
2- Do you know someone who has had COVID-19?	18%	82%
3- Have you ever had contact with someone who had COVID-19?	12%	88%
4- Do you know someone who has passed away from COVID-19?	51%	49%
5- Do you think the preventive measures of COVID-19 are too radical? (example: wearing a mask, quarantine, social distancing)	61%	39%
6- In this period of quarantine, did you develop any symptoms that you didn't have before? (example: backache, stomachache, headache...)	12%	88%
7- Do you feel/felt anxious or depressed during this pandemic period?	51%	49%
8- Are you afraid of contaminating yourself by COVID-19?	61%	39%

Source: author,2020.

51% of respondents felt anxious or depressed during the pandemic. The study by Malta DC et al. 12 reinforces what was observed: the mood that prevailed among Brazilians (sample of 45,161 individuals) during the period was anxiety (41.3%) and sadness or depression (35.2%) many times. 12 According to Barros et al 13, 40.4% of the 45,000 Brazilians interviewed felt sad or depressed often or always during social distancing; 52.6% felt anxious or nervous always or almost always.

Vindegaard et al 14 found that mental health status among the world population has worsened during the COVID-19 pandemic compared to previous periods.

In addition, it noted that levels of anxiety, stress and depression did not change throughout the pandemic, that is, rates remained the same even after the number of recovered patients became greater than the number of confirmed cases.

Still in this review, 14 were established as risk factors for anxiety and depression in the pandemic: individuals who live alone, those who do not have children or have more than two

children, low or very high educational levels and female gender. High exposure to media information, less family support, previous history of illness (including psychiatric disorders) and changes in income pattern during the pandemic were also presented as risk factors in the general population. 14

The data that evaluated the population's understanding of COVID-19 prevention measures in Brazil were mostly from information vehicles, with few scientific studies on the subject. 15-16

Among the scientific studies that studied this aspect in the Brazilian population, the research by Bezerra et al. 17, in April 2020, concluded that most people believed in the importance of social isolation as a COVID-19 prevention strategy. At the time, 61% of respondents (sample of 16,440) said they would be willing to remain in isolation for as long as necessary to face the pandemic.

However, the research already highlighted the saturation trend over time. We are currently observing this situation, with the decrease in adherence to social isolation and greater movement of people. In addition, the study

17 reported that the perception of COVID prevention measures varied considerably according to income, schooling, age and gender. It was observed that people with worse housing conditions would be less willing to spend more time at home. A study carried out in March, 18,19 in Ceará, found similar results, with understandings that varied considerably in the population studied, depending on these same factors.

In our interview, only 18% of patients believed that COVID-19 preventive measures were too extreme. Considering that data collection was carried out in October, about seven months after the start of the quarantine, we can consider that the population studied had a good understanding of the need to prevent the new coronavirus.

When comparing our results with the literature, we can conclude that the population was willing to isolate, even

months after its onset.

In the literature we find reports on the psychological repercussions of the pandemic, always emphasizing aspects of anxiety and depression. On the other hand, there is a paucity of data on physical manifestations that could be related to psychosomatic effects. In our interview, 12% of patients reported having had some physical symptoms during the period.

Considering a sample of 124 people, a percentage of 12% is relevant. Thus, we can highlight the importance of better evaluating, in future studies, the somatic and psychosomatic symptoms developed during the period of quarantine and social distancing.

CONCLUSION

The study showed that, in the municipality of Guaratinguetá, there was

a lower rate of infection by COVID-19 than in other cities in the country. There can be several interpretations for the fact, among them, we can highlight a good understanding of the population about the need and importance of preventive measures imposed in the country to contain the advance of the pandemic.

Despite this, an increase in psychosomatic symptoms has been observed since the beginning of social distancing measures. This highlights that the repercussions of the pandemic for Public Health are not restricted to cases of infection by COVID-19, highlighting the need to take care of the physical and mental health of the population. This constitutes a major challenge for the Brazilian health system, causing long-term repercussions.

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