

Abstracts of the Medical Academical Conference of Piauí (COMAPI) 2021

Poster Session

CASE REPORTS AND EXPERIENCE REPORTS

01. REFLECTIONS OF THE COVID-19 PANDEMIC: A COMPARATIVE ANALYSIS OF THE NUMBER OF TUBERCULOSIS CASES NOTIFIED IN THE STATE OF PIAUÍ IN THE FIFTHDAYS OF 2016 to 2020

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INTRODUCTION: Tuberculosis (TB) is an infectious disease caused by *Mycobacterium tuberculosis*. TB is a relevant public health problem worldwide. In 2020, Brazil registered 66,819 new cases of TB, being one of the endemic diseases with the highest incidence in the country. In this context, considering the COVID-19 pandemic, it is relevant to analyze the number of notifications of the disease in Piauí.

OBJECTIVES: To perform a comparative analysis of the fluctuation in the number of tuberculosis notifications after the onset of the COVID-19 pandemic. **METHODS:** The present work is an analytical-comparative study, with a quantitative focus on the analysis of confirmed cases of Tuberculosis in Piauí. Data were obtained from the DATASUS Information System for Notifiable Diseases database, with a time frame considering the years 2016 to 2020. **RESULTS:** The survey revealed that Piauí had 761 cases in 2016; 756 cases in 2017; 842 cases in 2018; 832 cases in 2019, and 729 cases of Tuberculosis in 2020. Comparing the years 2016 to 2019, it was found that there was an upward trend in the number of registered TB cases in the state until the year 2019. However, comparing -if 2019 is the year 2020, it appears that this trend has not been maintained, as there was a significant decrease in the number of notifications of the disease in Piauí. The city of Teresina registered 439 cases in 2016; 357 cases in 2017; 395 cases in 2018; 415 cases in 2019; and 338 cases in 2020. Therefore, in the state capital, there was initially a decrease in the number of confirmed TB cases reported in the period 2016 to 2017, followed by an increase between the years 2018 to 2019. However, there was a sharp decrease in notifications in 2020, the year in which the COVID-19 pandemic spread. **CONCLUSION:** Confirming a trend in the Americas, it was found that in 2020 there was a reduction in the number of notifications of Tuberculosis cases compared to 2018 and 2019. As this was the year in which the COVID-19 pandemic spread throughout the world, such panorama may have hampered the diagnosis of new cases of the disease in Piauí, a situation that puts progress in combating the transmission of the disease in the state at risk.

02. EVALUATION OF THE QUALITY OF PRENATAL CARE IN PRIMARY HEALTH CARE IN THE CITY OF BURITI DOS LOPES/PI

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INTRODUCTION: Prenatal care is a tool that makes it possible for pregnant women to protect themselves from most pregnancy problems. **OBJECTIVES:** To evaluate the quality of prenatal care provided in primary health care in the town of Buriti dos Lopes/PI. **METHODS:** Descriptive and documentary study with a quantitative approach. Data collection took place in the period from November 2020 in medical records that were made available, from pregnant women assisted from December/2019 to October/2020. The data collection instrument followed the quality indicators based on the 4th level of complexity suggested by Anversa, *et al* (2012) and the Ministry of Health. A descriptive analysis of the data was carried out in the Statistical Package for the Social Sciences (SPSS) Program. The project was authorized with the protocol number: 4,372,734. **RESULTS:** 43 (100%) pregnant women aged between 15 and 36 years old participated in this study. Of these, 60.4% started prenatal care in the 1st quarter and 39.6% in the 2nd quarter. Regarding consultations, the average was 1 to 3 appointments in all quarters. As for the mode of delivery, 55.8% were normal and 16.3% cesarean. All pregnant women (100%) were offered vaccination, vitamin supplementation, in addition to requesting laboratory and imaging tests. The average number of home visits during prenatal care was 2 to 7 visits and all who gave birth (31 pregnant women) received a puerperal visit. There were no puerperal or neonatal complications. **CONCLUSION:** The assistance offered in the Family Health Strategy achieved a good performance when meeting the minimum criteria established by the Ministry of Health for quality and safety in prenatal care.

03. CLINICAL-EPIDEMIOLOGICAL PROFILE OF NEWBORN CHILDREN SUBMITTED TO LAPAROTOMY BY ACUTE ABDOMEN AND CORRELATION WITH THE LITTLE LEG TEST SUGGESTIVE OF CYSTIC FIBROSIS IN MATERNITY OF TERESINA-PI

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INTRODUCTION: Cystic Fibrosis (CF) is an autosomal recessive, chronic and progressive disease that induces the body to produce thick secretions. CF involves multiple organs, especially the gastrointestinal and pulmonary systems, in addition to causing high levels of chloride in sweat. Meconial ileum (MI) is the earliest clinical manifestation of CF patients and occurs in 10 to 20% of cases. Ileal obstruction may appear in intrauterine life with polyhydramnios, meconium peritonitis, and ileal distension, as evidenced by prenatal USG. After birth, it manifests as the absence of fecal elimination in the first 48 hours of life, accompanied by abdominal distension and vomiting, thus considering an obstructive acute abdomen. It is known that confirmation of CF can be difficult during the first days of life, but in the presence of MI, this differential diagnosis must necessarily be considered. **OBJECTIVES:** To analyze the clinical-epidemiological profile of neonates who underwent exploratory laparotomy (LE) for the treatment of acute abdomen (AA) and its correlation with HR with MI. **METHODS:** From July 2018 to July 2020, 56 patients diagnosed with AA who underwent LE in a reference maternity hospital in Teresina-PI were analyzed retrospectively. The study was previously approved by the ethics committee of Uninovafapi, opinion n. 4,244,574. **RESULTS:** It was observed that the average age of pregnant women was 25.5 years, 25% of which did not have prenatal care. At delivery, 75% progressed to cesarean delivery, with an average of 33S and 6D GA. The mean apgar was 6 on the 1 and 9 on the 5 and most evolved with abdominal distension, vomiting and absence of bowel movements. After performing the LE, 50% progressed to death, the main cause being early neonatal sepsis (53.5%), followed by pulmonary hemorrhage (28.5%). Was there a prevalence of 12.5? positivity of the immunoreactive trypsinogen of the heel prick test (PT), characterizing suspicion of CF, but not diagnosed, due to its low specificity. Among the LE, 16 ileostomies were performed, 5 by IM. **CONCLUSION:** It was observed that patients with clinical aspects of MI during surgery presented changes in PT. The high prevalence (12.5%) associated with clinical findings lead us to confirm the suspicion of MI due to CF. However, advances are needed in terms of early diagnosis in the pre- and postnatal period, in order to improve the management and evolution of these cases.

04. SCREENING OF UTERUS CANCER IN PIAUÍ: EPIDEMIOLOGICAL ANALYSIS

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INTRODUCTION: Cervical cancer is an important public health problem. In Brazil, mortality rates from cervical cancer remain high, being considered the 3rd type of cancer with the highest incidence

among women, a reality that is aggravated in the state of Piauí, where it ranks 2nd in cancer prevalence in women. **OBJECTIVES:** To verify the prevalence of cervical cancer and the epidemiological profile in the state of Piauí. **METHODOLOGY:** This is an epidemiological, exploratory, descriptive study with a quantitative approach. The database used was the Cervical Cancer Information System (SISCOLO), made available by the Information Technology Department of the Unified Health System (DATASUS), from 2016 to 2020. The following were analyzed: age group, municipality of residence, year competence, reason for the examination and cellular alterations detected in the cytopathological exam, determining the prevalence. The data used in the preparation of this research are freely accessible, which justifies the absence of the opinion of the Research Ethics Committee. **RESULTS:** Between 2016 and 2020, 167,541 cytopathological tests were registered in the state of Piauí. Of these, the year with the highest prevalence was 2019 with 77,705 exams. The age group was concentrated from 35 to 39 years old, with 22,084 cases (13.1%), followed by 30 to 34 years old, with 21,017 cases (12.5%). 88,196 cases (52.8%) resided in the city of Teresina, followed by Parnaíba with 15,496 cases (9.2%). As for the reasons for the consultation, 167,005 cases (99.6%) for screening, 412 cases (0.24%) for follow-up and 373 cases (0.22%) for repetition. Furthermore, in the cytological reports, the negative result was found in 160,809 cases (95.9%), Squamous or squamous cell abnormalities were portrayed in two ways: ASC-US (Atypical squamous cells of uncertain significance) in 2,778 cases (1.65%) and ASC-H (atypical squamous cell cells in which high-grade squamous cell intraepithelial lesion cannot be excluded) in 696 cases (0.41%). In squamous cell intraepithelial lesions, the following were found: low-grade intraepithelial squamous cell lesion (CIN1) in 153 cases (0.09%), followed by high-grade intraepithelial lesion (CIN 2 and CIN 3) in 459 cases (0.27%). Invasive squamous cell carcinoma was observed in 28 cases (0.016%), presence of atypical glandular cells of indeterminate significance possibly non-neoplastic in 168 cases (0.10%) and adenocarcinoma in situ in 2 cases (0.001%) **CONCLUSION:** Cervical precancers are diagnosed more often than invasive cervical cancer, and mortality rates have been reduced with screening. The findings of this study contribute to the situational diagnosis, helping health managers in planning primary prevention and early detection activities, in an attempt to minimize the mortality rates attributed to this pathology in the state of Piauí.

05. EPIDEMIOLOGICAL OVERVIEW OF MALARIA IN THE STATE OF PIAUÍ

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INTRODUCTION: Malaria is an infectious and parasitic disease, currently more frequent in developing regions, caused by parasites of the Plasmodium genus, transmitted by mosquitoes of the Anopheles genus or popularly known as the capuchin mosquito. The state of Piauí borders the Amazon region, however it is not endemic for malaria. **OBJECTIVES:** Determine the epidemiological situation of malaria in the state of Piauí. **METHODS:** This is a descriptive, exploratory epidemiological study with a quantitative approach. The database used was the Notifiable Diseases Information System (SINAN), made available by the Information Technology Department of the Unified Health System (DATASUS), between the years 2016 to 2021. The following were analyzed: year, municipality of notification, race, sex, age group and parasitological result. The data used in the

preparation of this research are freely accessible, which justifies the absence of the opinion of the Research Ethics Committee. **RESULTS:** Between 2016 and 2021, 61 cases were confirmed in the notification information system – Piauí. Of these, the year with the highest notification was 2019. Of the profile characteristics listed by the study on the occurrence of malaria in the state of Piauí, it points out that the most frequent cases were male (88.52%), of mixed race. (62.29%), confirmed *Plasmodium vivax* in (81.96%). As for the notification cities, the cities of Teresina and Luzilândia correspond to 65.57% of the total notifications in the state, and the most prevalent age group was between 20 and 59 years old (90.16%). **CONCLUSION:** It is concluded that the prevalence of notifications occurred in the year 2019, in which the cities of Teresina and Luzilândia had the highest number. Predominantly male, brown, and aged between 20 to 59 years, with parasitological result referring to the species *P. Vivax*. The study results contribute to the situational diagnosis and can help health managers on the planning and reformulation of prevention and treatment strategies for Malaria.

06. PERSISTENCE OF THE ONFALOMESENTERIC CONDUIT ASSOCIATED WITH ONFALITE

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INTRODUCTION: In the period of embryonic development, some failures in the absorption of the ophallus duct may favor the installation of onfalitis (Moore et al., 2016). The ofalomesenteric duct is a vitellinic duct that promotes communication of the primitive intestine with the calf sac and the persistence of the ofalomesenteric conduit (COM) results from the non-involution of the ofalomesenteric duct and results in persistent tubular fixation between the ileum and the abdominal wall. Definitive treatment is always surgical, but depending on the presence of infection (severe or not) it can be necessary to drain the site and antibiotic therapy preceding the surgical procedure. **CASE REPORT:** Term NB, 39 weeks, birth weight of 3552g, with 20 days of life, referred from another service due to onfalitis associated with the protrusion of structures by umbilical scar, was diagnosed with possible persistence of ofalomesenteric duct, performing abdominal USG and exploitative laparotomy that was performed on the 22nd day of life, having as surgical finding the persistence of the ofalomesenteric conduit. After the surgical procedure, NB evolved without complications. **FINAL CONSIDERATIONS:** In this case, it was evidenced the permanence of the COM, and the presence of an onfalitis that is common in neonates and infants and is the main cause of umbilical discharge in the NB. Early diagnosis and treatment are essential to avoid complications such as Meckel's diverticulitis.

07. HOSPITALIZATIONS AND CHILD DEATHS DUE TO CONDUCTION DISORDERS AND CARDIAC ARRHYTHMIA IN PIAUI FROM 2015 TO 2020

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INTRODUCTION: Conduction disorders and cardiac arrhythmias (CDCA) are abnormalities in the conduction of nerve impulses responsible for myocardial contractions. They can cause dysrhythmia, tachycardia, bradycardia, and are responsible for approximately 10% of deaths among children up to 9 years old suffering from circulatory system problems in Piauí, Brazil. **OBJECTIVES:** To characterize the epidemiological profile of children up to 9 years old hospitalized due to CDCA, in Piauí, between 2015 and 2020. The parameters analyzed were: sex, age group, race, the mean length of stay, mortality rate, health macro-region, and year of admission. **METHODS:** A quantitative and descriptive epidemiological study based on data obtained by consulting the Hospital Morbidity Information System (SIH-SUS), available in the DATASUS system. **RESULTS:** Thirty-five hospitalizations of children up to 9 years of age due to CDCA were recorded in Piauí during the period analyzed. The most affected age group was up to 1 year of age (40%), followed by 1 to 4 years of age (37%) and 5 to 9 years of age (22.8%). The majority of hospitalizations were female children (57.1%). Only 16 cases had their race specified in the medical records, limiting the study, with the majority of those recorded as mixed race (45.7%). The mean length of stay was 4.3 days, and the mean length of stay for females (5.7) was more than twice as long as the mean length of stay for males (2.5). Of the 35 children admitted to the hospital, 5 of those had died, resulting in a mortality rate of 14.3%. This rate was 15% for females and 13% for males. The health macro-region with the highest number of hospitalizations was the Mid-North (37.1%), followed by the Cerrado (31.4%), the Semiárid (17.1%), and the Coastal region (14.3%). Besides, the year 2017 had the highest number of hospitalizations (25.7%), and 2020 had the highest mortality rate (40%). **CONCLUSION:** The data analyzed show an epidemiological profile of children hospitalized for CDCA in Piauí between 2015 and 2020, most of them female, of mixed race and age group up to 1 year old. There was a predominance of cases in the Mid-North macro-region, where most of the state's population is concentrated. Besides the higher number of hospitalizations, females had a longer mean length of stay in the hospital and a higher mortality rate, so future research on this topic may be pertinent.

08. VIRAL MENINGITIS AMONG CHILDREN IN THE NORTHEAST REGION: HOSPITALIZATIONS AND MORTALITY RATE FROM 2015 TO 2019

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INTRODUCTION: Viral meningitis is inflammation of the meninges, the membranes surrounding the brain and spinal cord. The contamination can be caused by Enteroviruses, mainly through fecal-oral and close contact, or by Arboviruses, through the bite of contaminated mosquitoes. It is a syndrome characterized by fever, neck stiffness, and nausea. The viral form is less severe but represents 48.5% of hospitalizations among children up to 9 years old in the Northeast Region due to meningitis. **OBJECTIVES:** To analyze the

epidemiological profile of children up to 9 years old hospitalized in the Northeast region due to viral meningitis between 2015 and 2019. The criteria evaluated were: sex, age, race, federative unit, mean length of stay, and mortality rate. **METHODS:** A quantitative and descriptive epidemiological study based on data obtained by consulting the Hospital Morbidity Information System (SIH-SUS), available in the DATASUS system. **RESULTS:** During the period analyzed, 1,458 children up to 9 years of age were hospitalized due to viral meningitis in the Northeast region, accounting for 20% of the country's hospitalizations. The most affected age group was 5 to 9 years of age (40.3%), followed by 1 to 4 years of age (36.3%) and children under one year of age (23.4%). There were more hospitalizations among male children (61.4%). Considering that race/skin color was not specified in 48.1% of the medical records, there was a predominance of mixed-race children (44.1%) requiring medical care. The federative unit with the highest number of hospitalizations during the studied period was Pernambuco (49.4%), followed by Bahia (17.6%). The mean length of hospital stay was similar between females and males, being 6.9 and 6.6, respectively, and was higher among children under 1 year of age. Twenty-five of the hospitalized children died, revealing a mortality rate of 1.71%, of which 1.42% were female and 1.9% male. This rate is higher among patients under 1 year of age (2.35%) and whose skin color is yellow (2.27%). Besides, 2018 recorded the highest mortality rate (4.15%), followed by 2019 (1.66%). **CONCLUSION:** The research showed an epidemiological profile of children hospitalized due to viral meningitis in the Northeast region, between 2015 and 2019, predominantly male, of mixed race, aged 5 to 9 years old, and in the state of Pernambuco, due to its larger population. The viral meningitis mortality rate and mean length of hospital stay were higher in children younger than 1 year of age, thus raising concern for the age group.

09. IMPACT OF THE COVID-19 PANDEMIC ON AIDS DIAGNOSIS IN BRAZIL: AN EPIDEMIOLOGICAL ANALYSIS

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INTRODUCTION: The Acquired Immunodeficiency Syndrome (AIDS) is a disease caused by the Human Immunodeficiency Virus (HIV), causing chronic and progressive immune dysfunction due to the decline in the levels of CD4 lymphocytes. The earlier the diagnosis of this disease is made, the greater the patient's quality and life expectancy. **OBJECTIVES:** To quantitatively analyze the impact of the COVID-19 pandemic on the diagnosis of AIDS in Brazil. **METHODS:** This is an epidemiological, quantitative, descriptive and cross-sectional study with secondary data obtained from the Notifiable Diseases Information System (NDIS) available on the DATASUS platform. The numbers were worked from the comparison of the average of annual diagnoses in Brazil in the period of 2015 and 2019 with the year 2020, the first year of the COVID-19 pandemic. Data analysis was performed using the Microsoft Excel program. **RESULTS:** There was a significant decrease in the total number of AIDS diagnoses in Brazil and in all its regions compared to the period prior to the pandemic, in which numbers were regular. There was a 69.4% drop in total diagnoses in 2020 compared to the average for the period among 2015 and 2019, from 38,861 to 11,880 diagnoses. The Northeast region showed the greatest percentage drop (70.6%),

followed by the South (70.5%), Southeast (69.5%), North (68.5%) and Central-West (63.7%) regions). There was also a significant drop in all federative units in Brazil. Maranhão presented the biggest drop in this parameter (77.8%), followed by Acre (75.9%), Pará (74.4%) and Rio de Janeiro (73.5%). **CONCLUSION:** There was a significant reduction in the total number of AIDS diagnoses throughout Brazil in the year 2020 compared to the average for the period among 2015 and 2019. This data highlights the strong impact of the COVID-19 pandemic in the identification of AIDS cases in Brazil.

10. EPIDEMIOLOGICAL PROFILE OF HOSPITALIZATIONS FOR MALNUTRITION IN PIAUÍ FROM 2016 TO 2020

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INTRODUCTION: Malnutrition or subnutrition is a clinical condition characterized by the compromised supply of one or more essential nutrients or by the inadequate physiological use of the consumed foods. Protein-calorie malnutrition contributes to increased mortality and vulnerability to infections, besides the decreasing quality of life. In most cases, this situation originates from socioeconomic factors, ranging from children to the elderly. **OBJECTIVES:** To characterize the epidemiological profile of hospitalizations for malnutrition in Piauí from 2016 to 2020 in terms of gender, age and race/color. **METHODS:** This is a descriptive epidemiological study with secondary data obtained from the Hospital Information System (SIH/SUS), in the Hospital Morbidity category, available in DATASUS system. The sample of this study consisted of all data on admissions due to malnutrition in the State of Piauí among 2016 and 2020, taking into account the place of residence of these patients. **RESULTS:** During the analyzed period, there was a total of 2,172 hospitalizations for malnutrition in the State of Piauí. Of these, 49.03% (1,065) were male and 50.97% (1,107) were female. Regarding age, there was a higher prevalence in the age group of 80 years or more (15.75%), followed by the age groups from 70 to 79 years (15.61%), 60 to 69 years (12.61%) and 50 to 59 years (11.88%). As for race/color, only 1,163 (53.54%) had this information registered, and in this group there was a higher prevalence of brown people (77.39%), followed by yellow people (13.16%), white (4.9%), black (4.47%) and indigenous (0.08%). **CONCLUSION:** The data analyzed reveal a negligible difference between males and females in the number of hospitalizations for malnutrition in the state of Piauí among 2016 and 2020. The age groups most affected by this condition include people aged 50 or over, accounting for more than 50% of admissions in the period. As for race/color, the high underreporting of this information stands out, which was no longer registered in almost half of the admissions. Among people who had this information registered, there was a large predominance of browns, with more than three quarters of admissions.

11. EPIDEMIOLOGICAL ANALYSIS OF CONGENITAL SYPHILIS CASES IN NORTHEASTERN BRAZIL FROM 2010 TO 2020.

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INTRODUCTION: Syphilis is a systemic infectious disease with chronic evolution. Congenital syphilis is an infection of the fetus by

Treponema pallidum, transmitted by the placenta, at any time of pregnancy or clinical stage of the disease in an untreated or inadequately treated pregnant woman. This type of syphilis is estimated to be a complicating factor in about 1 million pregnancies each year worldwide. Contamination of the fetus can lead to abortion, fetal death and neonatal death in infected fetuses or the birth of children with syphilis. **OBJECTIVES:** The objective was to analyze the epidemiological profile of congenital syphilis cases in the Northeast region, from 2010 to 2020, in pregnant women aged between 10 and 40 years or more. **METHODS:** This is an epidemiological, cross-sectional and descriptive study with a search in secondary databases. Data collection was performed through the Notifiable Diseases Information System (SINAN) at DATASUS. Initially, the Northeast region was selected, with a filter for the year, age group and maternal education, prenatal care, treatment regimen and final diagnosis in the period from 2010 to 2020. **RESULTS:** 54,324 cases of congenital syphilis were observed in children under one year of age during the period evaluated. Among these ones, there was a greater predominance in 2018, with 7,849 affected and a smaller one in 2010, with 2,313 notifications. Against this, there is a prevalence of the maternal age group from 20 to 29 years old, with 28,231 notifications (52%); in which 34,816 women are illiterate/have not completed high school (64%); 7,772 women did not receive prenatal care (15.4%); 46,237 carried out the treatment in appropriately or did not do it (96.1%); as for the final diagnosis, there was a predominance of 50,630 with recent congenital syphilis (93%), 2074 stillbirths due to syphilis (3.8%), 1683 abortions due to syphilis (3%), and 109 with late congenital syphilis (0.2%). **CONCLUSION:** Thus, the impact and increase in congenital syphilis cases in the Northeast region in the last 10 years is notorious. According to this, it can be proved that, in fact, the lack of information and adequate assistance for prenatal care and the treatment of syphilis, especially among young people, associated with the low levels of education of the population are risk factors that contribute to the growth of these numbers, evidenced by the exacerbated rates of newborns with recent congenital syphilis, stillbirths and miscarriages.

12. ANALYSIS OF THE RELATIONSHIP BETWEEN NEWBORNS WITH MICROCEPHALY AND RASH DURING PREGNANCY IN PIAUÍ FROM 2015 TO 2020

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INTRODUCTION: In Brazil, in 2015, there was a considerable increase in cases of microcephaly related to Zika virus. Among the symptoms of this infection, headache, rash, edema and arthralgia stand out, and its diagnosis is difficult due to symptoms similar to dengue fever and chikungunya fever. In the case of suspicion in pregnant women, it is essential that they be tested for adequate follow-up due to possible neurological complications in the child. **OBJECTIVE:** To assess the relationship between the presentation of rash during pregnancy and newborns with microcephaly in Piauí between 2015 and 2020. **METHODS:** This is a descriptive epidemiological study in which information was extracted from the database of Notification of Suspicious Cases of Congenital Zika Virus Syndrome made available by DATA-SUS/e-SUS, with public domain database. The variable analyzed was the presence or absence of rash, specifying the trimester of pregnancy in which the manifestation occurred, if considered present. **RESULTS:** 325 cases of microcephaly were

reported in Piauí and 2016 was responsible for 56.6% of these. Of the microcephaly notifications, in 23.69% of the cases the mothers had a rash during pregnancy, 50.4% of the mothers had no rash and in 24.9% such information was ignored or not informed. Of the cases in which the rash occurred, 70.1% manifested in the 1st trimester of pregnancy, 18.18% in the 2nd trimester, 5.1% in the 3rd trimester and 10.3% of the mothers were unable to specify the period in which the rash has set in. From 2015 to 2020 there was a 95% reduction in newborns notified with microcephaly. **CONCLUSION:** There was rash during pregnancy in 23.69% of mothers of children with microcephaly, possibly due to the cutaneous manifestation of Zika virus infection. It is important to highlight the numerous times that this information was ignored or not reported, which hinders data analysis. More than half of mothers who had children with microcephaly did not have a rash during pregnancy, which does not exclude the possibility of Zika virus infection, as there are other symptoms such as headache and arthralgia. In cases where there was a rash, most occurred in the 1st trimester of pregnancy, which may indicate greater susceptibility of mothers to infection in early pregnancy. The reduction in cases may have occurred due to campaigns to encourage the use of repellents by pregnant women and other preventive measures against the mosquito.

13. FEMALE GENITAL PROLAPSE: ANALYSIS OF THE PROFILE OF HOSPITALIZATIONS IN THE STATE OF PIAUÍ BETWEEN 2015 AND 2019

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INTRODUCTION: Genital prolapse is the descent of pelvic structures which can be the vaginal walls, uterus and vaginal vault in patients who underwent hysterectomy. Some risk factors are: vaginal delivery, especially in mothers over 40 years old, use of forceps and multiparity. This morbidity negatively affects women's quality of life and sometimes manifests itself in association with urinary disorders. The diagnosis can be made on clinical examination using the Valsalva maneuver and clinical or surgical treatment, depending on the prolapse staging and the woman's general symptoms. **OBJECTIVE:** To analyze the profile of hospitalizations for female genital prolapse in Piauí between 2015 and 2019. **METHODS:** Descriptive epidemiological study, whose data were obtained through the database on Hospital Morbidity provided by DATA-SUS/e-SUS, with public domain bank. The variables age group, character of care and hospital expenses of patients hospitalized for female genital prolapse in Piauí during the considered period of time were considered. From the results, graphs were constructed in Microsoft Excel. **RESULTS:** There were 3589 hospitalizations for female genital prolapse in Piauí, corresponding to 0.64% of the causes of hospitalizations in women aged 10 years and over. With regard to age group, 10.6% occurred with women aged 10 to 29 years, 35.76% between 30 and 49, 37.9% between 50 and 69 and 15.9% aged 70 or over. As for the nature of care, 86.06% were elective and 13.93% urgent. Regarding hospital expenses, out of the total invested in women aged 10 and over, 0.33% were due to genital prolapse. **CONCLUSION:** Although the condition occurs more frequently in women of advanced age, there were records between 10 and 14 years old, which may be due to a mistaken diagnosis. The greatest number of hospitalizations was concentrated between 30 and 69 years old, which can be explained by the increase in the frequency of female genital prolapse with aging. Most

admissions were elective, probably because the surgery does not trigger, in most cases, severe acute complications. Regarding hospital expenses, it is necessary to understand that adequate training is necessary for the correct management of patients, in order to avoid unnecessary procedures and reduce wasted resources.

14. HOSPITAL MORBIDITY OF TUBERCULOSIS IN BRAZIL: AN EPIDEMIOLOGICAL ANALYSIS

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INTRODUCTION: Tuberculosis (TB) is one of the most lethal infectious diseases in the world, remaining one of the main health problems to be faced. The severe forms of the disease are associated with chronic post-infectious sequelae, loss of organic function and are responsible for approximately 1.5 million deaths annually. **OBJECTIVES:** To determine the prevalence of hospital morbidity and epidemiological profile among people diagnosed with Tuberculosis notified in the state of Piauí from 2016 to 2021. **METHODS:** This is a descriptive epidemiological study with a quantitative approach. The database used was the Notifiable Diseases Information System (SINAN), provided by the Informatics Department of the Unified Health System (DATASUS). We analyzed: age group, sex, year of notification and municipality of notification. The data used in the preparation of this research are freely accessible, which justifies the absence of the opinion of the Research Ethics Committee. **RESULTS:** Between 2016 and 2021 there were 411 cases of hospitalizations for Tuberculosis in Piauí state, 290 which were male, corresponding to 70.5% of the cases. Among these, 133 admissions (32.36%) were made in Teresina, with 10 deaths. As for the age group, most were concentrated in the 40- and 59-year age group, with 303 cases (39.9%), followed by people between 20 and 39 years, with 297 cases (39.1%). In addition, most of the cases registered in recent years were concentrated in 2017, with a prevalent age group between 30 and 39 years old. As for the clinical outcome, the mortality rate increased from 6.67% in 2016 to 14.29% in July 2021, totaling 40 deaths, reaching the male population aged between 75 and 79 years. **CONCLUSION:** During the analyzed period, there was an increase in the in-hospital mortality rate, with the main risk factors being age between 75 and 79 years, with a predominance of males. It is interesting to note that the prevalence of deaths occurred in 2017, however it was not possible to establish a pattern growth in the absolute rate of deaths. Thus, the disclosure of data in this study contributes to the situational diagnosis and can help health managers and workers in the planning and reformulation of prevention and treatment strategies to reduce the incidence of tuberculosis in Piauí.

15. EPIDEMIOLOGIC PROFILE OF OBESITY DEATHS IN PIAUÍ BETWEEN THE YEARS OF 1996 AND 2019

Mariana Fonseca Mendes Soares¹, Francisco Aldo Rodrigues Júnior², Francisco Yves Gadelha Pitombeira³ and Marcela Fonseca Mendes Soares².

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INTRODUCTION: Obesity is part of the Non-Communicable Chronic Diseases (NCCD) axis; that being diseases that constitute the biggest cause of death in the world. Its cause is multifactorial, depending on

the interaction between genetic, metabolic, social, behavioural and cultural factors. It's needed, for scientific purposes, the acquirement of epidemiologic profiles on obesity deaths. **OBJECTIVES:** To map the epidemiologic profile of obesity deaths in Piauí between the years of 1996 and 2019. **METHODS:** The research was done through the data platform TABNET from Unified Health System Database - DATASUS, by sorting the "deaths by preventable causes from 5 to 74 years old" subgroup and geographic coverage in Piauí. The items "row" and "content" were respectively set in "CID-10 category" and "occurrence deaths". The "column", on the other hand, alternated between the variables "sex", "age range", "education" and "marital status"; and the "available time frames" varied from 1996 to 2019. The gathering was restricted to the E66 results. **RESULTS:** Between 1996 and 2019, there were 210 deaths by obesity in Piauí. It was noticed a growing rise over the 24 assessed years. Splitting into two-time frames of 12 years each, there were 53 obesity deaths in the first half (1996 to 2007), while in the second half (2007 to 2019) the total number more than tripled, reaching 162. With regard to sex, the mortality difference was insignificant: 47.1% on males and 52.85% on females. Regarding the age frame, the ones who died the most from obesity were between 40 and 69 years old (67.1%), while the age extremes had smaller participation. About education, the dominance was zero years of schooling (27.6%). In relation to marital status, a substantial portion (42.5%) was married, followed by bachelors (27.6%). **CONCLUSION:** There was an exponential growth in the number of deaths from obesity along the years on Piauí, reinforcing the modern lifestyle influence, tending to sedentarism and poor diet in this disease. The most frequent age frame and marital status reflect an economically active population, which reinforces the interference of a busy routine and weaker healthcare. The prevailing schooling was of zero years, which speaks for how socioeconomic characteristics interfere with the access to appropriate health assistance.

16. EPIDEMIOLOGIC PROFILE OF SELF POISONING DEATHS CAUSED BY THE INTENTIONAL USE OF SUBSTANCES IN PIAUÍ BETWEEN 2015 AND 2019

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INTRODUCTION: According to the World Health Organization (WHO), intoxications are an aggravation to Public Health. It is estimated that 1.5 to 3% of the population gets poisoned every year, accidentally or intentionally, so that self-poisoning, until 2020, took up the second place in mortality statistics in Brazil. **OBJECTIVES:** To map the epidemiologic profile of self-poisoning deaths caused by the intentional use of substances in Piauí between 2015 and 2019. **METHODS:** The research was made through the data platform TABNET from Unified Health System Database - DATASUS, on the category "deaths by external causes" and area of influence in Piauí. The items "CID-10 category" and "occurrence deaths" were fixed. The variables applied were "sex", "age range" and "marital status"; and the "available time periods" varied from 2015 to 2019. The gathering was restricted to the results corresponding to CID-10 from X60 to X69. **RESULTS:** In the delimited time period, 158 deaths by intentional exogenous poisoning were identified, 58.23% of them corresponding to the male sex. According to the age range, 28.48% were between 30 and 39 years old, 22.74% between 20 and 29 years old and 17.72%

between 40 and 49 years old. Concerning the marital status, 49.37% deaths corresponded to bachelors, 22.78% were married people, 3.16% were widowed, and 2.53% were divorcees. The most used ways of intentional self-poisoning that progressed to death were, in decreasing order: exposure to pesticides (41.77%), exposure to other chemicals and non-specified harmful substances (24.6%), drug use, medication and biological substances (15.82%), anticonvulsant drug use, hypnotics, antiparkinsonians and psychotropic substances (11.39%). **CONCLUSION:** The male prevalence supports the fact that, since men choose more lethal methods, they accomplish suicide attempts more frequently. Being young adults and adults the dominant age range, it is possible to correlate this occurrence to the instability that is common in an age that deals with strong social demands. Furthermore, bachelors were the most affected, reflecting the marital relationship's protective factor on suicide. The most used way of self-poisoning was pesticide exposure, so it is possible to infer its correlation to the high rates of agricultural production, therefore the easiest access to pesticide in comparison to the other substances.

17. EPIDEMIOLOGIC PROFILE OF OBESITY DEATHS IN PIAUÍ BETWEEN THE YEARS OF 1996 AND 2019

Mariana Fonseca Mendes Soares¹, Francisco Aldo Rodrigues Júnior², Francisco Yves Gadelha Pitombeira³ and Marcela Fonseca Mendes Soares².

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INTRODUCTION: Obesity is part of the Non-Communicable Chronic Diseases (NCCD) axis; that being diseases that constitute the biggest cause of death in the world. Its cause is multifactorial, depending on the interaction between genetic, metabolic, social, behavioural and cultural factors. It's needed, for scientific purposes, the acquirement of epidemiologic profiles on obesity deaths. **OBJECTIVES:** To map the epidemiologic profile of obesity deaths in Piauí between the years of 1996 and 2019. **METHODS:** The research was done through the data platform TABNET from Unified Health System Database - DATASUS, by sorting the "deaths by preventable causes from 5 to 74 years old" subgroup and geographic coverage in Piauí. The items "row" and "content" were respectively set in "CID-10 category" and "occurrence deaths". The "column", on the other hand, alternated between the variable's "sex", "age range", "education" and "marital status"; and the "available time frames" varied from 1996 to 2019. The gathering was restricted to the E66 results. **RESULTS:** Between 1996 and 2019, there were 210 deaths by obesity in Piauí. It was noticed a growing rise over the 24 assessed years. Splitting into two-time frames of 12 years each, there were 53 obesity deaths in the first half (1996 to 2007), while in the second half (2007 to 2019) the total number more than tripled, reaching 162. With regard to sex, the mortality difference was insignificant: 47.1% on males and 52.85% on females. Regarding the age frame, the ones who died the most from obesity were between 40 and 69 years old (67.1%), while the age extremes had smaller participation. About education, the dominance was zero years of schooling (27.6%). In relation to marital status, a substantial portion (42.5%) was married, followed by bachelors (27.6%). **CONCLUSION:** There was an exponential growth in the number of deaths from obesity along the years on Piauí, reinforcing the modern lifestyle influence, tending to sedentarism and poor diet in this disease. The most frequent age frame and marital status reflect an economically active population, which reinforces the interference of a busy routine and weaker healthcare. The prevailing schooling was

of zero years, which speaks for how socioeconomic characteristics interfere with the access to appropriate health assistance.

18. SEX REASSIGNMENT SURGERY IN MALES: A COMPARATIVE STUDY OF THE TRANSEXUALIZING PROCESS BETWEEN BRAZILIAN STATES AND REGIONS

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INTRODUCTION: Sex reassignment surgery (SRS) in males (M) is a highly complex procedure, in which bilateral orchiectomy is performed with amputation of the penis and neocolpoplasty. It is a transsexualizing process, which requires clinical monitoring, pre and postoperative, with hormone therapy. SRS is a surgical intervention in which an individual's birth sexual and genital characteristics are changed to those socially associated with the gender in which they recognize themselves. It is part, or not, of the physical transition of transsexuals and transgenders. **OBJECTIVES:** This work aims to comparatively analyze the procedures of SRS of M in Brazil. **METHODS:** It consists of an epidemiological study, whose data were obtained from the SUS Hospital Information System. The parameters used were Hospital Admission Authorizations by place of admission in the Brazilian states and regions and their year of occurrence, between 2015 and 2019. **RESULTS:** A total of 171 SRS were registered in the period. In 2015, there were 23 SRS: 4 in the Northeast region (NE), 12 in the Southeast (SE), 7 in the South (SU). In 2016, there were 38 SRS: 9 in the NE, 12 in the SE, 11 in the SU and 6 in the Midwest (MD). In 2017, there were 39 SRS: 9 in the NE, 12 in the SE, 11 in the SU and 7 in the MD. In 2018 there were 34 SRS: 11 in the NE, 8 in the SE, 7 in the SU and 8 in the MD. In 2019, there were 37 SRS: 10 in the NE, 10 in the SE, 13 in the SU and 4 MD. Rio Grande do Sul (RS) is the state with the most SRS with 49, followed by Pernambuco with 43, São Paulo with 28, Rio de Janeiro with 26 and Goiás with 25. From the data collected, it was possible to highlight the SE as the region of reference for performing SRS in the M. RS was the state that carried out the highest number of SRS among the others. A non-linear increase in the number of operations is evident, with a total percentage increase of 60.8% between 2015 and 2019. In addition, it is observed that only 5 states concentrate all these surgeries across the country, which indicates a certain unevenness of accessibility, showing the precariousness of public policies that effectively address the transsexual population. **CONCLUSION:** Thus, the need for reference services to perform SRS is perceived, as this represents a topic still seen under the pathological bias and surrounded by great prejudice in the medical field. The transsexual population is highly marginalized, which reveals the importance of analyzing their ways of accessing the SUS and whether their demands are being fully met.

19. AGENESIA OF RIBBONS AND CONGENITAL LEFT DIAPHRAMATIC HERNIA

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INTRODUCTION: Rib agenesis is a rare congenital malformation, often associated with vertebral defects such as spondylocostal dysostosis. It is a failure to update the embryonic cartilages of the axial skeleton. When associated with congenital diaphragmatic hernia (CHD), there is a protrusion of the viscera into the chest. **CASE REPORT:** Newborn, female, 1570 grams, 28 weeks gestational age, 2nd twin, cesarean delivery by fetal centralization. At birth, airway aspiration and two cycles of unresponsive positive pressure ventilation, followed by tracheal intubation and referral to the neonatal intensive care unit. Upon inspection, a cranio-body disproportion was identified with a defect in the left ear pinna and downward-sloping eyelid folds. Bulging observed in the lateral region of the left hemithorax during expiration. Whole body radiography showed left costal arch agenesis and vertebral malformations. Chest computed tomography confirmed the malformations of the left costal cage and vertebral bodies, with agenesis of the ribs, dysraphism of the posterior arches, hypoplasia of the left upper pulmonary lobe and left diaphragmatic discontinuity with eventration of abdominal structures. On echocardiogram, dextropex mesocardia, rastelli type A total atrioventricular septal defect, aortic thrust, infundibular pulmonary stenosis, hypoplastic pulmonary valve and pulmonary trunk, determining a tetralogy of Fallot. Total abdominal ultrasound showed herniation of abdominal structures (spleen and intestinal loops) into the left chest cavity. The patient remained under intensive care for 2 months, maintained on mechanical ventilation and using vasoactive drugs, with permanent hemodynamic instability and worsening with minimal manipulation, which made any attempt at surgical resolution impossible, resulting in death. **FINAL CONSIDERATIONS:** A thorough evaluation of the newborn is of paramount importance in diagnosing congenital malformations and in defining the therapeutic follow-up. Hemodynamic instability resulting from complex heart disease was a determining factor for the impossibility of surgical correction. Furthermore, the almost complete absence of ribs on the left makes an anchorage point for correcting the diaphragmatic defect inexistent.

20. HOSPITAL ADMISSIONS FOR THE TREATMENT OF ECLAMPSIA IN THE STATE OF PIAUÍ: AN EPIDEMIOLOGICAL ANALYSIS IN THE PUBLIC HEALTH SYSTEM

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INTRODUCTION: Eclampsia (EC) is defined as a primary episode of seizure, during pregnancy or in the postpartum period, unrelated to other pathological conditions related to the central nervous system, present in pregnant women with pre-eclampsia. The definitive treatment is childbirth; however, the risk of prematurity is compared with gestational age, severity of pre-eclampsia and reaction to other treatments. Thus, as it represents a pathology that threatens the vitality of the mother-fetus binomial, it represents an important public health issue. **OBJECTIVES:** This study aims to analyze hospitalizations for treatment of EC in Piauí between 2014 and 2018. **METHODS:** This is an epidemiological, descriptive and quantitative study, whose data were extracted from the Hospital Information System (SIH/SUS). The cases of hospitalization for EC treatment in Piauí were addressed according to the Authorizations for Hospital Admissions (AHA) by

municipality in the years 2014 to 2018. **RESULTS:** During the entire period analyzed, a total of 127 admissions were obtained. In 2018, there were 21 admissions. In 2017, there were 15 admissions. In 2016, there were 22 admissions. In 2015, there were 36 admissions. In 2014, there were 33 admissions. As for the municipalities with the highest number of hospitalizations, the leadership was in the state capital, Teresina, with 41 (32.2% of cases), followed by Picos, with 24 (18.8%), Guadalupe with 10 (7.8. %), Parnaíba with 8 (6.2%) and Amarante with 7 (5.5%). The results obtained consolidated Teresina as a reference center for the treatment of EC, with almost a third of the total number of admissions. In addition, there was a trend towards a non-linear reduction for hospitalizations in the period, with a percentage difference between the first and last year of approximately 36% of cases. This reality can mean both a relative improvement in the management of pre-eclampsia cases, and a problem of underreporting for cases of EC, which represents a reality when studying maternal morbidity and mortality. **CONCLUSION:** The monitoring and evaluation of cases provide information that helps to strengthen public policies, resource management and the establishment of flows and references that correspond to the regional reality. Therefore, the analysis of notifications for hospitalization of EC is of paramount importance in hospital planning and in the qualification of teams based on scientific evidence and available protocols.

21. COMPARATIVE ANALYSIS BETWEEN THE PERIOD 2001 TO 2006 AND THE PERIOD 2010 TO 2015 ABOUT THE INCIDENCE OF CONGENITAL RUBELLA SYNDROME IN BRAZILIAN REGIONS

Ana Vitória Meireles Veiga¹, Igor dos Santos Cavalcante¹, Martha Laura Leão dos Santos Silva¹, Livia Rocha Santos¹, Lucia Maria de Sousa Aguiar dos Santos².

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INTRODUCTION: Rubella is a viral disease that, when it occurs during pregnancy, is a concern due to the teratogenic action of the virus that can cause congenital rubella syndrome (CRS). Therefore, currently, in Brazil, the vaccine to prevent the disease is on the vaccine calendar and cases of CRS are mandatory notification. Since the data provided allows for control measures. **OBJECTIVES:** This work aims to comparatively analyze a time frame regarding the incidence of CRS cases. **METHODS:** This is an epidemiological, quantitative and retrospective study. Searches were performed on the DATASUS TABNET platform, in the Epidemiological and Morbidity section - Diseases and Diseases of Notifications. Collect data on CRS cases from the five Brazilian regions with a time frame from 2001 to 2006 and 2010 to 2015. As they are tertiary data, approval by the ethics committee was not required. **RESULTS:** In the northeast region, 51 cases were reported from 2001 to 2006 and 4 cases were reported from 2010 to 2015. In the northern region, 34 cases were reported from 2001 to 2006 and 4 cases were reported from 2010 to 2015. 14 cases were reported from 2001 to 2006 and 6 cases from 2010 to 2015. In the Southeast region 124 cases were reported from 2001 to 2006 and 18 cases from 2012 to 2015. In the South region, 6 cases were reported in the period from 2001 to 2006 and no cases were reported in the period from 2010 to 2015. Rubella has a benign evolution when it affects adults and children, but it is of great concern when it affects pregnant women. Therefore, in Brazil, from 1996 onwards, rubella is a compulsory notification disease. This was of paramount importance for the control of rubella in the country,

especially after the outbreak of infection in 2001. Therefore, it is possible to see that in the period that faced the outbreak, from 2001 to 2006, 229 cases of CRS were reported in the country, while in the period from 2010 to 2015, 32 cases were reported in Brazil. **CONCLUSION:** The importance of epidemiological surveillance in Brazil, as well as rubella vaccination, in the prevention of Congenital Rubella Syndrome is indisputable. There is a decrease in CRS cases, but efforts are still needed to maintain this scenario, with complete vaccination coverage and continued sensitivity to notifications of the infection.

22. COVID-19'S IMPACT ON IMMUNIZATION OF PREGNANT WOMEN BY THE DTPA VACCINE IN THE NORTHEAST REGION

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INTRODUCTION: The adult-type acellular triple bacterial vaccine (dTpa) - which immunizes against tetanus, whooping cough and diphtheria - is of paramount importance for the prevention of neonatal tetanus and diphtheria in pregnant women. For this reason, it is on the vaccination calendar in Brazil and it is one of the immunization agents recommended for women during prenatal care. The coronavirus pandemic began in February 2020 with the first confirmed case in the country and may have impacted women's access to immunizations. **OBJECTIVES:** The aim of this work is to analyze the impact of the SARS - Cov -2 pandemic on the vaccination coverage of pregnant women in the Northeast region from 2016 to 2021. **METHODS:** This is an epidemiological, quantitative and retrospective study. Searches were performed on the DATASUS TABNET platform, in the Health Care section. Collect data on the vaccination coverage of pregnant women in 26 states and the federal district, with a time frame from 2016 to 2021. The generated spreadsheets were analyzed using Microsoft Excel software. As they are tertiary data, approval by the ethics committee was not required. **RESULTS:** After analyzing the data, it was possible to infer that there was a growing increase in vaccination coverage in all states in the period from 2016 to 2019. In Maranhão, there was an increase of 121%. In Piauí, there was an increase of 282%. In Ceará, the increase was 19%. In Rio Grande do Norte, there was an increase of 112%. In Paraíba, the increase was 145%. In Pernambuco there was an increase of 38%. In Alagoas, the increase was 66%. In Sergipe, it was 172%. In Bahia, there was an increase of 106%. However, there was a decrease in vaccination coverage in all states in 2020 compared to 2019. In Maranhão, there was a decrease of 41%. In Piauí, there was a decrease of 13%. In Ceará, there was a decrease of 24%. In Rio Grande do Norte, it decreased by 23%. In Paraíba, the rate was 31%. In Pernambuco there was a 26% decrease. In Alagoas, there was a 36% reduction in coverage. In Sergipe, it was also 36%. In Bahia, there was a 29% decrease. **CONCLUSION:** Therefore, it can be noted that the coronavirus pandemic had a negative impact on dTpa vaccination coverage in pregnant women in the Northeast region. This scenario may have occurred due to several factors triggered by the crisis, such as the reception of these women to seek health services and a decrease in care due to social isolation. Therefore, it is important a more in-depth research.

23. EPIDEMIOLOGICAL PROFILE OF PATIENTS WITH HIV-AIDS IN THE CITY OF PINHEIRO FROM 2015 TO 2020

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INTRODUCTION: Acquired Immunodeficiency Syndrome (AIDS) caused by the HIV retrovirus was discovered in 1984 among an epidemic in the United States (CDC, 2020). Since then, approximately 35 million deaths worldwide have been reported related to this pathology, representing almost 50% of mortality rate (WHO, 2018). As a result, early diagnosis is irreplaceable in combating the spread of this STD. However, due to the COVID-19 pandemic, there was a 22% drop in testing and 11% in prevention and treatment measures in 2020 worldwide, compared to 2019, according to the United Nations Joint Program on HIV-AIDS (UNAIDS), which comprises a risk to public health. **OBJECTIVES:** To analyze the epidemiological profile of patients affected by HIV-AIDS in the municipality of Pinheiro-MA from January 2015 to December 2020. **METHODS:** This is a time series study and its data were presented as absolute and relative frequency. The variables adopted were: gender, age group, race and region, and the data collected were from January 2015 to December 2020, from secondary data extracted from DATASUS. **RESULTS:** Within the period stipulated by the research, in the city of Pinheiro-MA, there were 109 cases of AIDS, which corresponds to 2.92% of the total cases reported in the state of Maranhão (3,721 cases). It was also verified in the data analysis there was a predominance in males (62 cases), in the age group between 40 and 49 years (24 cases), followed by age groups between 30 and 34 years (20 cases) and mainly in brown people (37 cases). **CONCLUSION:** Through the analysis of the epidemiological profile of HIV-AIDS notifications in the city of Pinheiro-MA, the predominance was found in males, in the age group from 40 to 49 years, besides that the brown race was predominant. However, the above-mentioned results do not coincide with the existing literature of world statistics, since the prevalence is in females, between 15 and 49 years of age (KFF, 2021). Furthermore, the conclusions reached will be more useful with progress preliminary data. Therefore, by delimiting more accurate epidemiological methodologies, more targeted prevention measures will be defined both for the city of Pinheiro-MA's scope and for the national's.

24. ROUTES OF DELIVERY: COMPARATIVE EPIDEMIOLOGICAL STUDY IN THE STATE OF PIAUÍ

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INTRODUCTION: In recent decades, Brazil has had a caesarean section rate of around 40%, exceeding the values of 10-15% suggested by the World Health Organization (WHO). Given the increase and frequency of this type of delivery, the discussion about the decision on the mode of delivery has become important. This study allows a reading of the state scenario. **OBJECTIVES:** To draw an epidemiological profile of delivery routes between 2015 and 2019, in the state of Piauí. **METHODS:** This is a descriptive-quantitative epidemiological study. Data were collected from the Information Technology Department of the Unified Health System (DATASUS),

using the Birth Information System (SINASC). The variables included were the mother's education and age group, adequate follow-up, and the number of prenatal consultations. Data were tabulated on the Google Spreadsheets® website. **RESULTS:** During the study period, 242,213 deliveries were performed, of which 133,197 (54.99%) corresponded to cesarean deliveries, 108,942 (44.97%) to vaginal deliveries and 74 (0.04%) were ignored. As for the type of cesarean delivery, women aged between 25 and 29 years, with schooling between 8 and 11 years, with more than adequate follow-up and with seven or more visits during prenatal care predominated. As for vaginal delivery, a similar picture was observed, differing only in the age group, with women aged between 20 and 24 years. **CONCLUSION:** Therefore, there is a predominance of cesarean deliveries. The choice of this mode of delivery can be crossed for several reasons: Medical recommendations, to preserve maternal and child health; failures in prenatal care, regarding guidance on the disadvantages and advantages of each mode of delivery; choice of the woman, which can be taken due to misinformation and the feeling of fear and doubts related to vaginal birth; in addition to interventional medical interests and other sociocultural factors.

25. THE QUALITY OF OBSTETRIC FOLLOW-UP: ANALYSIS OF THE NUMBER OF PRENATAL CONSULTATIONS PERFORMED BY PREGNANT WOMEN IN THE CITY OF PARNAÍBA AND IN THE STATE OF PIAUÍ

Igor dos Santos Cavalcante¹, Livia Rocha Santos¹, Martha Laura Leão dos Santos Silva¹, Ana Vitória Meireles Veiga¹, Lúcia Maria de Sousa Aguiar dos Santos².

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INTRODUCTION: Prenatal consultation is the medical follow-up during pregnancy, which ensures a good referral to the time of delivery, with emphasis on the health of the mother-fetus binomial. Thus, it is extremely important to carry out a periodic inspection of the pregnancy, which, according to the Ministry of Health, must be at least 6 times per pregnant woman. Monitoring the number of prenatal consultations performed defines the quality of obstetric care and, therefore, represents a health issue. **OBJECTIVES:** To analyze the amount of prenatal care provided by pregnant women in the city of Parnaíba (PHB) and Piauí (PI). **METHODS:** This is a quantitative and epidemiological study. The information was obtained from the DATASUS TABNET platform, in the VITAL STATISTICS – BORN LIVES section. The data analyzed consist of the number of prenatal consultations registered in the city of PHB and in the state of PI, in the period from 2013 to 2017. **RESULTS:** In 2013, in PHB, 118 births occurred to mothers who did not attend any consultations, 754 of pregnancies with 1 to 3 consultations, 1,971 of pregnancies with 4 to 6 consultations and 1,813 with 7 or more; in PI, there were 1,782 without consultations (SC), 4,576 with 1 to 3 consultations, 17,667 with 4 to 6 and 24,488 with 7 or more. In 2014, PHB had 76 SC women, 623 with 1 to 3, 1,714 with 4 to 6 and 2,145 with 7 or more; the PI had 1,101 SC, 4,199 with 1 to 3 consultations, 16,869 with 4 to 6, 27,629 with 7 or more. In 2015, in PHB there were 74 pregnant women SC, 551 with 1 to 3, 1,787 with 4 to 6, 2,355 with 7 or more; in PI 943 SC, 3,624 with 1 to 3, 16,217 with 4 to 6 and 30,381 with 7 or more. In 2016, in PHB there were 78 SC, 567 with 1 to 3, 1,732 with 4 to 6, 2,519 with 7 or more; in PI 1,327 SC, 3,587 with 1 to 3, 14,875 with 4 to 6 and 29,783 with 7 or more. In 2017, in PHB 46 were SC, 616 with 1 to 3 appointments, 1,812 with 4 to 6 appointments and 2,697 with 7 or more appointments; in PI, 1365 SC, 3,617 with 1 to 3, 14,936 with 4 to

6 and 31,024 with 7 or more. **CONCLUSION:** Based on the study described above, it is possible to see a progressive improvement in the quality of obstetric follow-up in the PI and in PHB, in which PHB was ahead of the state's percentage mean.

26. THE VERSICOLOR PITYRIASIS AS AN INSULIN PERIPHERAL RESISTANCE SIGNAL: CASE REPORT IN YOUNG PATIENT.

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INTRODUCTION: Pityriasis Versicolor (PV) is a superficial fungal infection caused by *Malassezia Furfur*, lipophilic organism that in ideal conditions colonies in the corneum stratum of the skin, developing a pigmentation disorder with lesions that vary the coloring spectrum. The manifestation of PV occurs due to exogenous and endogenous stimuli. Among the exogenous factors mainly stands out the heat and moisture. Already among the endogenous factors stands out the positive family history for PV and the state of immunological deficiency caused by several other pathologies. The most diagnosis is clinical. **OBJECTIVES:** Reporting a case of recurrent versicolor pityriasis associated with peripheral resistance to insulin in a young patient. **CASE REPORT:** F.C.S.F, 15 years old, student, searched an outpatient clinic with multiple blemishes for three years three years ago. The dermatological examination evidenced multiple hypochromic spots all over the trunk, face and cervical region, Zireli signal was positive and Wood light with yellowish fluorescence at the lesions site. In complementing the patient history reported prior diagnosis of prédiabetes at age 11. He also reported that he has already had treatment for the stains and there was recurrence of the lesions. Patient was diagnosed with PV and pharmacological conduits in the first consultation were: itraconazole 100 mg orally and ketoconazole cream in the lesions site. Laboratory tests were requested to confirm insulin resistance. In return, patient brought the result of laboratory tests. The diagnosis of relevant versicolor Pityriasis + peripheral resistance to insulin was closed. As conduct the use of GliFage XR 500mg was instituted; Itraconazole 100mg (1x per month for 6 months) and Cetoconazole Shampoo (2x per week). **FINAL CONSIDERATIONS:** Patients with peripheral insulin resistance are more vulnerable to cutaneous infectious diseases. In these cases, the skin becomes an organ open to the most varied forms of commitment, facilitating complications or delaying healing. This is all due to leukocyte abnormalities that in these patients has their diffusion decreased. In these cases of relapsing PV the dermatologist should always investigate peripheral resistance to insulin, therefore, lesions are early signs of systemic disease. The most appropriate conduct is the use of systemic antifungal and the treatment of the base cause with oral antidiabetic. In view of the foregoing, it is important to highlight the importance of the dermatologist in the early diagnosis of systemic diseases as well as in the right driving of cases.

27. UTERINE MALFORMATION: DIDELPHUS UTERUS ASSOCIATED WITH UNILATERAL RENAL AND URETERAL AGENESIA IN PATIENT ATTENDED AT MATERNITY DONA EVANGELINA ROSA IN TERESINA-PIAUÍ. CASE REPORT

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INTRODUCTION: The didelphic uterus is a congenital uterine malformation related to alterations in embryogenesis up to the 12th week of fetal life due to defects in the fusion of M ller's canals or resorption of the inter-Mulerian septum. Its etiology is not well understood; its incidence and prevalence is complex. Clinical manifestations usually occur in puberty with menstrual alterations or in adulthood due to reproductive events such as: abortion, premature birth, high-risk pregnancy and/or sterility; can be associated with changes in the urinary tract. Transvaginal pelvic ultrasound (USTV), hysteroscopy, hysterosalpingography (HSG), laparoscopy and magnetic resonance imaging are complementary means of diagnosis. The diagnosis and its individualization will indicate the form of treatment for each type of anomaly. **CASE REPORT:** SAS, 19 years old, sought a gynecologist reporting purulent leukorrhea resistant to the treatments performed. Menarche at age 12, regular menses; gestates zero. Normal general physical examination. Gynecological exam: external genitalia without alterations; specular examination: trophic cervix with an external orifice 0.5 cm in diameter, located to the right of the vaginal cul-de-sac; on the left, there was another orifice or opening through which fetid purulent content continuously drained; the vaginal touch was inconclusive; TVUS showed double endometrial thickening in separate horns suggesting didelphic uterus; HSG showed only the right horn; it is not possible to visualize the left horn due to the impossibility of channeling the vaginal fistulous orifice; renal and left ureteral agenesis was seen by excretory urography. It was concluded that a didelphic uterus was diagnosed with absence of a typical cervix in the left horn that joined the vagina through a fistulous conduit. It was decided to surgically remove the left horn and part of the fistulous tract that ended in the vagina, as this could be the cause of continuous and recurrent vaginal infection. Surgery confirmed the findings; later, the patient returned reporting the disappearance of her complaint. **FINAL CONSIDERATIONS:** The present case is a rare uterine anomaly associated with renal and ureteral agenesis in a young patient with normal menstrual cycles and no defined reproductive future. The surgical option had a prophylactic/therapeutic indication due to the possibility of ascending pelvic infection through the already infected fistulous left uterine uterine vagina-horn canal.

28. STUDY ON ANTIMICROBIAL USE IN PATIENTS WITH SARS-Cov-2 IN AN INTENSIVE CARE UNIT IN TERESINA-PI

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INTRODUCTION: The pandemic outbreak and the acceleration in the number of Covid-19 cases become the use of antimicrobials widespread in the treatment of patients with SARS-Cov-2 in the intensive care unit (ICU). In these cases, the assessment of the defined daily dose (DDD) is widely used to measure the effectiveness of these drugs and to manage their rational use, preventing the selection and spread of resistant microorganisms. **OBJECTIVES:** The objective of this study was to analyze the defined daily dose of antimicrobials in a

Covid-19 ICU. **METHODS:** A quantitative-based analytical cross-sectional study was carried out with retrospective data collection. Data of the antimicrobial consumption in the Covid-19 ICU from January to June 2021 at the University Hospital of Piau  were imputed and analyzed in Excel. The work was submitted to the Research Ethics Committee (CEP) and approved under the position number 2.463.898. **RESULTS:** Data analysis showed that intravenous (IV) Piperacillin + Tazobactam (A) represented 19% of the use of antimicrobials, Meropenem (IV) (B) 18.1%, Ceftriaxone (IV) (C) 17, 4%, oral azithromycin (VO) (D) 9.8%, Vancomycin (IV) 8.5% and Polymyxin B (IV) (F) 4.9%. In ICU, it is common a long term intravenous therapy, however the Covid-19 protocols included the oral route for Azithromycin, which justifies the emphasis on its use. In a study with non Covid-19 ICU, drug D represented 0.1% of medical prescription 14.4% of C. The data corroborate previous study carried out in the Univerity Hospital from Largartos, in which 19.77% of the antimicrobial used was A. In another study, 19.8% of the relative consumption was antimicrobial B, 3.7% by C, 1.2% by E and 7.4% by F. DDD is important for comparison and assessments, but it is noteworthy that each hospital environment has its own characteristics and sensitivity profile of microorganisms. The use of antimicrobials is usually justified by nosocomial respiratory tract infection related to prolonged hospitalization or ICU stay. **CONCLUSION:** It is concluded that, based on what was analyzed, it is possible to generate data to plan clinical strategies in a health unit and, thus, to promote a conscious use of antimicrobials.

29. CASE REPORT: A RARE CASE OF PERFORATING FOLLICULITIS

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INTRODUCTION: Perforating folliculitis is one of four forms of primary perforating dermatosis characterized by transepidermal elimination of follicle contents. The eruption generally manifests as papules with a keratotic plug, mainly on extremities and buttocks. Histopathologically, the follicular infundibulum is filled with necrotic material, keratinized substance, and inflammatory cells. The hair then perforates this structure and a transepidermal elimination picture is noted with invasion of collagen and elastic fibers. Any individual can develop perforating folliculitis, however, it is recommended to investigate diabetes and kidney disease, because these pathologies can be associated with the condition. The most common causes are: traumatic itchy scratches; friction caused by tight clothing or shaving; some conditions such as dermatitis and acne; lesions resulting from surgical wounds, and diabetic microangiopathy. Regarding treatment, it should be noted that no randomized clinical studies have been done for this dermatosis, but the management is based on symptomatic treatment. **CASE REPORT:** A female patient, 43 years old, white, housewife, living in Teresina/PI. Her main complaint was pruritic lesions that worsened at night, beginning one year ago. She reported previous treatment for scabies, with improvement during use of the antiallergic and relapse after discontinuing the medication. He denied comorbidities, smoking, and alcoholism. He reported allergy to soap and dipyrone. On physical examination, there were erythematous crusted papules in the abdominal and dorsal regions, as well as on the limbs and hands. A biopsy was requested, which

detected suppurative folliculitis with perforating features. The immunohistochemical study revealed hair follicles distorted by intense acute inflammatory infiltrate with permeating hair and epidermal transmigration of degenerated connective tissue. From these findings a diagnosis of perforating folliculitis was made. At the moment a laboratory investigation for secondary causes is being done, with evaluation of liver and kidney function. Treatment with antiallergic was maintained. **FINAL REMARKS:** Perforating folliculitis is a disease with non-specific lesions that has been little reported in the literature, which makes its diagnosis difficult. Its treatment is symptomatic, and topical corticosteroids and antihistamines are indicated, which may be associated with narrow-band ultraviolet ray phototherapy.

30. EPIDEMIOLOGICAL PROFILE OF DIRECT AND INDIRECT MATERNAL MORTALITY BY MACRO-REGION IN THE STATE OF PIAUÍ FROM THE YEAR 2009 TO 2019

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INTRODUCTION: A maternal death is the death of a woman during the gestational period or until 42 days after its ending, excluding those related to accidents. The causes of maternal death may be divided into direct obstetrics, which are related directly to pregnancy complications, childbirth or puerperal period and the indirect obstetrics, resulted from pre-existing illness in the gestation, or which developed during this period, not being provoked by direct obstetrics causes, but accentuated by the pregnancy physiological effects. **OBJECTIVES:** To analyze the epidemiological profile of the direct and indirect maternal mortality cases by macro-regions in the state of Piauí in the years of 2009-2019. **METHODS:** Descriptive, quantitative epidemiologic study and retrospective of Mortality Maternal cases based on the DATASUS platform data, during the period of January 2009 to December 2019. **RESULTS:** 446 maternal deaths were notified of specified cause in the State of Piauí between 2009-2019, being 316 (70,85%) of direct cause and 130 (29,15%), of indirect cause. According to the macro-region, it can be subdivided in Semi-arid with 92 (20,62%) deaths, being 67 (72,82%) deaths caused by direct and 25 (27,17%) indirect deaths; The macro-region Meio-norte, with 155 (34,75%) deaths, being 98 (63,22%) deaths by direct causes and 57 (36,77%) by indirect deaths; in the Coastal area, there were 95 (21,3%) deaths, being 71 (74,73%) deaths caused by direct causes and 24 (25,26%) indirect causes in the Cerrado (The Brazilian savannah), 104 (23,31%) deaths, being 80 (76,92%) deaths by direct causes and 24 (23,07%) by indirect causes. The direct maternal mortality triad has been found in 48,71% of the cases of direct mortality, being 32,7% of the related cases to hypertensive syndromes, 9,17% to puerperal infections and 7,27% to postpartum bleeding. Among the 130 deaths by indirect causes, 103 (81,5%) were related to other mother's diseases classified in another part, but which cause complications to the pregnancy, the childbirth, and the puerperal period. **CONCLUSION:** The major frequency of direct causes found in our analyses indicate a larger need to establish preventive strategies and a better gestational assistance, together with appropriate quality, full-time and cross-disciplinary public policies during the entire antenatal, childbirth and puerperal period.

31. EPIDEMIOLOGICAL ANALYSIS OF ADMISSIONS FOR UROLITHIASIS IN BRAZIL BETWEEN 2016 AND 2020

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INTRODUCTION: Renal lithiasis (or urolithiasis), popularly known as "kidney stone", is a frequent condition in clinical practice with a high social impact and high cost. This happens because it affects 5 to 15% of people at some point in their lives, with high recurrence rates. This pathology results from solid formations constituted by concentrates of crystallized substances normally excreted in the urine. There are several types of stones, but the main ones include calcium oxalates, calcium phosphates, uric acid, struvite, and cystine. There are some factors that are considered risk factors, such as poor lifestyle habits, dehydration, use of medications, family history, and renals and metabolic disorders (diabetes, gout disease, hyperparathyroidism). Urolithiasis is the third most common reason of urinary tract disease, second only to infections and prostate pathologies and, among all urinary tract diseases, the stones are the biggest cause of morbidity. **OBJECTIVES:** This study aims to trace the epidemiological profile of hospitalizations for urolithiasis in Brazil between 2016 and 2020. **METHODS:** This is a descriptive epidemiological study, retrospective and quantitative performed based on secondary data collected from the Department of Informatics of the Unified Health System (DATASUS). There were collected data regarding the number of hospitalizations for urolithiasis between 2016 and 2020, age group, race and gender. **RESULTS:** Between 2016 and 2020 there were 406,355 hospitalizations for urolithiasis in Brazil. The highest incidence was in 2019, with about 22% of cases, and the lowest one was in 2020, with 18.07% of cases. Regarding gender, there was no significant difference in the total number of cases. The age group with the highest incidence on males was 40 to 49 years old, with 11.49%, and on females it was 30 to 39 years old, with 11.23%. The race group with more hospitalizations due to the disease, in both sexes, were the white ones, with 45.96% of cases, and brown ones, with 29.82%. **CONCLUSION:** The epidemiological analysis showed that the number of cases of urolithiasis in Brazil increased in 2019, with the highest percentage of incidence among men aged 40 to 49 years old and women aged 30 to 39 years old, with no significant differences related to sex. It is worth highlighting that carelessness with the prevention of this pathology may influence the increase in cases of the same.

32. EPIDEMIOLOGICAL ANALYSIS OF CONFIRMED UTERUS CANCER CASES IN NORTHEASTERN OF BRAZIL BETWEEN 2016 AND 2020

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INTRODUCTION: Cervical carcinoma, known as cervical cancer, results from persistent infection with the Human Papillomavirus (HPV). This virus infection is very frequent and does not progress to disease most of the time, but in some cases cellular changes occur that can progress to cancer. These changes are easily discovered in the preventive exam known as Pap smear, which is performed in

women aged 25 to 64 years old, who are already sexually active. When the tumor is early detected during the routine exams, there is a greatest chance of cure when it is treated, so it is important to carry out periodic exams, along with the use of condoms during sexual intercourse. The malignant neoplasm of the cervix is the third most frequent malignant tumor in women (after only breast and colorectal tumors), and the fourth cause of death from cancer among the female population in Brazil. **OBJECTIVES:** This study aims to trace the epidemiological profile of confirmed cases of cervical cancer in the Northeast between 2016 and 2020. **METHODS:** This is a descriptive, retrospective and quantitative epidemiological study based on secondary data collected in online platform of the Unified Health System (DATASUS). There were collected data regarding the number of confirmed cases of cervical cancer by state in the Northeast of Brazil and by age group. There were considered age groups over 19 years old. **RESULTS:** Between 2016 and 2020, there were 20552 cases of cervical cancer in the Northeast. By descending order in the number of cases, the order is: 2019, with 5127 cases (24.94%); 2020, with 4661 cases (22.67%); 2018, with 4197 cases (20.42%); 2017, with 3379 cases (16.44%); and 2016, with 3188 cases (15.51%). Among the states in the Northeast that had the highest number of cases in the last 5 years were: Bahia (4273); Pernambuco (3768); and Ceará (3286). The age group with the highest number of hospitalizations for confirmed cases by the pathology was the 40 to 44 years old one, with 2610 cases (12.69%), having the highest incidence in 2019, with 674 cases (3.28%), and the age group with the lowest number of cases was 25 to 29 years old one, with 744 cases (3.62%). **CONCLUSION:** The epidemiological analysis showed that the number of cases of cervical cancer in Northeast of Brazil increased in 2019, with a higher incidence in the state of Bahia and among women aged 40 to 44 years old.

33. EPIDEMIOLOGICAL ANALYSIS OF THE COVID-19 PANDEMIC IMPACT ON THE DIAGNOSIS OF LEPROSY IN BRAZIL

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INTRODUCTION: Leprosy is an infectious, contagious and transmissible disease caused by *Mycobacterium leprae*. When left untreated, it causes dermatoneurological signs and symptoms which are often disabling. Early diagnosis and health surveillance have contributed for decreasing the number of cases of this illness in recent decades around the world. The delay in identifying new cases, due to the COVID-19 pandemic, impacts negatively the quality of life of the affected population and increases the chances of an unfavorable outcome of their cases. **OBJECTIVES:** To analyze quantitatively the impact of the COVID-19 pandemic on the diagnosis of leprosy in Brazil. **METHODS:** Quantitative, descriptive and cross-sectional epidemiological study based on data from the Notifiable Diseases Information System available on DATASUS, official online database of Brazil's public health system. In order to avoid statistical distortions, the average number of diagnoses of leprosy in Brazil, its regions and federative units in the five-year period from 2015 to 2019 was compared to the year 2020, the first of the COVID-19 pandemic. **RESULTS:** There was regularity in the annual number of diagnoses of leprosy in Brazil in the period before the COVID-19 pandemic, in contrast to 2020, when a strong reduction was registered. There was

a 44.6% decrease in this notification in 2020 compared to the average for the 2015-2019 period, from 35,190 to 19,478 diagnoses. All regions and federative units in the country registered decreases in this parameter. By region, the negative variation was more accentuated in the Southeast (50.4%), the most populous one, followed by the Northeast (45%), where leprosy is more prevalent in Brazil, South (44%), North (43.7%) and Midwest (41.2%). Considering the federative units, the biggest percentage decrease occurred in Espírito Santo (84.7%), followed by Roraima (65.9%), Rio Grande do Sul (58.4%), Piauí (58.3%) and Bahia (54.3%). The smallest decreases were observed in the Federal District (10.7%), in Rio Grande do Norte (29.4%), in Sergipe (31.7%), in Santa Catarina (34.9%) and in Pernambuco (37.8%). **CONCLUSION:** The analyzed data showed regularity in the annual number of diagnoses of leprosy in Brazil in the period from 2015 to 2019, whose maximum variation did not exceed 5,000 cases, which makes significant the reduction of more than 19,000 cases in 2020 when compared to the average for this five-year period. The decrease in this notification, consistent in the analyzed variables, suggests a relevant impact of the COVID-19 pandemic in the identification of new cases of leprosy in the country, making relevant future analyzes on this topic.

34. PREVENTABLE DEATHS IN ADULTS IN THE STATE OF PIAUÍ, BRAZIL: A DECADE-LONG EPIDEMIOLOGICAL PROFILE

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INTRODUCTION: Preventable or reducible causes of death can be defined as those that could have been avoided, in part or totally, through fully efficient health services. The study of this type of death offers a parameter for evaluating the effectiveness of health care services. **OBJECTIVES:** To characterize the epidemiological profile of cases of death from preventable causes in adults in the state of Piauí, Brazil, from 2010 to 2019. **METHODS:** Epidemiological and retrospective study, with a quantitative approach, based on data from the Mortality Information System, available on DATASUS, official online database of Brazil's public health system. All deaths from preventable causes registered in the state of Piauí, by place of residence, between 2010 and 2019, of people aged between 20 and 59 years were included. Causes classified as unclear or not clearly preventable were excluded. **RESULTS:** Piauí state registered 40,925 deaths from preventable causes from 2010 to 2019. The annual occurrence of this type of death showed an increasing trend over this period, from 3,557 cases in 2010 to 4,195 in 2019. Considering the total number of cases in the decade under analysis, deaths were registered predominantly in men (70.8%), brown-skinned (71.1%), people with a maximum of 3 years of schooling (45.4%) and aged between 55 and 59 years (19%). The main causes were deaths reducible by actions of health promotion, prevention and care for non-transmissible diseases (49.6%) and deaths reducible by actions of health promotion, prevention and care for external causes, including accidents and violence (39.9%). Some causes were much more frequent in men, such as death from aggression (92%), alcoholic psychosis or other disorders related to alcohol consumption (91.8%) and traffic accidents (87.8%). **CONCLUSION:** The analyzed data showed an epidemiological profile mostly male, brown-skinned and advanced adult age. Even considering the male predominance in the total sum of cases, there were significant differences regarding

gender in some causes, especially those involving violence, alcoholism and traffic accidents. Finally, it is noteworthy the increase of deaths from preventable causes in adults in Piauí state over the analyzed period.

35. ANALYSIS OF THE TYPES AND CONSEQUENCES OF WORK ACCIDENTS IN THE PERIOD FROM 2015 TO 2019

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INTRODUCTION: According to article 19 of Law No. 8.213, of July 24, 1991, "Accident at work is what occurs when working for a company or a domestic employer or when insured persons are engaged in work, causing bodily harm or functional disturbance that causes death or loss or reduction, permanent or temporary". It can cause anything from a simple leave, loss or reduction in the ability to work and even the death of the insured. **OBJECTIVES:** To analyze the type, consequences and main clinical causes of disability recorded by the National Institute of Social Security (INSS) through the Occupational Accident Report (CAT) in the period from 2015 to 2019, due to lack of data standardization in the years previous. **METHODS:** Epidemiological, descriptive and quantitative study, containing occupational accidents registered with the INSS by the CAT and those that, even not registered, gave rise to a disability benefit of an accidental nature in Brazil between 2015-2019. Data were obtained from statistical yearbooks of occupational accidents on the Ministry of Labor and Welfare website, evaluating the type, consequences of the accident, as well as the main clinical causes of disability according to the International Classification of Diseases (ICD-10). The results, grouped in spreadsheets, graphs and tables by Microsoft Excel. **RESULTS:** During this period, 2,927,464 work accidents were registered. The year 2015 has the highest number of accidents with 507,753, however, the other years show a constancy in the notifications, with 1,819,289 resulting from a typical accident. Regarding the consequence, according to the National Classification of Economic Activities, 1,709,421 were away from work for less than 15 days due to temporary incapacity to work, it is also worth mentioning that 74,020 had permanent disability and 11,259 died. Regarding the number of work accidents due to the accident, according to ICD-10, wrist and hand injuries were the most common with 279,842. **CONCLUSION:** Through what has been exposed, it is possible to make a more accurate balance of these accidents and promote the formulation of more effective public policies for this problem. Since the frequent occurrence of these accidents, harms workers, employers, in addition to increasing the cost of medical, social security and social assistance, affecting the national economy (MUSSEI, 2018).

36. LAPAROSCOPIC HEPATECTOMY WITH RADIOFREQUENCY USE: INITIAL EXPERIENCE IN THE STATE OF PIAUÍ

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INTRODUCTION: The use of minimally invasive surgery has gained strength in all surgical modules due to the rapid recovery of the patient, early hospital discharge, in addition to lower hospital costs

and better aesthetics. In cirrhotic patients, the risk of fracture and intraoperative bleeding is high, requiring the use of more recent ablation techniques, such as Radiofrequency Ablation (RFA) to prevent conversion to open surgery or the use of blood products. It is noteworthy that most liver tumors when diagnosed no longer have the possibility of resection, and RFA in some cases is the only chance of cure or even palliation for both primary and secondary tumors. Despite being an initial experience, the surgical and post-surgical results proved to be satisfactory. **CASE REPORT:** Male, 72 years old, previously submitted to a laparotomic cholecystectomy due to urgent acute cholecystitis, where a cirrhotic aspect of the liver was identified. With follow-up, Hepatitis B and C was diagnosed, receiving treatment with a negative viral load after 12 months. A control MRI identified a 2.9x1.3cm nodule suggestive of Hepatocarcinoma. Laparoscopic Hepatectomy (LH) was performed where three 10mm and two 5mm portals were placed. After sectioning the hepatorenal ligament, a line on the upper and lower surface of the liver was demarcated with electrocautery, delimiting the area of segment VI to be resected. The RFA laparoscopic device was applied perpendicularly along this line to both marked surfaces. A second line of parenchymal ablation was performed, corresponding to the side of the lesion, which led to complete segment VI ischemia. Then, the device was successively applied parallel to the perpendicular ablation lines, as the ischemic parenchyma was sectioned with laparoscopic scissors. At the end of the procedure, the parenchyma section area was completely regular, with no extravasation of bile or blood. It was not necessary to use blood products. The patient was discharged on the 2nd postoperative day. **FINAL CONSIDERATIONS:** As this is an initial experience, the selection of candidates for LH should be judicious, being reserved for well-defined tumors located in the lateral or inferior segments of the liver. An advantage of LH using RFA is that it extends to the ablated resection surface, with a margin of up to 2cm.

37. RARE COMPLICATION OF HEPATIC HEMANGIOMA - KASABACH MERRITT SYNDROME: CASE REPORT

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INTRODUCTION: Hepatic hemangioma is the most recurrent benign tumor of the liver, probably caused by congenital hamartomatous lesions in the liver. The etiology of the hemangioma is still a speculation. The diagnosis is, often, incidental, and the differentiation between benign and malignant tumors can usually be made only based on clinical data and imaging exams. Surgical treatment is considered based on size (> 4 cm), in the clinical symptoms, diagnostic uncertainty, nature and location of the lesions, in cases of patients refractory to clinical treatment, of lesion growth, of patients in activities with risks of abdominal trauma and involvement by Kasabach Syndrome – Merritt (KSM), an association of capillary hemangioma and thrombocytopenia. The aim of this study was to describe a case of surgical treatment for a symptomatic giant hemangioma submitted to right hepatectomy. **CASE REPORT:** C.R.A, female, 30 years old, with a report of petechiae, spontaneous bleeding from the oral mucosa after brushing teeth and abdominal pain in the right upper quadrant. Laboratory tests showed anemia and hypofibrinogenemia (177mg). Abdominal Magnetic Resonance Imaging and Tomography showed giant hemangioma 13.6 cm in the right hepatic lobe. We opted for lesion resection in two stages, with

previous embolization of the right hepatic artery and four days later, the definitive surgery, in which a right hepatectomy ruled with cholecystectomy was performed, lasting four hours, without the need for transfusion of blood products. The histopathological examination of the lesion confirmed hemangioma. **FINAL CONSIDERATIONS:** Most liver tumors are benign, and the expectant management is clinical observation. Indications for operative treatment are restricted to cases of complications directly related to the injury: abdominal pain, compressive symptoms, atypical growth, rupture, hemorrhage, KSM and diagnostic doubt regarding the malignancy. Indications for hepatectomy have increased due to the improvement of surgical and anesthetic techniques, and its results have been increasingly better.

38. THYROTOXIC HYPOKALEMIC PERIODIC PARALYSIS: CASE REPORT

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INTRODUCTION: Thyrotoxic hypokalemic periodic paralysis (PPHT) is a rare neuromuscular complication of hyperthyroidism, which mainly affects young men, characterized by the sudden appearance of severe muscle weakness, accompanied by hypokalemia and hyperthyroidism. The acute onset of paraparesis is due to the rapid influx of potassium into muscle fibers, secondary to excess Na/K/ATPase pump activity, causing cardiac arrhythmias. Cases of hereditary origin are due to mutation of the calcium or sodium ion channel gene, and in sporadic cases, the potassium channel seems to be more affected. This case report discusses the pathophysiology and treatment of PPHT and highlights the importance of early diagnosis.

CASE REPORT: M.L.S. 22 years old, male taxi driver, admitted to the emergency of a hospital in the city of Teresina-PI, on August 2017, complaining of muscle weakness in the lower limbs (LLLL) started 1 week ago, with progressive worsening in the last 24 hours. On admission, the patient reported that, upon waking up, he noticed an important deficit in strength in the lower limbs, making it impossible for him to walk, associated with dyspnea, chest pain and palpitations. He also mentioned a history of hyperthyroidism, with treatment abandonment about two weeks ago. In the emergency room, he developed syncope after venipuncture for exam collection, which was reversed after administration of atropine. An electrocardiogram examination revealed sinus rhythm with sinus arrhythmia, periods of 2nd degree sinoatrial block and prolonged QT interval (510ms) with right precordial ST elevation. In laboratory tests, it showed suppression of serum levels of thyrostimulating hormone (TSH <0.01Um / L) and hypokalemia (K = 2.1mmol / L). Tapazol 30mg was started in a single dose in the morning and intravenous administration of K in central venous access. The patient evolved with improvement in muscle weakness and progressed without further episodes of arrhythmia, being discharged from the hospital after 3 days of hospitalization. He followed up on an outpatient basis, where he opted for the definitive resolution of hyperthyroidism with radioiodine therapy. **FINAL CONSIDERATIONS:** Care guidelines include control of plasma K with serial monitoring of its levels, prevention of large glucose and salt loads, and careful use of neuromuscular blocking agents, in addition to the importance of periodic neurological examination with attention to leg muscle strength for detect long-lasting weakness associated with myopathy.

39. IMPACT OF THE COVID-19 PANDEMIC ON BREAST CANCER SCREENING IN BRAZIL

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INTRODUCTION: Breast cancer is the most common type of cancer in women worldwide. In Brazil, this disease was responsible for 16.724 deaths in 2017. Considering its high incidence and mortality, the SARS-CoV-2 pandemic rearranged the Unified Health System (SUS), especially Primary Care, causing adverse effects that disrupted several health care practices. In the case of breast cancer, this mainly affects tracking and screening for the disease, which has a direct impact on reducing the mortality rate and costs for the health system.

OBJECTIVES: To analyze the impact of the COVID-19 pandemic on breast cancer screening in primary care in Brazil by state. **METHODS:** This is a descriptive study, carried out with data from the Health Information System for Primary Care (SISAB). Data were collected regarding breast cancer screening for each Brazilian state and certain age groups. Tables and graphs regarding the mentioned variables were then constructed in Microsoft Excel® software, comparing 2020 with the average of the years 2017 to 2019. **RESULTS:** In this study, it was noticed a significant decrease (44,01%) in the number of breast cancer screening in the year of pandemic, 2020 (1,052,494), when compared to the annual average of breast cancer screening that occurred between 2017 and 2019 (1,879,926.67). Analyzing individually each state, the three states that showed a greater decrease in breast cancer screening were Rondônia (86,80%), Sergipe (72,06%) and Rio de Janeiro (70,70%). Analyzing the number of screenings by month, the months that showed a greater decrease were april, May and June - 88,56%, 79,38% and 76,44% -, respectively. Besides, there was a sustained decrease over 50% between the months of april and august. When organized by age group, the data showed a decrease of breast cancer screening by 39,11% between 50 and 59 years old and by 39,66% between 60 and 69 years. **CONCLUSION:** Based on the collected data, it was found that the COVID-19 pandemic negatively impacted the breast cancer screening in Brazil, especially at Primary Care. This impact affects especially the decrease in feminine mortality and morbidity by breast cancer, mainly between 50 to 60 years old women, the age group most benefited by breast cancer screening strategies.

40. CASE REPORT OF A COINFECTION: PATIENT IN TREATMENT OF LEPROSY AND DIAGNOSED WITH SYPHILIS

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INTRODUCTION: Borderline Leprosy is a form of the chronic disease which the etiologic agent is *Mycobacterium leprae*, characterized by involving superficial nerves of the skin, peripheral nerve trunks and the presence of skin lesions. Secondary Syphilis is a mainly sexually transmitted disease caused by the spirochete *Treponema pallidum*. Leprosy and Syphilis are infectious-contagious diseases that present broad dermatological manifestations with lesional

polymorphism and difficult differential diagnosis. Therefore, it is important knowing how to differentiate them, due to the polymorphism, and considering that a co-infection may arise, although little reported. **THE CASE:** A 27-year-old man with the diagnosis of borderline leprosy, in treatment with multibacillary chemotherapy for four months, comes to a dermatological appointment with a sudden onset of lesions in the palmoplantar region for seven days. He also mentions fever and asthenia. The dermatological examination revealed multiple hyperchromic stains with desquamation on the palms of the hands and soles of the feet bilaterally and symmetrically. He also presented multiple erythematous plaques on the trunk and hyperchromic plaques with erythematous, edematous borders and atrophic center on the elbows, bilaterally and symmetrically, consistent with the previous diagnosis of Borderline Leprosy, as they had been present since the beginning of the disease. The diagnostic hypotheses of Secondary Syphilis or Erythema Multiforme were raised, possibly related to some drug in the treatment regimen. VDRL exam reactive, with a titer of 1/16, HIV non-reactive. Treated with Penicillin G Benzathine 2,400,000 IU in a single dose and treated the sexual partner. After antibiotic use, there was complete regression of palmoplantar lesions. **FINAL CONSIDERATIONS:** In the presence of polymorphic lesions, the etiology must be persistently investigated. We report a case of co-infection with strong indication of Secondary Syphilis: symmetric and bilateral squamous erythematous lesions in the palmoplantar region, a condition to be considered even in patients with a previous diagnosis of other pathologies.

41. ANALYSIS OF THE IMPACT OF THE PANDEMIC ON THE CONTINUOUS CARE INDICATORS OF ARTERIAL HYPERTENSION IN BRAZIL

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INTRODUCTION: Systemic Arterial Hypertension (SAH) is the most frequent cardiovascular disease. In Brazil there are more than 30 million people with the disease, approximately 35% of the population aged 40 or over. SAH has a multiplicity of factors that place it at the origin of many chronic degenerative non-communicable diseases and, therefore, Primary Care has strategies that aim to improve this clinical condition. However, the situation of the pandemic caused by COVID-19 is a challenge to the continued treatment of hypertension, as it generates social impacts. **OBJECTIVES:** To analyze the impact of the pandemic on ongoing care for patients with hypertension. **METHODS:** This is a descriptive study, which uses data from the Health Information System for Primary Care (SISAB). Data about Systemic Arterial Hypertension continuing care was collected, in each Brazilian state, according to age groups (children/adolescents, adults and elderly). Then, tables and graphs were built on Microsoft Excel® software relating to the variables mentioned, comparing 2020 with the average of the years 2017 to 2019. **RESULTS:** In comparison with the average of the three previous years, it was possible to observe a reduction of 40.75% in the number of scheduled consultations for Hypertension in the year 2020. More specifically, Rondônia was the state with the greatest decrease (68.60%). Furthermore, the states of MS, RJ, RS, TO and the Federal District showed decreases higher than 60%. When analyzing the number of consultations per month, it was found that the months of April, May and June had the highest

declines with, respectively, 60.70%, 65.16% and 52.51%. Moreover, it was noted that the group with the greatest reduction was the children and adolescent one (54.30%). As for adults and seniors, the decreases were 41.34% and 40.10%, respectively. **CONCLUSION:** There was a decrease, in Brazil, in consultations focused on SAH in 2020, when compared to the three previous years. This situation reflects the impacts of the COVID-19 pandemic on the routine of patients in maintaining follow-up treatment, as the reduction in numbers does not correspond to a reduction in prevalence. The study also indicates the need to reinforce the importance of continuous treatment for children and adolescents, given that they were the group with the highest decrease. Greater impacts of the pandemic on the scheduled care of patients with SAH could be detected with further studies.

42. ANALYSIS OF CERVICAL CANCER SCREENING RATES IN BRAZIL DURING THE NEW CORONAVIRUS PANDEMIC

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INTRODUCTION: Cervical cancer is the third most common cancer in the Brazilian female population, with an estimated incidence of 16,710 new cases in 2020. Its screening is a strategy capable of reducing its incidence by identifying early changes. However, the response capacity of the Brazilian Unified Health System (SUS) was notably modified with the rapid dissemination of COVID-19 worldwide, compromising screening strategies for this cancer. **OBJECTIVES:** To Analyze the impact of the pandemic on cervical cancer screening in Brazil, also considering how different age groups were affected. **METHODS:** This work is a descriptive study, carried out with data available in the Health Information System for Primary Care (SISAB). Data were collected regarding cervical cancer screening for each federative unit of Brazil and for certain age groups, from the year 2017 to 2020. Three groups of age groups were chosen, the first one from 0 to 24 years, the second one from 25 to 64 years, and the last formed by people aged 65 years or older. Tables and graphs were then constructed regarding the mentioned variable comparing the year 2020 with the average of the years 2017 to 2019. **RESULTS:** In 2020, there was a 40.47% decrease in cervical cancer screenings in Brazil compared to the average of the years 2017 to 2019, with the states of Rio de Janeiro (74.54%), Rondônia (71.59%), and Tocantins (71.25%) showing the largest decreases. The state of Rio Grande do Sul, meanwhile, stood out for having the smallest reduction in the number of screenings (8.86%). There was a sustained decrease of over 50% from April to August, reaching the 83.08% mark in April, when compared to the average for the same month in previous years. Analyzing by age group, a greater decrease in screenings was identified in the over-65 age group (44.57%), followed by the age group 0 to 24 years (40.87%) and, finally, by the age group 25 to 64 years (40.06%). **CONCLUSION:** There are great signs of negative impacts on cervical cancer screening, which may indicate a compromise of preventive actions. However, only with new epidemiological studies will it be able to know the true effect of the pandemic on this issue. It should also be noted that the absence of an audit of the data released in SISAB constitutes a limitation of this work.

43. EXOGENOUS INTOXICATION: EPIDEMIOLOGICAL PROFILE OF CASES REPORTED IN THE STATE OF PIAUÍ, BRAZIL, IN THE LAST DECADE

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INTRODUCTION: Exogenous intoxication can be defined as an organic imbalance caused by the interaction with one or more toxic agents, manifested by clinical or laboratory alterations. According to the World Health Organization (WHO), annually between 1.5% and 3.0% of the world population is affected by this type of intoxication. They can be intentional or not and represent an important cause of harm to health. **OBJECTIVES:** To describe the epidemiological profile of exogenous intoxication cases reported in the state of Piauí, Brazil, between 2011 and 2020. **METHODS:** Retrospective, cross-sectional and quantitative epidemiological study, based on secondary data from the Notifiable Diseases Information System, available on DATASUS, official online database of Brazil's public health system. All exogenous intoxication cases reported in the state of Piauí between the years 2011 and 2020 were included. The variables analyzed were: city of residence, gender, race, age group, education, area of residence, toxic agent, circumstance, type of exposure and evolution. **RESULTS:** In the period analyzed, 11,532 cases of exogenous intoxication were reported in the state of Piauí. The municipalities of Teresina and Floriano were responsible for 33.4% and 14.5% of the total notifications, respectively. There was a predominance of females (60.8%), mixed race (62.7%), aged between 20 and 39 years (39.4%), people with incomplete primary education (14%) and urban area residents (80.4%). The most frequent toxic agents were medications (52.3%), followed by food/drinks (7.5%) and household products (6.6%). The main circumstance involved was suicide attempt (39%), more frequent in adults, followed by accidental causes (18.2%), more common in children. Most exposures were of the acute/single type (53.1%) and evolved to cure without sequelae (70.8%). **CONCLUSION:** The analyzed data showed an epidemiological profile predominantly female, of mixed race and adult age regarding cases of exogenous intoxication in the state of Piauí from 2011 to 2020. The main circumstances involved were suicide attempts, among adults, and accidents, among children. More studies are needed to monitor the evolution of this profile over the years. Health promotion strategies that address the prevention of suicide and accidents, as well as the rational use of medications, must be implemented to reduce the incidence of this problem.

44. EPIDEMIOLOGICAL PROFILE OF COINFECTION CASES WITH TUBERCULOSIS AND HIV IN THE STATE OF PIAUÍ, BRAZIL, FROM 2015 TO 2020

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INTRODUCTION: Tuberculosis (TB) is the most frequent coinfection in people living with the human immunodeficiency virus (HIV), with a significant impact on the quality of life and mortality of this population. In order to guarantee comprehensive care for these patients, some of the recommended interventions are testing TB patients for HIV and organizing properly the health care network.

OBJECTIVES: To describe the epidemiological profile of TB and HIV coinfection cases reported in the state of Piauí, Brazil, between 2015 and 2020. **METHODS:** Epidemiological and retrospective study, based on secondary data from the Notifiable Diseases Information System, available on DATASUS, official online database of Brazil's public health system. All TB and HIV coinfection cases reported in the state of Piauí between 2015 and 2020 were included. The variables used were: sex, race, age, education, area of residence, clinical form of TB, use of antiretroviral therapy, comorbidities, special populations and outcome. **RESULTS:** In the analyzed period, 359 cases of coinfection with TB and HIV were reported in Piauí. Those patients were predominantly men (78.2%), mixed race (73.5%), aged 40 to 59 years (37.3%), with incomplete primary education (37.3%) and urban area residents (86.1%). The predominant clinical form of TB was pulmonary (69.1%). 54.6% of the coinfecteds were using antiretroviral therapy (ART). As for comorbidities, smoking (20.1%), alcoholism (19.2%) and diabetes (3.1%) stood out. Regarding situations of vulnerability, 5.6% of the patients were homeless, 2.2% were deprived of liberty, 1.4% were health professionals and 9.7% were beneficiaries of social programs by the government. Patients using ART had higher cure rates (42.3%) when compared to patients without ART (20%). **CONCLUSION:** The analyzed data showed a profile of TB and HIV coinfecteds in the state of Piauí, from 2015 to 2020, mostly male, of mixed race and adult age. Higher rates of cases were observed in people with low education, socially vulnerable or chemically dependent. Lastly, the importance of antiretroviral therapy for better outcomes in terms of TB was verified.

45. CRITICAL ANALYSIS OF THE RESULTS OF 61 LIVER RESECTIONS IN THE STATE OF PIAUÍ

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INTRODUCTION: Studies on the liver allowed a significant development of liver surgery, including hepatectomy, surgery of extreme importance for the treatment of various diseases. **OBJECTIVE:** To retrospectively evaluate complications and indications of liver resections performed by a single group of hepatopancreatobiliary surgery in several hospitals in Teresina-PI. **METHODS:** We analyzed the 61 cases of patients who underwent liver resections in several hospitals over a period of six years, according to a standardized spreadsheet. **RESULTS:** According to the technique, 54 procedures performed laparotomically, compared to 7 laparoscopically. The indications were 21 for metastases, 19 of them colorectal and 2 renal, 13 for hepatocarcinomas, 8 for vesicle adenocarcinoma, 4 for hemangiomas, 3 for liver cysts, 3 for cholangiocarcinomas, 2 for adenomas, 2 for Caroli diseases, 2 for focal nodular hyperplasia, 1 for inflammatory pseudotumor, 1 for tuberculosis, 1 for carcinoid tumor. In number of surgical procedures, 29 segmentectomies, 15 left hepatectomies, 12 right hepatectomies, 3 right trisegmentectomies, 1 metastasectomy and 1 segment VII radioablation were performed. The period in days in the ICU ranged from 0 to 32 days, with an average of 1.74 days being considered low, according to the literature showing an average of 12.5 days and 10.9 days. Of the 61 patients, only 11 required blood transfusion, 6.71% of patients, revealing a considerably lower result compared to 30.7% in the literature. Of the procedures performed 5 had complications (3.05%), results considered satisfactory in relation to studies with a rate of 17.64% of patients with complications on the same procedure. In the present study, an operative mortality rate of 2.44% was observed in 4 cases of deaths. **CONCLUSION:** Only in recent years

have liver resections become routine in surgical practice. This was allowed due to several advances in medical knowledge that enabled hepatectomies to be performed with low rates of morbidity and minimal mortality, which was crucial for the expansion of indications especially in the area of oncology and liver transplants.

46. NEWBORN PAROTIDAL HEMANGIOMA

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INTRODUCTION: Hemangioma is the most common benign vascular tumor in children, with a predisposition for females. The intraparotid location, although rare, can be found in the pediatric population. Parotid hemangioma represents an important and difficult differential diagnosis of salivary gland lesions in the neonatal period. Ultrasound and magnetic resonance imaging help in this diagnosis, providing information about the blood flow and morphological characteristics of the lesion. **CASE REPORT:** Female NB, 31 weeks, small for gestational age, born by cesarean delivery. It required neonatal resuscitation maneuvers and early continuous positive airway pressure (CPAP) to improve respiratory distress. On physical examination, still in the delivery room, a nodule was identified in the right cervical region, with a soft characteristic and painless on palpation, without inflammatory signs and without other associated symptoms. Ultrasound of the cervical region, in the first week of life, showed signs of mumps on the right and absence of collections. A control echography, in the following week, identified an increase in the right parotid, measuring 3.3 x 2.8 cm, with increased flow on Doppler. Cervical computed tomography confirmed the echographic findings, highlighting only an increase in the right parotid (3.3 x 2.8 x 2.8 cm). Laboratory tests ruled out an infectious origin and, given the diagnostic doubt, an incisional biopsy of the lesion was chosen. The intraoperative period suggested benign characteristics and the anatomopathological exam concluded the diagnosis of parotid hemangioma. The NB evolved without complications and was referred for outpatient follow-up. **FINAL CONSIDERATIONS:** Based on the above, parotid hemangiomas are rare and benign tumors, which, due to their fast and expansive growth, may require surgical management, given their proximity to the facial nerve. Although the diagnosis is clinical, ultrasound and magnetic resonance can help in the differential diagnosis, assess extension, adjacent structures, and risk of complications. Currently, the treatment of choice is with propranolol, which works by decreasing the proliferative phase and accelerating the involution phase. Subsequently, if necessary, surgical intervention is performed.

47. ANALYSIS OF THE CLINICAL-EPIDEMIOLOGICAL PROFILE OF NEONATES WHO UNDERWENT TREATMENT FOR ACUTE OBSTRUCTIVE ABDOMEN AND ITS CORRELATION WITH CONGENITAL MEGACOLON

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INTRODUCTION: Congenital Megacolon (CM), also known as Hirschsprung's disease, is a congenital anomaly whose intrinsic characteristic is the absence of intramural neurons from the Meissner and Auerbach myenteric plexuses, affecting the rectum and sigmoid colon. Thus, it causes abdominal distension, occurring soon after birth, with the presence of vomiting and delay in the elimination of meconium, without an immediately recognized mechanical obstructive factor. Diagnosis is made with barium enema and/or rectal suction biopsy. Treatment consists of reconstructing the intestinal transit, using the Duhamel, Soave or Swenson techniques.

OBJECTIVES: To analyze the clinical and epidemiological profile of neonates who underwent exploratory laparotomy (LE) for the treatment of acute obstructive abdomen and its correlation with CM.

METHODS: From January 2019 to August 2020, 56 patients diagnosed with acute abdomen who underwent LE in a reference maternity hospital in the state of Piauí were analyzed retrospectively. The study was previously approved by the ethics committee of Uninovafapi, opinion n. 4,244,574. **RESULTS:** Among 56 patients, 10 were diagnosed with MC. The average age of the pregnant women was 30 years, among which 40% had no prenatal care, the others had 5 or more consultations. In the delivery route, 90% progressed to cesarean, with an average of 34 weeks and 2 days of gestational age. The mean apgar was 6 on the 1' and 9 on the 5. Most evolved with abdominal distension, vomiting and absence of bowel movements. A colostomy with colonic biopsy was performed in multiple regions, showing the absence of myenteric plexuses. 60% of patients died, sepsis being the main cause (66%), followed by pulmonary hemorrhage (34%). 40% of patients were discharged with an average of 1.5 months of hospitalization, in an outpatient follow-up.

CONCLUSION: The anatomopathological evaluation is essential for the diagnosis of CM, through the identification of aganglionosis. The objective colostomy, in addition to diagnosis, is to maintain the patient's clinical stability for future definitive surgical treatment. However, the results of biopsies obtained late, associated with the low prevalence of this atypical clinical condition, contribute to the great difficulty in making a diagnosis, despite the availability of specialized care and complementary laboratory and radiological tests.

48. EPIDEMIOLOGICAL PROFILE OF TUBERCULOSIS IN SMOKERS – PIAUÍ, 2014-2020

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INTRODUCTION: Tuberculosis (TB) is a disease transmitted mainly by the airways and is characterized by granulomatous necrotizing pulmonary inflammation, although extrapulmonary sites may be involved. Among the risk factors for infection and development of the active form of the disease are smoking and passive exposure to smoke, which contribute to a worse prognosis and worse response to treatment, besides being associated with a higher risk of death from TB. **OBJECTIVE:** To describe the epidemiological profile of TB cases in smokers in Piauí State from 2014 to 2020. **METHODS:** Epidemiological, descriptive and retrospective study, with data about new TB cases in smokers obtained from the Notifiable Diseases Information System (SINAN), from 2014 to 2020. The variables sex, age, notification city, education level, alcoholism, form of the disease and treatment were used. Frequency and linear trend analyze were performed using TabWin and EpiInfo 7, respectively. **RESULTS:** There were 594 new TB cases reported in smokers residing in Piauí. Most cases occurred in residents of Teresina (n=240; 40.4%); in the male

population (n=468; 78.8%); in the age group from 40 to 59 years (n=242; 40.7%); in the illiterate population with incomplete primary education (n=348; 58.6%) and in the pulmonary form of the disease (n=531, 89.4%). Regarding alcoholism, 43.8% of the cases were alcoholics (n=260). Directly observed treatment (DOT) for TB was recorded in 44.9% of cases. There was an increasing trend in the proportion of TB cases in smokers in relation to the total number of TB cases: the overall proportion was 13.3%, ranging from 2.2% in 2014 to 18.6% in 2020 (beta =2.076; r2=0.71; p-value=0.018). **CONCLUSION:** TB in smokers was more frequent in the pulmonary form, in males, middle-aged and among those with low education, with cases reported mainly in the state capital and with an important association with alcoholism, another risk factor for the disease. Standard DOT treatment was performed in most cases. There was a significant increase in TB infection in smokers, which requires improvement in the planning of prevention and control actions at all levels of care, including prevention, early diagnosis, and treatment.

49. CLINICAL-EPIDEMIOLOGICAL ANALYSIS OF NEWBORNS WITH GASTROSQUISIS IN REFERENCE MATERNITY IN PIAUÍ

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INTRODUCTION: Gastroschisis (GTQ) is characterized by a defect in the formation of the anterior abdominal wall, associated with the extrusion of abdominal organs. Its prevalence is 0.5-7 per 10,000 live births. Due to great advances, the diagnosis still occurs in the prenatal period, from the 16th week by gestational USG. Do death rates range from 3 to 10? high morbidity in the neonatal period is associated with factors related to slow post-surgical intestinal adaptation, such as the use of prolonged parenteral nutrition and long-term central venous catheters, infections and renal aggression. The complexity of this malformation and its association with other complications that require surgical management make short bowel syndrome challenging, prolonging the length of hospital stay and promoting a sum of comorbidities. **OBJECTIVES:** To evaluate the clinical-epidemiological profile of newborns diagnosed with gastroschisis in a reference maternity hospital in Piauí, in order to describe the morbidities related to postnatal clinical management. **METHODS:** Newborns diagnosed with GTQ between the years 2019 and 2020 were retrospectively evaluated. The study was previously approved by the ethics committee of Uninovafapi, opinion n. 4,244,574. **RESULTS:** 9 cases of GTQ were analyzed, with a mean maternal age of 21.7 years, of which 3 did not attend prenatal consultations, 2 attended less than 5 consultations and 4 attended more than 5 consultations. Among them, 22.2% used alcohol and/or drugs during pregnancy. Mean gestational age was 35 weeks and 6 days, and weight 2302.7g. The evolution of the newborns had an average time of 52 days, with high mortality rates (66.6%), much higher than in the literature, due to the high complexity of the cases, associated with complications that worsened the patients' prognosis (sepsis 88, 8%), in addition to multiple surgical re-approaches (88.9% with 2 or more approaches). In cases of isolated GTQ, the prognosis was better when compared to cases associated with other comorbidities (meconium ileus 22.2%, intestinal malrotation 33.3%). **CONCLUSION:** GTQ is an early detection disease, enabling the programming of ideal care in tertiary

centers, favoring the reduction of neonatal mortality and the improvement of results in the medium and long term. Mortality rates are high, due to the complexity of the cases addressed in the reference maternity hospital, in addition to the low adherence to prenatal care.

50. CAUSE-SPECIFIC MORTALITY INDICATORS IN THE STATE OF PIAUÍ FROM 2014 TO 2018: AN EPIDEMIOLOGICAL STUDY

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INTRODUCTION: The epidemiological profile of populations has been changing and mortality data is used to demonstrate the health situation in different spaces. One of the variables used in this type of analysis is the specific cause of death. Diseases of the circulatory system, respiratory system, and neoplasms (tumors) are the most representative in numerical terms. **OBJECTIVE:** To perform an analysis of data on cause-specific mortality indicators between the years 2014 to 2018 in Piauí. **METHODS:** This is an observational, cross-sectional, and retrospective study, with a quantitative approach, using data from the Notifiable Diseases Information System (SINAN) and the SUS IT Department (DATASUS). Indicators of mortality due to diseases of the circulatory, respiratory and neoplasms were analyzed in relation to gender, race and age group. **RESULTS:** There were a total of 96,951 deaths, 32.54% corresponding to circulatory diseases, 9.94% respiratory diseases and 13.94% to neoplasms. The number of deaths from diseases of the circulatory system was 31,551, being prevalent in males (53.4%). 9,361 deaths represented diseases of the respiratory system, with 50.27% in men. 13,517 deaths were related to deaths from cancer, 51.46% corresponding to males. 66.53% of deaths from circulatory system disease occurred in the brown race. Regarding deaths from respiratory diseases, 18.82% occurred in the brown race and 2% in the black. On the other hand, neoplasms were responsible for 9.54% of deaths for white individuals, 26.37% brown and 3.73% black. In the group of individuals over 80 years of age, deaths from diseases of the circulatory system corresponded to 42.15%, while 50.35% were related to deaths from respiratory diseases and 19.91% to deaths from cancer. **CONCLUSION:** Diseases of the circulatory system are the most prevalent cause of death in Piauí, with a predominance of mortality in males. As they are mostly chronic diseases, there is an increase in prevalence in the age group over 80 years. Thus, there is a need to implement changes in the lifestyle of the still young population, in order to reduce these numbers.

51. EPIDEMIOLOGICAL PROFILE OF CONGENITAL SYPHILIS IN THE STATE OF PIAUÍ IN 2018

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INTRODUCTION: Congenital syphilis is an infectious disease caused by *Treponema pallidum* through vertical transmission to the fetus of a pregnant woman with previously untreated syphilis. The increase in the number of cases may reflect failures in prenatal care, hence the importance of gathering data on the occurrence of this disease. **OBJECTIVES:** to conduct an epidemiological survey about congenital syphilis in the state of Piauí during the year 2018. **METHODS:** This is a retrospective, cross-sectional, descriptive, and quantitative study, which analyzed data on congenital syphilis in the year 2018 in Piauí, collected from the Information System for Notifiable Diseases (SINAN) and the Information System on Live Births (SINASC), through DATASUS. The results were grouped in Microsoft Excel® spreadsheets and displayed in graphs and tables. **RESULTS:** There were a total of 26,307 diagnosed cases of congenital syphilis. The incidence of the disease was 9 cases per 1,000 live births. 96.8% were diagnosed in children less than 7 days old. 93.6% of the cases were recent congenital syphilis, 0.2% late congenital syphilis and 6.2% stillborn/dead. In the maternal history, most were mixed race (58.4%), with a predominance of cases in the maternal age group of 20-29 years (53.6%). Regarding prenatal care, 81.8% of women performed it properly. As for the diagnosis of syphilis in pregnant women, 57.6% occurred during prenatal care and 31.8% during delivery or curettage. Treatment for syphilis during pregnancy was adequately performed in only 5.6% of cases, while 54.6% performed it inadequately and 26.4% did not perform any treatment regimen. Partner treatment was performed in 22.2%, while 53.2% of partners did not receive therapy. **CONCLUSION:** The increased incidence of congenital syphilis indicates failures in prenatal care. Among them, a low adherence of pregnant women to treatment after diagnosis and treatment of sexual partners can be suggested. When the appropriate therapy is not applied, the transmission chain and the increase in the numbers of congenital syphilis are maintained. Changing this scenario will only be possible when strategies aimed at prevention and control are systematically applied.

52. SEVERE RESISTANT PEMPHIGUS VULGARIS IN TREATMENT WITH RITUXIMAB

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INTRODUCTION: Pemphigus is an autoimmune disease, caused by autoantibodies against antigens on the skin and mucosa of the body, causing acantholysis. Pemphigus vulgaris is one of the classical presentations. It involves the formation of blisters of various sizes on the skin and lining of the mouth and on other mucous membranes. The development can occur at any age, however it is more prevalent from the fourth to the sixth decade, without differentiation between sexes. **CASE REPORT:** Female, 62 years old, controlled hypertension using losartan 50mg. She presented with extensive crusted and exudative infected skin lesions on the left shoulder and chest, multiple blisters that evolved after a few days into erythematous and urticarial crusts on the arms and forearms. The diagnosis of pemphigus vulgaris was established based on the clinical picture and skin biopsy. During the first hospitalization, treatment with methylprednisolone, azathioprine, ceftriaxone and vancomycin was initiated. She presented mycosis on her breasts, treated with

fluconazole, possibly caused by immunosuppression from the overuse of corticoids. She was discharged after 9 days with improvement, but returned to the outpatient clinic after 2 weeks, in poor general condition, with worsening skin lesions and presenting Cushing's syndrome due to high doses of corticosteroids. On the same day she was hospitalized and treated with two doses of rituximab 500mg by slow intravenous application, each dose one week apart. At the same time, the patient was weaned from corticosteroids, maintaining 60mg of prednisone a day. The patient evolved after 10 days of hospitalization with a good response to the medication infusion, without side effects. After the third hospitalization for the dose of rituximab, the lesions regressed and only residual hyperchromic spots remained. She is currently seeing a dermatologist or endocrinologist for follow-up and orientations. **FINAL CONSIDERATIONS:** The case described points out the benefit of using rituximab in a severe resistant case of pemphigus vulgaris. Through this report and other few cases described in the literature, we can conclude that the use of rituximab is a good choice in relation to the usual immunosuppressive treatment in cases resistant to treatment. It is worth noting that this treatment should be used in patients presenting with moderate to severe pemphigus vulgaris and may be an opportunity to reduce the corticosteroid damage associated with standard treatment regimens, in addition to demonstrating significant improvement in skin lesions.

53. TRAQUEAL ATRESIA WITH BRONCHESOPHAGEAL FISTULA

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INTRODUCTION: Tracheal atresia is a rare disease of unknown origin and usually lethal. It consists of the partial or total absence of the trachea, below the larynx, as a consequence of the abnormal development of the laryngotracheal sulcus in early pregnancy. The lower respiratory tract is usually connected to the gastrointestinal tract (GIT) through three presentations of fistulas, including the bronchoesophageal fistula. The absence of any fistula between the airways and the TGI is incompatible with life. **CASE REPORT:** Male, 36 gestational weeks, born by cesarean section with prenatal diagnostic suspicion of duodenal atresia (DA). At birth, APGAR 2 and 1 at 1 and 5' respectively, requiring cardiopulmonary resuscitation and airway management. Due to the impossibility of orotracheal intubation due to tracheal atresia, verified by direct visualization at laryngoscopy and emergency cervical surgical exploration, esophageal intubation was performed, evolving with good pulmonary expansion, consequent to the presence of a bronchoesophageal fistula. On clinical examination, identified anorectal anomaly, without evidence of fistula. Post-intubation chest/abdominal radiography showed expanded lungs and the "double-bubble sign", corroborating the prenatal diagnostic hypothesis of AD. After minimal clinical stabilization, at surgery, the presence of complete persistence of the omphalomesenteric duct was also observed. Duodenoduodenostomy and distal loop ileostomy were performed, considering the associated GIT malformations. AD made it possible to maintain ventilatory pressure. After surgical correction, the patient evolved with progressive respiratory failure and died in less than 12 hours. It was not possible to assess the presence of cardiac or genitourinary malformations.

FINAL CONSIDERATIONS: Tracheal atresia is usually accompanied by other malformations, characterized as part of a syndrome or sequences. Despite being considered lethal, when there is a fistula the reconstruction of the respiratory system can be performed. Performing procedures such as EXIT (ex utero intrapartum treatment) could improve the management of patients with respiratory tract obstruction.

54. VIRAL ARBOVIRUS ENCEPHALITIS: SEVERE INVOLVEMENT WITH SYSTEMIC REPERCUSSIONS

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INTRODUCTION: Encephalitis is an inflammation of the brain parenchyma associated with neurological dysfunction, which can occur alone or in association with meningitis, myelitis, radiculitis, or neurites. Its main causes are infectious, autoimmune, and post-infectious. Arbovirus encephalitis occurs in the acute phase of the disease. This event is rare, but with an increased incidence after the Zika Virus epidemic. **CASE STUDY REPORT:** Male, 13 years old, began the case with hyporexia and unmeasured fever. On the third day, the patient started to present vomiting and diarrhea, treated with symptomatics. On the fourth day, the patient presented retrograde amnesia, motor imbalance, ataxic gait, and bradycardia with a heart rate (HR) of 49 beats per minute (bpm), needed to be transferred to the Intensive Care Unit. There is no report of exogenous intoxication. On admission: Regular state, eupneic in natural air, hydrated, pale, and acyanotic. Regular heart rate, in two beats, normal heart sounds, HR 49 bpm, and 128/69 mmHg blood pressure. Central and peripheral pulses were normal with capillary refill time under 2 seconds. Glasgow Coma Scale of 14 points, losing one point in some disoriented verbal responses. Pupils were isochoric, medium-sized, reacting slowly to light input. Liquor 5 cells; protein 57 mg/dL; anti-myelin oligodendrocyte glycoprotein, anti-thyroid peroxidase, and negative oligoclonal bands. Serum serology: negative serology, except for Zika and Chikungunya, whose immunoglobulin M was reactive. Magnetic Resonance of the head: areas of signal alteration spread out along the cortical region of the cerebral hemispheres, as well as in the basal ganglia, thalamus, left hippocampus, and brainstem. Normal electrocardiogram and echocardiogram. Normal myoglobin, troponin, creatine kinase, and creatine phosphokinase levels. 24-hour Holter: no change in rhythm and frequency. He was empirically treated with ceftriaxone, acyclovir, and dexamethasone, with significant clinical improvement on the third day of treatment.

FINAL CONSIDERATIONS: Infectious encephalitis can manifest in altered mental status, confusion, behavior change, agitation or interruption of the sleep-wake cycle. Although arboviruses are a rare cause of encephalitis, the current growing number of arbovirus infections justify the inclusion of viruses in the etiological investigation of encephalitis.

55. EPIDEMIOLOGICAL PROFILE OF PATIENTS WITH TUBERCULOSIS IN THE CITY OF SÃO LUÍS FROM 2015 TO 2020

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de Oliveira¹, Paulo Ricardo Pereira de Souza¹ and Almir José Guimarães¹.

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INTRODUCTION: Tuberculosis is a bacterial infection transmitted by the airways that is caused by *Mycobacterium tuberculosis*. Due to the fact that it's the respiratory infection with the highest mortality in the world, there is a need for an active search and early treatment to prevent it to spread (WHO, 2021). However, due to the COVID-19 pandemic in 2020, the diagnosis of this disease dropped 15% in the American continent compared to 2019 (PAHO, 2021). Specifically in Brazil, there was a decrease in the incidence rate of 5.8/100 thousand inhabitants for the same reason, according to the 2021 Epidemiological Bulletin of the Health Surveillance Secretariat (SVS). In Maranhão, also occurred a decrease in the notifications, representing a drop of approximately 6% when comparing the two years, according to data from DATASUS. **OBJECTIVES:** To analyze the epidemiological profile of patients affected by tuberculosis in the city of São Luís (MA), from January 2015 to December 2020. **METHODS:** This is a time series study, with data presented in the form of absolute and relative frequency. The adopted variables were: sex, age group, race and region, and the data collected were from January 2015 to December 2020, based on secondary data extracted from DATASUS. **RESULTS:** During the period stipulated by the research, there were, in total, 14,957 cases registered in Maranhão, of which 6,928, were located in the city of São Luís. The profile analyzed in the city of São Luís presents a prevalence in males (4,704 cases/total), with the corresponding age group between 20- 39 years (3,352 cases/total), with the predominant race being brown (5,426 cases/total). **CONCLUSION:** The profile resulting from the epidemiological analysis carried out verified a predominance of the male population and aged between 20-39 years, with the brown race being the most prevalent, corroborating the existing literature (BRASIL, 2021). In this way, the outline of the conclusions obtained, through the results presented, will be more enlightening with the advancement of knowledge and the confirmation of preliminary data that, by creating a mechanism to aid in early diagnosis, will avoid underreporting, thus delimiting a more precise epidemiological picture within the city of São Luís, as well as extending to the national context.

56. ANALYSIS OF OUTCOME OF LEPROSY CASES IN THE NORTHEAST REGION OF BRAZIL BETWEEN THE YEARS 2015 AND 2020

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INTRODUCTION: Leprosy is a chronic, granulomatous disease, characterized by loss or decrease in thermal, tactile and pain sensitivity, explained by the tropism of the *Mycobacterium Leprae* bacteria for skin and peripheral nerves. In Brazil, this disease still has a high prevalence rate, being endemic. Thus, it is important to observe the results of the treatment of patients with this disease. **OBJECTIVES:** To analyze the outcomes of leprosy care in the Northeast Region of Brazil, between 2015 and 2020. **METHODS:** Cross-sectional, retrospective and descriptive study using secondary data made available in the Sistema de Informação de Agravos de

Notificação - SINAN (Information System for Notifiable Diseases) referring to leprosy cases from 2015-2020. Variables were used such as: sex, age, type of exit and disability assessment at the time of healing. The data were tabulated in EXCEL spreadsheets for study.

RESULTS: In the five-year period analyzed, 84,126 cases of Leprosy were registered in the Northeast region. The most affected age group was that between 40 and 49 years ($f=18.2\%$, $n=15323$) and cases were more prevalent in males ($f=56.10\%$, $n=47202$). The most frequent clinical form was the dimorphic form ($f=42.3\%$, $n=35,628$), followed by the virchowian form ($f=16.8\%$, $n=14,172$). As for the outcome of the disease, 24.31% of patients ($n=9213$) had some degree of disability at the time of cure and there was an overall average for the Northeast region of 5.57% treatment abandonment rate, more pronounced in the state of Pernambuco, where this rate reached 7.02%. Regarding the number of doses, 6 doses were more frequently recorded in the paucibacillary form ($f=32.7\%$), and less than 12 months in the multibacillary form ($f=45.5\%$). **CONCLUSION:** Throughout the Northeast region, there was a high rate of patients with sequelae of the disease and of treatment abandonment. This fact ratifies the finding of predominant clinical forms, the dimorphic and virchowian being responsible for the potential transmission and perpetuation of the disease. The outcomes of the care given to leprosy patients are of utmost importance, since they show which types of patients should receive more attention, both in terms of diagnosis and continuity of treatment. In addition, it provides information about how the treatment of the disease has been applied in recent years and can also bring changes in the approach to the patient and there is greater promotion of health education on leprosy for the population.

57. CLINICAL-EPIDEMIOLOGICAL PROFILE OF NEWBORN CHILDREN DIAGNOSED WITH GASTRIC PERFORATION IN REFERENCE MATERNITY

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INTRODUCTION: Gastric perforation is characterized by perforation of some portion of the stomach, releasing gastric contents into the peritoneal cavity. In newborns, they are mostly idiopathic, occur more in the first week of life and tend to affect preterm infants more often. The clinic presents with sudden abdominal distension, dyspnea, vomiting, lethargy, and severe pneumoperitoneum. Some of the risk factors described are perinatal stress, prematurity, use of corticosteroids, the need for positive pressure ventilation and the use of an orogastric tube. Traditional surgical and laparoscopic approaches have been used for treatment. **OBJECTIVE:** Define the incidence, profile and prognosis of patients diagnosed with gastric perforation in a reference maternity hospital in Teresina-PI, from March 2019 to March 2020. **METHODS:** This is an observational, cross-sectional, quantitative study, descriptive and retrospective, through the review of medical records of patients admitted to a reference maternity hospital with a diagnosis of gastric perforation, during the study period. **RESULTS:** The incidence of gastric perforation in the analyzed period was 1 case for every 1,311 live births (0.076%). There were 7,867 live births, 68 underwent laparotomy and 6 were diagnosed with gastric perforation. All patients in the sample were premature (gestational age between 31

and 36 weeks) and abdominal distension was the main clinical manifestation (50%). Gastrorrhaphy was performed in all cases. Two patients needed treatment for intestinal malrotation, one for annular pancreas and two cases required surgical re-approach. The maximum hospital stay was 2 months. Two deaths were reported and 4 patients were discharged from the maternity hospital. **CONCLUSION:** There was an incidence of 0.076% of gastric perforations. Gastrorrhaphies accounted for 8.82% of the service's laparotomies. It was possible to observe prematurity as the main risk factor and abdominal distension as the main clinical manifestation. Gastrorrhaphy was necessary in all cases, with the need for re-approach in 2 cases. The mortality rate was high (33.3%), with a worse prognosis when associated with premature amniorrhexis, gestational age less than 32 weeks and reoperation.

58. THE ROLE OF PEDICLE SUBTRACTION OSTEOTOMIES IN CORRECTING SAGITTAL BALANCE IN AN ANKYLOSING SPONDYLITIS PATIENT: A CASE REPORT

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INTRODUCTION: Ankylosing spondylitis (AS) is a chronic inflammatory disease characterized by inflammation in the axial skeleton and sacroiliac joints, with pain, stiffness and progressive joint ankylosis. Studies have shown that one of the main postural changes is the accentuation of thoracic kyphosis with anteriorization and lowering of the center of gravity associated with hip flexion, which causes compensation in the knee and ankle. These changes lead to imbalance in the sagittal axis and impair the patient's horizontal gaze, walking, as well as compromising daily activities, quality of life and the functioning of the viscera due to compression. **CASE REPORT:** Male, 54 years old, Catholic, born and raised in Uruçui-PI. He complains of fixed spinal deformity for 19 years without previous diagnosis, smoker, with no other associated complaints. History of current disease: patient with ankylosing spondylitis, with a history of progressive spinal deformity in kyphosis and inability to look to the horizon. In imaging exams, Pelvic Incidence (PI): 76°, Lumbar Lordosis (LL): 6°, PI-LL Mismatch: 70°, Pelvic Tilt (PT): 56°, Sacral Slope (SS): 20°, Sagittal Vertical Axis (SVA): 20cm, Chin-Brow Vertical Angle (CBVA): 31°. Given the clinical picture of extensive involvement of the spine and spinopelvic imbalance with pelvic retroversion and knee flexion, we opted for pedicular subtraction osteotomies (PSO) at two levels (T12 and L3). The procedure was performed in two stages with an interval of 1 week, due to the large blood loss that occurs in the PSO (about 1800 mL of blood). There was a significant reduction in the parameters of sagittal balance. **FINAL CONSIDERATIONS:** PSO is one of the main techniques for correction of fixed sagittal deformities, consisting of a 3-column osteotomy, with gain of up to 30° of lordosis. This technique consists of closing the wedge resulting from pedicular subtraction, which avoids rupture of the adhered large vessels or with calcifications, common in patients with chronic and inflammatory diseases. There was an improvement in all sagittal balance parameters, with improvement in health-related quality of life scores not related to low back and cervical pain. Pre and postoperative data were obtained through the NDI (Neck Disability Index) and Oswestry Disability Index questionnaires.

59. PARADOXAL ADIPOSE HYPERPLASIA POST CRYOLIPOLYSYS: A CASE REPORT

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INTRODUCTION: Cryolipolysis is an aesthetic procedure characterized by adipocyte death by apoptosis, which is based on the concept that fat cells are more susceptible to cold than skin, nerve or muscle cells, resulting from a localized cold panniculitis. The procedure is performed using a specific device that features a concave applicator with two cooling plates, responsible for sucking the adipose tissue from the area to be treated into the cavity using a moderate vacuum. Although, when performed with the proper technique and respecting the contraindications, it is considered a relatively simple procedure, it can present adverse effects, including edema, sensory alterations, burns and paradoxical adipose hyperplasia. The latter boils down to an initial reduction in the volume of the treated area, followed by an increase in volume, leading to a bulge in the area with the shape of the applicator. Such an effect is quite rare, and the focus of this study. **CASE REPORT:** A 32-year-old female patient, nulliparous, using OAC and without other comorbidities, seeks care for presenting bulging in the epigastric region, starting in the first month after undergoing a procedure in an aesthetic clinic to eliminate fat located. On physical examination, there was a mass with a soft consistency, not adhered to deep planes, painless to touch and deep palpation, suggestive of lipodystrophy. The abdominal wall ultrasound corroborated the diagnostic hypothesis. We suggest that this change was due to the cryolipolysis procedure performed. The liposuction procedure was suggested. **FINAL CONSIDERATIONS:** Cryolipolysis has been shown to be the non-invasive mechanism with the best performance in the treatment of localized fat so far, with the highest satisfaction rate when compared to similar technologies. This procedure is considered safe, however, the technique must be strictly followed, both in its indication and in its execution. In addition, the presence of a physician is necessary in the indication and execution of this procedure, as well as in the follow-up of the treatment, as cryolipolysis is susceptible to adverse effects, such as the one that occurred in the aforementioned case, which must be explained to the patients beforehand.

60. PNEUMOCYSTOSIS AS A DIFFERENTIAL DIAGNOSIS OF COVID-19

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INTRODUCTION: Pneumocystosis is an opportunistic disease caused by the fungus *P. jirovecii*, which is responsible for febrile and potentially fatal pneumonia in immunodeficient patients, especially those infected with HIV. Pneumonia caused by this fungus has decreased in recent decades after the introduction of antiretroviral therapy. Computed tomography is one of the tests performed in patients with respiratory symptoms, and in patients with pneumocystosis as well as in patients with COVID-19 diffuse or regional and often bilateral ground-glass infiltrates can be found. **CASE REPORT:** Male patient, 57 years old, from Esperantina-PI, presenting asthenia, lethargy and frank dyspnea, intercostal

retraction, and use of supplemental oxygen therapy. A chest CT was performed, demonstrating "Multiple opacities with sparse ground-glass attenuation in both lungs, affecting 75% of the parenchyma". COVID-19 RT-PCR was not reagent. He underwent rapid tests for detection of antibodies to Syphilis and HIV, both reagent (previously unknown), as well as sputum analysis, is without the presence of BAAR, but showing Yeasts in budding, suggesting Pneumocystosis by serological history. He presented whitish and painful plaques on the jugal mucosa and ventrolateral region of the tongue, removable, in addition to odynophagia, dysphagia, and anorexia suggestive of oral and esophageal candidiasis, a defining disease of AIDS, therefore, he used a nasoenteral tube. On auscultation, he presented diffuse and bilateral fine holoinspiratory rales. A new chest CT was performed, and the initial alterations remained. After 3 days, he was referred to the ICU, intubated, and under use of vasoactive drugs and analgesia. **FINAL CONSIDERATIONS:** According to the current epidemiological context, the presence of ground-glass opacifications on CT scan indicates a viral infectious process caused by COVID-19. However, when after performing other tests that reveal the non-infection by coronavirus, one should immediately think of other etiologies such as pneumocystosis. Because it is still one of the most important causes of mortality among AIDS patients. Therefore, patients with suspected pneumocystosis should be immediately submitted to anti-HIV serologic tests. Patients who present viral infection by HIV, after a long asymptomatic period of about 8 years and without ART develop immunodeficiency syndrome that leads to opportunistic infections, such as pneumocystosis.

61. ATYPICAL CHRONIC INFLAMMATORY DEMYELINATING POLYNEUROPATHY IN A GLOVE BOOT PATTERN

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INTRODUCTION: Chronic Inflammatory Demyelinating Polyneuropathy is part of the spectrum of immune-mediated inflammatory polyneuropathies, with prevalence ranging from 0.8 to 8.9/100,000 inhabitants. It manifests by means of immunomediated affection to peripheral nervous structures, resulting in progressive reduction of muscle strength, especially proximal groups and absence/reduction of neuromuscular reflexes. The presentations are classified into typical and atypical groups, based on the symmetry of involvement and presence of extra-neuromuscular signs/symptoms, requiring electroneuromyographic evaluation. It is usually associated with immunological stress reactive to pathologies/immunotherapies. **CASE REPORT:** Male patient, 40 years old, reports onset in 2019 of bilateral paresthesia in the toes, with succession of 3-4 crisis episodes, with bilateral, symmetrical and distal-proximal progression of symptoms in the 4 limbs. In the year 2021, in the upper limbs, he presents hyporeflexia, paresthesia, and paresis of fingers, with predominance in the ulnar region, with preservation of tactile sensitivity. In the lower limbs, he has hyporeflexia, paresthesia, and paresis below the knee and generalized loss of tactile sensitivity in both feet, defining an atypical demyelinating neuropathy symmetric distal to proximal, with talon gait, suggestive of sensory ataxia, that is, atypical presentation of motor and sensory PDIC. Electroneuromyography of the upper and lower limbs showed

alterations compatible with chronic peripheral sensory-motor polyradiculoneuropathy, with signs of disease in activity, of accentuated degree and mixed pattern with a primarily demyelinating pattern in the boot-glove, associated with albumin-citological dissociation in the cerebrospinal fluid, confirming the diagnosis of PDIC. He is under treatment with endovenous immunoglobulin and corticoids. He reports previous treatment and negative bacilloscopy for leprosy. **FINAL CONSIDERATIONS:** The electroneuromyography is a good diagnostic criterion evidencing demyelinating alteration in fibers in its majority, related to little motor impairment. It is very important to monitor and disclose the clinical forms, helping to plan the therapeutic protocols of immunosuppressants according to the patient's demand, because the worsening of the clinical form of PDIC is associated with progressive increase in the scale of functional impairment.

62. CONFLUENT AND RETICULATED PAPILLOMATOSIS OF GOUGEROT-CARTHEAUD: DIAGNOSTIC CHALLENGE AND THERAPEUTIC SUCCESS WITH AZITHROMYCIN

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INTRODUCTION: Confluent and Reticulated papillomatosis of Gougerot-Cartheaud (PCR) is a genodermatosis of ceratinization, still unknown etiology. As major theories include bacterial trigger by dietzia papilomatosis, cutaneous response exacerbated to P. orbicular, endocrine disorders related to insulin resistance, ultraviolet light-induced epidermal change, amyloid deposition and mutation in keratin 16. It is characterized by papules and hyperpigmented hyperactive plates, with peripheral cross-linking in the trunk (thorax, abdomen and back) which, occasion, extend one of them of them regions. Histopathological findings are nonspecific and include hyperkeratosis, acanto, papillomatosis and surface perivascular lymphocyte infiltrate. The inferential digestic diagnoses income nigricans, pityriasis versicolor, congenital disceratosi, amyloidosis macular, land firm-shape, derier diseases, Dewling-Deggos and Galli-Galli. It ivora the use of topical keratolitics, retinides or antifungal and isotretinoin, acitretin and oral antifungal is to be relatious, minocycline and azithromycin therapy - with anti-inflammatory, antibacterial and immunomodulating action is being preferred. **CASE REPORT:** male patient, 19 years, student, semorbidities, from Timon-Ma, with complaint of "chest spots", 3 years ago. It reported that in 4 previous consultations received diagnosis of pityriasis versicolor and used imidazolic (itraconazole, terbinafine and ketoconazole oral associations to cetoconazole and miconazole topics), without improvement. At the examination he presented hypercromic, keratotic micropines, confluing on chest plates in the thorax, upper abdomen and cervical region. The histopathological evidenced epidermis papillomatosis, acanto, hyperkeratosis and discreet infiltrate infiltrate infiltrate mononuclear perivascular mononuclear NAFERME, corroborating with a clinical Hypothe of PCR. It was prescribed azithromycin (500mg once a day for 3 consecutive days in the week, for 6 weeks) and 10% urea formula + 12% ammonium lactate. After 8 weeks, he returned with complete remission. **CONCLUSION:** Despite being rare and beniger dermatosis, knowing how to recognize a PCR is fundamental to avoid misleading diagnoses and treatments and disposed, which generate a certain

anxiety to patients. In this case, as clinical characteristics and histopathological findings were typical and there was a favorable response to the administration of azithromycin, safe and low-cost therapy.

63. EPIDEMIOLOGICAL PROFILE OF HOSPITAL ADMISSIONS OF RESIDENTS OF PINHEIRO (MA) FOR TREATMENT OF INGUINAL HERNIA BETWEEN 2015 AND 2021.

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INTRODUCTION: Hernia is defined as a protrusion or projection of an organ or part of an organ through the body wall that normally contains it. (BROOKS and HAWN, 2021). The indicated treatment is surgical correction, and, in inguinal hernia, it is carried out urgently in patients with complications such as strangulation. (BROOKS and HAWN, 2021; BROOKS, 2021). According to the Brazilian Society of Hernia and Abdominal Wall (SBH, 2021), in 2020, 139,400 hospitalizations/surgeries were performed for abdominal wall hernia repairs, via the Unified Health System (SUS), and in Maranhão, there were more than 34 thousand cases (DATASUS). **OBJECTIVE:** To analyze the epidemiological profile of patients hospitalized for treatment of inguinal hernia in Pinheiro (MA) between January 2015 and July 2021. **METHODS:** This is a time series study with data presented as absolute and frequency relative, adopting as variables: sex, age group, race and nature of the service, during the period from January 2015 to July 2021, based on secondary data extracted from DATASUS. **RESULTS:** The research had a total of 797 cases of inguinal hernia hospitalizations, peaking in 2017 (142) and falling 47.5% in 2020 (74), corroborating the SBH bulletin (2021) that, due to COVID-19, there was a reduction of 47.8%. The profile resulting from the analysis is mostly male (661), aged between 50-59 years old and with prevalence pf emergency care (468), which confirms the results of Brooks & Hawn (2021), males being eight times more likely to develop a hernia in this age group. As limitations, the study had data referring to race/color and treatment regimen for the most part filled in as "ignored", represented, respectively, by 572 and 699 cases. **CONCLUSION:** The profile resulting from the epidemiological analysis of patients hospitalized for inguinal hernia in the city of Pinheiro (MA) found a predominance of men, aged 50-59 years, who were taken to medical care due to the clinical urgency of possible complications. Thus, as it is a follow-up study, the outlining of the conclusions obtained through the results presented will be more informative with the advancement of data and, with these, to create mechanisms to aid in the early diagnosis of patients in the city of Pinheiro (MA), as well how to extend to the national level.

64. REINFUSION OF CHYME IN A PATIENT WITH SHORT BOWEL SYNDROME

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INTRODUCTION: The surgical approach to intestinal pathologies often requires the use of temporary treatment, such as enterostomies

(PICOT et al., 2016). A therapeutic solution that has been particularly studied in recent years is the reinfusion of chyme into a double enterostomy, a technique that reduces parenteral nutrition time, allows for an effective restoration of intestinal absorption, and reduces hospital stay (KITTSCHA, 2016; PFLUG et al., 2013). The case below narrates the application of the technique addressed in an oncology patient, treated at the Hospital Santa Maria in Teresina - PI, where colectomy and reinfusion of the chyme were performed. **CASE PRESENTATION:** A 61-year-old male patient with a history of smoking, peripheral arterial disease and atherosclerosis underwent colectomy at the splenic angle topography followed by primary anastomosis. After successive hospitalizations, the patient returned to the hospital in July 2020, presenting vomiting and exteriorization of the loop of the small intestine in colostomy, with obstruction to the passage of fecal material. Abdominal CT showed a voluminous collection of fluid and gas that filled the regions corresponding to the mesogastrium, epigastrium, flanks, and left hypochondrium. He was admitted to the operating room for exploratory laparotomy, jejunostomy, enterectomy and left terminal ileostomy. On the third postoperative day, re-infusion of chyme with a volume corresponding to 40 mL was initiated. An improvement in the patient's general condition was observed in the following days, with introduction of total liquid diet on the third postoperative day and oral diet on the sixth postoperative day, in association with the reinfusion of the chyme. After a favorable evolution, the patient was followed up and the following month underwent elective surgery for intestinal transit reconstruction, which was successfully performed. **CONCLUSION:** The case presented illustrates the benefits related to the reinfusion of chyme in patients with intestinal failure secondary to short bowel syndrome, being considered a safe and effective enteral nutrition technique. In this sense, it should be more recognized in the surgical setting. However, the widespread use of this technique in these indications requires the production and distribution of automated devices that allow its reproduction with minimal discomfort.

65. INSULINOMA IN A YOUNG PATIENT - A SYNDROMIC PICTURE?

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INTRODUCTION: Insulinomas are the most common functional neuroendocrine neoplasms, with an incidence of 4 cases per million per year. Most present sporadic occurrence, with peak incidence in the fifth decade of life. Additionally, up to 10% of cases occur in association with a hereditary syndrome named multiple endocrine neoplasia type 1. Clinically, symptoms are heterogeneous, nonspecific and differ among patients. As for treatment, surgery remains the only curative option. **CASE REPORT:** Female patient, 27 years old, admitted to the hospital with report of repeated seizures. Previous history of macroprolactinoma without scheduled neurosurgical reoperation and use of cabergoline (discontinued on her own 6 months earlier) and prednisone, with previous diagnosis of multiple endocrine neoplasia type 01. Paternal family history of multiple endocrine neoplasia type 1, in addition to mother and brother with multiple neurofibromas. On physical examination, the patient was in a good general state, oriented, hydrated, afebrile, acyanotic, anicteric and capillary glycemia of 37 mg/dL. During hospitalization, she

presented new episodes of hypoglycemia. The patient underwent magnetic resonance imaging (MRI) of the abdomen, with detection of a 3 cm nodular lesion located in the caudal region of the pancreas and was referred for surgical evaluation. Intraoperative evaluation demonstrated two pancreatic nodules not identified by MRI, and proceeded with distal pancreatectomy with associated splenectomy. Postoperatively, the patient presented infection of the surgical wound and small output pancreatic fistula through the abdominal drain. **CONCLUSION:** Although insulinoma has a sporadic occurrence, a relevant portion of patients manifest it as a reflection of other syndromes. The early diagnosis of these pathologies allows for adequate follow-up, considering possible implications in the clinical presentation and outcome of the cases. In this context, multiple endocrine neoplasia type 01 draws particular attention. Warning signs include family history, early age, and atypical characteristics of the tumors, larger or multiple in size. Finally, further studies are needed to verify the possible participation of other pathologies potentially related to the manifestation of insulinoma, especially neurofibromatosis type 1.

66. EPIDEMIOLOGICAL ANALYSIS OF HOSPITAL ADMISSIONS FOR CROHN'S DISEASE AND ULCERATIVE COLITIS IN PIAUÍ BETWEEN 2015 AND 2020

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INTRODUCTION: Inflammatory bowel diseases (IBD) are chronic diseases that significantly affect the quality and life expectancy of patients. Crohn's disease (CD) emerges as a disorder of such class, of unknown etiology and multifactorial nature, and it can also be characterized by transmural inflammation of the gastrointestinal tract and marked by periods of remission and relapse. **OBJECTIVES:** To describe the epidemiological profile of hospital admissions for Crohn's disease and ulcerative colitis in the State of Piauí from 2015 to 2020. **METHODS:** This is a retrospective, descriptive, quantitative approach study, conducted from data collected in the SUS Hospital Information System (SIH/SUS) of the Department of Informatics of the Unified Health System (DATASUS). These records were analyzed in a simple statistical way. The variables considered were: number of hospitalizations, gender, age group, race/race and deaths. **RESULTS:** 693 cases of hospital admissions (HA) for Crohn's disease and ulcerative colitis were notified in Piauí during the analyzed period. Most of HA cases were evidenced in 2019, with 138 (19.91%) ones, and the year of 2015 presented the lowest period, with 87 (12.55%). Men were the most affected group, representing 53.82% of HI. Regarding the age range, there was prevalence between 40 to 49 years (21.35%), followed by 30 to 39 years (20.20%), and the age group with the lowest number of cases was the one between 5 to 9 years (2.02%). Moreover, there was predominance of mixed race (62.62%), while the black color/race had less involvement (1.44%). Regarding the final outcome, 23 patients died (3.31%). **CONCLUSION:** From this study, a gradual increase could be observed in the number of hospitalizations for IBD. There is a slight predominance in males, with higher incidence between 40 and 49 years, followed by a second peak, from 30 to 39 years. Regarding color/race, there was a predominance of the mixed one. Therefore, the importance of the analyzed data stands out, given the growth in the number of cases and its consequences, both for the individual,

causing impact on quality of life, and for society, due to the high costs with health services.

67. DECALVANT FOLLICULITIS: RARE PRIMARY CICATRICIAL ALOPECIA AND CHALLENGING THERAPEUTIC

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INTRODUCTION: Folliculitis decalvans (FD) is a scalp disease that often results in cicatricial alopecia (represents about 11% of cicatricial alopecia cases). Its etiology is unclear, but immune mechanisms, genetic predisposition and *Staphylococcus aureus* infection seem to be involved in its pathogenesis. It predominantly occurs in young adults, of African-American descent, males. It is characterized by inflammation, erythema and desquamation, especially in the apex and occipital region of the scalp. Trichoscopy typically shows the presence of multiple strands emerging from a single follicle – polytrichia or “hair in tufts” or “strands in doll’s hair”, in addition to erythema, desquamation, crusts and perifollicular inflammatory pustules. **CASE REPORT:** Male patient, 42 years old, brown, construction worker, from Teresina-PI, with progressive “irritation” on the scalp for 9 years. No previous treatments. On examination, the patient shows erythematous-desquamative alopecic plaque, with some pustules, located in the vertex; to trichoscopy, multiple “tufted hairs”. Histopathological examination showed a shortage of appendages and the presence of dense perifollicular mononuclear inflammatory infiltrate, with aggression and destruction of hair and proliferation of perifollicular fibrous connective tissue with total replacement by fibrosis, thus characterizing cicatricial alopecia compatible with FD. Systemic antibiotic therapy with Doxycycline 200 mg/day and topical corticosteroid (Clobetasol) was instituted. The patient will maintain follow-up. **FINAL CONSIDERATIONS:** Folliculitis decalvans is a rare and chronic type of alopecia. The exact etiology still not well known, which make the treatment a challenge, with many episodes of recurrence. Systemic and topical antibiotics, also, topical, systemic and intralesional corticosteroids, isotretinoin and dapsone are the most used therapies. Other medications such as topical calcineurin inhibitors and immunobiologicals, as well as, laser epilation, appear as recent therapeutic options. However, there is no established guideline or consensus for the treatment of this dermatosis and the persistence of disease activity is common even after several therapeutic attempts.

68. PERIORBITAL ANGIOEDEMA FOLLOWING HYALURONIC ACID INJECTION: A RARE CASE REPORT

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BACKGROUND: Non-surgical dermal fillers with injectable hyaluronic acid (HA) are widely used in aesthetic dermatology, most frequently administered in the periorbital region. HA is well tolerated,

predictable, and has a low incidence of adverse effects despite its wide use. In the periorbital region, complications reported are malar edema, bluish-gray discromia, contour irregularities and, rarely, angioedema. In view of this, we aim to report an unusual case of immediate periorbital angioedema after HA application. **CASE REPORT:** A 31-year-old female patient came to the dermatology clinic complaining of dark circles under the eyes. During dermatological examination, a slight loss of elasticity and fine wrinkles in the palpebral region were also observed. In view of this, she underwent intradermal filling with hyaluronic acid 5 mg/ml (Filorga NCTF 135HA) through a 25g cannula, aiming at hydration in the periorbital region. Hours later, an evolution with erythema and significant edema restricted to the region of application was observed, suggestive of angioedema. The patient denied any difficulty breathing. On the following day, the condition worsened, but remained localized. The patient returned and was treated with intralesional infiltration of hyaluronidase 2000 UTR, diluted in 3 ml of distilled water and 3 ml of lidocaine without vasoconstrictor. Multiple applications of 0.01 ml per 1 mm of lesion were performed, and then systemic corticotherapy was prescribed. On a re-evaluation after three days, a good evolution and complete resolution of the clinical picture were observed. **CONCLUSION:** Few reports in the literature portray angioedema as an adverse event to periorbital filling with hyaluronic acid. It is believed that this would be a consequence of an allergic reaction prevalent in 0.1% of cases. This complication usually occurs late, and being an early course as described in this case report is even more uncommon. The main mechanism suggested would be a mast cell-mediated hypersensitivity to product proteins. In addition, anatomical variations of the patient and the injection technique are also possible causes. In this case, there was a good response to treatment with application of hyaluronidase in the region to dissolve the HA, allowing the action of the systemic corticoid. The discussion of potentially serious complications such as angioedema is valid, as it allows for greater safety in the proper use of hyaluronidase to dissolve the product, followed by appropriate treatment.

69. EPIDEMIOLOGICAL PROFILE OF PREGNANT WOMEN DIAGNOSED WITH SYPHILIS IN THE CITY OF TERESINA BETWEEN 2016 AND 2020: A RETROSPECTIVE CROSS-SECTIONAL STUDY

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INTRODUCTION: Syphilis is a systemic disease with chronic evolution, caused by the spirochete *Treponema pallidum*, with sexual and vertical transmission. In Brazil, there was an increase in the number of cases of syphilis in pregnant women, a worrying factor due to complications to pregnancy and the child’s health. In 2019, in Teresina, the average syphilis rates in pregnant women were on 28%, higher than the national average. Also, there is a lack of studies on this worrying public health data. **OBJECTIVES:** The purpose of the following study is to describe the epidemiological profile of syphilis in pregnant women from 2016 to 2020 in the city of Teresina. **METHODS:** Cross-sectional study. Data were collected from the DATASUS platform between 2016 and 2020, the epidemiological profile was recorded through the Sistema de Informa o de Agravos de Notifica o (SINAN) and stratified by gestational age, education level, color or race and clinical classification. A descriptive analysis was executed, in which the variables were described by absolute frequency and percentage. **RESULTS:** Teresina was among the capitals with the

highest detection rates in 2019. Between 2016 and 2020, 1164 syphilis cases were detected in pregnant women, accounting for 32,81% of all cases in 2019. As for gestational age, the third quarter stood out, with a total of 571 cases. The age group from 20 to 29 years was the most prevalent, with 623 cases (53,22% of total) in 2019, similar to the national data. As for education level, 277 (23,70%) cases were women in high school, with 95 cases in 2018. As for color or race, the brown color stood out, with 812 cases (69,75%). In 2019, 32,51% of cases were that color or race. This data was similar to the national figure, in which the race or brown color also stood out, equal to 51,2% of pregnant women with syphilis in 2019. **CONCLUSION:** A high number of syphilis cases in pregnant women was observed in Teresina, in which the years of 2018 and 2019 were the most prominent, a factor that possibility reflects an improvement in the notification system in pregnant women. However, in 2020 the rates dropped considerably, possibly due to the decrease in notifications and the mobilization of the country's health services to fight the pandemic in Brazil. Nevertheless, it was observed that the scenario in Teresina is worrying, highlighting the need for greater focus on educational measures and notification.

70. CHILDREN'S POTT TUMOR AS A RARE FRONTAL SINUSITIS COMPLICATION: A CASE REPORT

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INTRODUCTION: Pott's edematous tumor (PPT) is a subperiosteal abscess with extradural empyema resulting from a complication of rhinosinusitis or trauma that clinically manifests as a well-delimited frontal edema. It is rare since the advent of modern antibiotic therapy, but with risks of intracranial sequelae if underdiagnosed. **CASE REPORT:** Female, 6 years old, started with fever, headache and facial edema. Ten days later, he was admitted to the local hospital due to trauma impacting the occipital region. Skull Computed Tomography showed sinusitis, starting treatment with Amoxicillin and Clavulanate for 10 days, with improvement of the condition. She returned to the service 16 days later, with fever, headache and swelling of the forehead, was hospitalized and started treatment with Ceftriaxone, Oxaciline and Metronidazole. On physical examination, a softened tumor in the frontal region of the face was highlighted. Skull and face CT showed bilateral maxillary ethmoidal sinusopathy, bilateral frontal sinusopathy, erosion of the anterior and posterior bone parts, with formation of an anterior subcutaneous collection and frontal epidural collections on the right and left. It was referenced. The pediatric neurosurgery opinion reported the need for prolonged antibiotic therapy, Clindamycin and Ceftriaxone, with no indication for surgical intervention. Magnetic resonance imaging showed filling of the frontal sinuses and signs of erosion of the bone plates, evidencing collection in extracranial soft tissues in the median region, which determines the bulging of the local skin surface, measuring about 3.2x1.9x 2.5 cm, with restriction to the diffusion sequence, which suggests an infectious component in association with bone inflammatory involvement and possible osteomyelitis. Evolved with regression of the swelling in the forehead and without symptoms. She remained hospitalized for administration of intravenous antibiotics, with expectant management being performed with monthly follow-up of pediatric neurosurgery. **FINAL CONSIDERATIONS:** As in the

forementioned case, the literature shows that early antibiotic therapy for acute rhinosinusitis may not prevent complications. However, management with a high degree of suspicion and early diagnosis, with appropriate referrals, treatment of PPT with hospital admission, intravenous use of broad-spectrum antibiotics or surgical approach, are imperative to reduce morbidity and mortality.

71. EPIDEMIOLOGICAL PROFILE OF PATIENTS ADMITTED FOR SEPSIS IN MARANHÃO BETWEEN 2016 AND 2020

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INTRODUCTION: Sepsis is defined as a medical emergency characterized by an organic dysfunction due to an unregulated and intense immune and inflammatory response, triggered by an infectious process caused by viruses, bacteria, fungi or protozoans. It is a disease that has a fast evolution and high mortality rate, mainly because of the delay in diagnosis. **OBJECTIVES:** The purpose of the following study is to describe, epidemiologically, the profile of patients hospitalized for sepsis in the State of Maranhão, between 2016 and 2020. **METHODS:** The study is a cross-sectional, quantitative and retrospective epidemiological analysis of hospitalizations by sepsis reported in Maranhão, in the period from 2016 to 2020, using data from the Sistema de Informações Hospitalares – SIH-SUS. For the elaboration of the research, the following variables were used: place of residence, assistance type, age group, gender, days of hospitalization and number of deaths. From a descriptive analysis, the variables were described according to their absolute and relative frequencies. **RESULTS:** In the period studied, 7909 hospitalizations for sepsis were registered in the State, with the highest prevalence in the city of São Luís, with 1582 registered cases (20% of State admissions). The most prevalent age group were people over 60 years, with 3789 cases (47.9%). As for the sex of hospitalized patients, 4154 (52,25%) were men. Also, most cases were emergency assistance, equivalent to 6901 cases (87.25%). Regarding the cases evolution, 3354 deaths were registered (mortality rate equal to 42.41%), with an average hospital staying equal to 11.5 days. In addition, 9 countryside cities reached a mortality rate equal to 100%, while the capital São Luís reached a rate of 46.52%. **CONCLUSION:** Thus, the research shows a higher prevalence of hospitalizations for sepsis in patients aged over 60 years, in the urgent assistance, without significant distinction between the genres. In addition, the discrepancy in the assistance between the capital and the smaller cities is evident, since 9 countryside cities had mortality rates equal to 100%, a reflection of a smaller health structure and a lower quality assistance.

72. HYPERSENSITIVITY PNEUMONITIS: DIFFERENTIAL DIAGNOSIS TO COVID-19

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INTRODUCTION: Hypersensitivity pneumonitis (HP) is an interstitial lung disease that occurs in individuals previously sensitized to

respiratory allergens. Its pathophysiology has not been completely elucidated, but it is known that exposure to specific antigens in susceptible individuals is the determining factor. The objective of this paper is to present a case of hypersensitivity pneumonitis. **CASE REPORT:** Female patient, 67 years old, teacher, with dyspnea on great exertion and dry cough that had started 6 months ago, evolving to dyspnea on minimal exertion in the last few weeks. She reports asymptomatic Sars-cov-2 infection two months ago. She denies chest pain, but reported sporadic wheezing, with no noticeable triggering factor. No history of previous respiratory illness. She has arterial hypertension and fibromyalgia, in continuous use of enalapril, duloxetine, mirtazapine and periciazine. She denied environmental exposures or smoking. On physical examination, she was eupneic, normal colored, saturating 98% with room air. Pulmonary auscultation with croaking and Velcro rales. Chest tomography performed two months after Sars-cov-2 infection showed ground-glass opacities affecting 50% of the parenchyma. She had negative ANA and rheumatoid factor, in addition to normal thyroid function. Echocardiogram without changes. Spirometry described severe restrictive ventilatory disorder unresponsive to bronchodilators. Despite the absence of an epidemiological context compatible with hypersensitivity pneumonitis, prednisone 1mg/kg/day was started for two weeks with subsequent weaning. The patient returned with significant improvement, without coughing, and dyspnea only on great exertion. At the time, she revealed that she had been taming birds for a year. We then opted for lung biopsy, which showed cellular and fibrosing interstitial pneumonitis, with areas of bronchiocentric accentuation, in which chronic hypersensitivity pneumonitis is the main diagnosis. Guided then the cessation of contact to the allergen. **FINAL CONSIDERATIONS:** Hypersensitivity pneumonitis is a chronic condition and requires immediate withdrawal from exposure to the antigen as a first therapeutic measure. This is a case of relevant interest, especially in the pandemic context, due to its description in the differential diagnosis with infection by the new coronavirus. The patient is undergoing therapy adjustment and is currently using prednisone and azathioprine, with good symptom control.

73. EPIDEMIOLOGICAL ANALYSIS OF THE REPORTED CASES OF VISCERAL LEISHMANIASIS IN THE STATE OF PIAU  BETWEEN THE YEARS 2015 AND 2019

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INTRODUCTION: Visceral Leishmaniasis (VL) is a zoonosis, caused by the protozoan of the gender *Leishmania*, transmitted by the mosquito of the gender *Lutzomyia*. It is a disease with chronic evolution and high lethality. The clinical manifestation, when it exists, is exuberant and can evolve to more severe conditions. The prevalence of this disease is related to socioeconomic and environmental factors. Therefore, VL is a public health problem, and studies are needed about its occurrence and epidemiological characteristics.

OBJECTIVES: To analyze the epidemiological profile of reported cases of Visceral Leishmaniasis in the state of Piau  between 2015 and 2019. **METHODS:** This is a cross-sectional epidemiological study with a quantitative approach to reported cases of VL in the period from 2015 to 2019 in Piau . The database chosen for the analysis was the Notifiable Diseases Notification System, made available by the Department of Informatics of the Unified Health System. The variables studied were: year of notification, age group, gender, confirmatory criterion and evolution. The results were organized in Microsoft Excel software spreadsheets and exposed in charts and tables. **RESULTS:** A

total of 1020 cases have been reported in the state during these 5 years. The year 2017 had the highest number of cases with 245 (24%), followed by 2015 with 239 (23%). However, 2019 had 158 (15%), being the year with the least records. Regarding gender, there was a predominance of males (716 cases, which represented approximately 70% people affected with the pathology). Regarding age group, the data show prevalence between 20 and 39 years (26.3%), followed by 1 to 4 years (21.2%) and 40 to 59 years (20.9%). Of all reported cases, 910 (89.2%) presented laboratory testing as a confirmatory criterion of the disease, while the other 110 (10.8%) were applied only to clinical and epidemiological evaluation. In addition, the records showed that the number of deaths caused by visceral leishmaniasis was 60 cases (5.08%). **CONCLUSION:** VL still persists in Piau , especially in men and at the age of 20 to 39 years, with laboratory testing being the main diagnostic tool and mortality of 5.08%. Despite the decrease in cases in 2019, one should be aware of the notification of the disease in the state, to avoid underreporting of cases. Thus, the need for actions for surveillance and control of this disease in the state is evidenced.

74. CONSEQUENCES OF TREATMENT AND LATE DIAGNOSIS OF ELBOW FRACTURE AND EVOLUTION TO TOTAL ARTHRODESIS SURGERY: A CASE REPORT

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INTRODUCTION: Elbow joint fractures are serious injuries that may affect several anatomic structures from this joint. Radio head fractures are the most common elbow fractures, accounting for a third of these injuries and 3% of all fractures. Normally, this structure fractures when it collides against the humerus capitulum, it may happen due to a pure axial load such as the Essex-Lopresti fracture. Olecranon fractures account for 10 to 20% of all elbow fractures. Distal humerus fractures, on the other hand, have an incidence of 5,7 cases per 100.000 persons per year. **CASE REPORT:** Male, 53 years old, rural worker, born and raised in Hugo Napole o-PI. The patient reports a fall from own height one month ago. He sought medical attention immediately, but the correct diagnosis was not made in the initial care, he returned to his home. After 3 weeks, with persistence of symptoms, he sought medical attention again, and the fracture was diagnosed. The results of the initial physical examination were limited, with signs of pain intensified on mobilization and palpation, in addition to loss of function in the affected humerus-ulnar joint. An X-ray of the lesion was requested, which showed a comminuted radius fracture with signs of intense bone resorption, thus indicating the need for an emergency surgical procedure. The surgery chosen was the arthrodesis type with plates and pins, due to the high loss of bone tissue at the site and an extended posterior approach. After the end of the operation, 3 bone fragments, the largest with dimensions 4.5 x 3.5 x 1.5 cm, were referred for an anatomopathological examination of the paraffin freezing type, the result of which showed areas of fibrosis and remodeling trabecular, without any presence of malignancy. The patient's elbow was kept flexed at 90  to provide greater comfort in performing daily tasks and to facilitate cleaning of the area. The patient returned after 45 days, with no pain, no signs of

inflammation or infections and no neurological deficits. **FINAL CONSIDERATIONS:** Although this lesion is common, its treatment is complex and it should preferably be surgical to prevent restrictions on motility. In this case, the delay in performing a surgical treatment, associated with the patient's high age and the type of injury, led to the need to perform total elbow arthrodesis surgery, a rare outcome, but necessary in this case.

75. IDIOPATHIC ERYTHEMA GYRATUM REPENS: CASE REPORT

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BACKGROUND: Erythema Gyrratum Repens (EGR) usually occurs as a paraneoplastic syndrome. The diagnosis of this condition may precede the onset of neoplasms by months, which is most commonly associated with bronchial, gastric, esophageal, and breast carcinomas. We report here a rare idiopathic case in which screening for malignancy remained negative for 3 years. **CASE REPORT:** A 39-year-old female patient sought dermatologic care 3 years ago with a history of erythematous macules and plaques, some annular in shape, with thin scaling edges, located on the buttocks and lower limbs. Hypothesis of Tinea corporis and psoriasis were raised. The use of antifungals and topical corticoids did not lead to remission of the symptoms. A biopsy of the lesion ruled out psoriasis and EGR was diagnosed. Thus, neoplasms were investigated through imaging exams (chest X-ray, mammography and total abdomen ultrasound). The results of imaging exams showed no alterations, concluding that it was idiopathic EGR. The use of prednisone led to significant improvement of the condition. However, currently the pathology has recurred. **CONCLUSION:** The idiopathic form is a rather uncommon presentation of EGR. Concentric erythematous, desquamative rings of rapid progression were reported in this case, corresponding to the classic pattern of this pathology. Differential diagnoses were performed regarding this condition; Fungal erythematous lesions, such as tinea corporis, and psoriasis (erythema gyratum-like psoriasis or EGR-associated psoriasis). Thus, exclusion of these hypotheses was performed by histopathological and empirical treatment of the lesions. The search for malignancy is imperative, as EGR may precede neoplasms by months. However, the patient in this case study showed negative for screening tests for 3 years. As a result, the hypothesis of idiopathic EGR was confirmed. In such cases, treatment consists of alternative corticosteroid therapies, although they do not present a satisfactory long-term response, as observed in the reported case.

76. ERUPTIVE XANTHOMAS: CUTANEOUS MANIFESTATION OF SYSTEMIC DISEASE. CASE REPORT

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BACKGROUND: Eruptive Xanthomas (EX) occur due to elevated triglyceride levels, usually >3,000 mg/dl. This condition is exacerbated when associated with Type 2 Diabetes Mellitus (Type 2 DM), obesity,

and retinoic acid therapy. Clinically, it is seen as erythematous papules/nodules, about 1-4 mm in size, yellow-orange in color, localized on extensor surfaces of the limbs and trunk and gluteal region. They generally disappear in 6-8 weeks upon treating the underlying disease. **CASE REPORT:** A 35-year-old male patient sought dermatologic care reporting asymptomatic skin lesions that appeared three months ago. Physical examination revealed yellow-orange, popular/nodular lesions (about 1-4 mm in diameter) with an erythematous base on the trunk and upper limbs. The anatomopathological study of the lesion confirmed the diagnosis of EX by revealing lymphocytic infiltrate, macrophages with a xanthomized aspect, and accumulation of lipids in the dermis. Laboratory tests showed elevated triglycerides (3119 mg/dl) and hyperglycemia (240 mg/dl). Referred to the endocrinology clinic, the patient was diagnosed with type 2 DM, hypertriglyceridemia, and obesity. Pharmacotherapy was instituted to control hyperglycemia and dyslipidemia, which led to remission of the eruptive lesions.

CONCLUSION: EX, as a dermatosis characterized by accumulation of lipids in the skin, has its formation mechanism associated with dyslipidemia, which leads to extravasation of circulating lipoproteins into the tissue, through the dermal capillaries. Subsequently, phagocytosis of lipids by macrophages occurs, leading to the formation of xanthoma cells (foam cells) - which contain abundant lipid droplets in their cytoplasm. Skin disorders can be warning signs of systemic diseases, and eruptive xanthomas are one of such examples. In this clinical case, the patient had type 2 DM, which causes insulin resistance and interferes with glucose and lipoprotein metabolism, precipitating the formation of EXs. After establishing the diagnosis and the study of dyslipidemia by a specialist, it was possible to start treatment, thus preventing complications of hypertriglyceridemia, such as cardiovascular disease and acute pancreatitis. Thus, EX are benign dermatological manifestations. However, they are often associated with metabolic alterations, which may lead to serious cardiovascular and gastrointestinal complications.

77. ESOPHAGEAL AND ANTRAL STENOSIS DUE TO MURIATIC ACID INGESTION ASSOCIATED WITH A SUICIDE ATTEMPT: A CASE REPORT

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INTRODUCTION: The ingestion of corrosive substances is alarming in the medical field, as it generates highly serious cases, in addition to being associated with self-extermination attempts. In the digestive tract, acids promote coagulation necrosis, which causes damage greater in extent than in depth. In the long term, esophageal and antral stenosis and development of carcinomas can occur. Treatments for injuries caused by acids are still the subject of disagreement among researchers and are considered unsatisfactory, requiring further research to develop a consensual technique. **CASE REPORT:** J.J.R.N, male, 48 years old, born in Coelho Neto - MA, went to the University Hospital complaining of odynophagia and recurrent vomiting, in addition to burning retrosternal pain and hyporexia. He reports the onset and progression of the condition after a suicide attempt with muriatic acid intake 7 months ago. He was in regular general condition, conscious, afebrile, emaciated with a hollow abdomen, depressive and with hydro-aerial noises, in addition to normal cardiac and respiratory auscultation. He denied smoking and

drinking. The blood count showed a significant leukocyte reaction and the chest x-ray showed no changes. Esophagoduodenoscopy showed burns Zargar's grade 3a in esophagus and stomach, with the presence of fibrotic scars and necrotic and fibrinoid material in the stenosed esophagus and antrum. After caustic stenosis of the esophagus and antrum was confirmed, balloon dilatation attempts were made, which did not yield satisfactory results, and then elective gastroenteroanastomosis (GEA) surgery was scheduled by videolaparoscopy. After the procedure was uneventful, the patient on the 4th POD was stable in the infirmary bed, already walking, on a well-accepted liquid diet and without changes in diuresis and evacuation. Normal vital signs and physical examination showed a flat, depressive abdomen without visceromegaly, in addition to an unaltered blood count. Diet progression, clinical support, and post-operative care were given. **FINAL CONSIDERATIONS:** GEA was required due to injuries and esophageal and gastric stenosis after failed balloon dilatation attempts. These injuries are frequent in patients who ingest caustic substances in the context of self-extermination attempts. Due to its impact on the patient, its potential complications must be promptly treated.

78. EPIDEMIOLOGICAL ANALYSIS OF EXOGENOUS INTOXICATION IN CHILDREN AND ADOLESCENTS IN PIAUÍ FROM 2015 TO 2020

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INTRODUCTION: Exogenous intoxication is described as any clinical or laboratory alteration related to an organic disorder caused by the interaction of the organism with a certain toxic agent. Regarding that, exogenous intoxication in children and adolescents constitute an important public health problem. **OBJECTIVES:** To describe the profile of exogenous poisoning in the pediatric age group of zero to 19, in the state of Piauí in the period from 2015 to 2020. **METHODS:** This is a retrospective, descriptive study with a quantitative approach, conducted from data collected in the Notifiable Diseases Information System (SINAN - BRAZIL) by the Department of Informatics of the Unified Health System (DATASUS). These records were analyzed in a simple statistical form. The variables considered were: gender, age range, circumstance of the event, toxic agent and evolution of the condition. **RESULTS:** Based on the analyzed data, there were 3,370 exogenous intoxication cases in children and adolescents in the period studied. Among those, females were the most common ones (60%/N: 2,023). Regarding the age bracket, 15-19 years was prevalent (36.3%/N:1,223), the main circumstance being suicide attempt (81.4%/N:996), followed by the 1-4 years bracket (32.5%/N:1,096) caused mainly by accidental conditions. Regarding toxic agents, drugs are the main cause in all ages (54.9%/N:1,853). Regarding the evolution, most of them progressed with healing without leaving side-effects (69%/N:2,325), while only 0.38% (N:13) evolved to death. **CONCLUSION:** Based on the references above, it was observed that the female gender is the most affected and the main agent used is medication. Moreover, the ingestion of medicines, both accidentally by children aged 1 to 4 years and by attempted suicide by adolescents aged 15 to 19 years, deserves to be highlighted as an important public health problem. However, the results should be analyzed with caution due to under-reporting and incorrect filling out of notification

forms. Finally, health surveillance actions are necessary for the prevention of new cases.

79. EPIDEMIOLOGICAL DELINEATION OF HOSPITALIZATIONS FOR CARDIAC ARRHYTHMIAS IN PIAUÍ FROM 2016 TO 2020

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INTRODUCTION: The Conduction Disorders and Cardiac Arrhythmias (TCCA) are electrical alterations of the heart that cause changes in the normal rhythm of this organ, producing tachycardia, bradycardia, and irregular heart rates in the propagation of impulses, known as dysrhythmia or irregular heart rhythm, thus causing electrical instability. These conditions may occur in people with normal heart condition or secondary to other diseases, presenting them asymptotically or not. **OBJECTIVES:** To demonstrate the epidemiological survey regarding cardiac conduction disorders and cardiac arrhythmias in the State of Piauí in the period from 2016 to 2020. **METHODS:** This is an epidemiological, quantitative, retrospective study, conducted from data collected in the SUS Hospital Information System (SIH/SUS), made available by the Department of Informatics of the Unified Health System (DATASUS). These records were analyzed in a simple statistical form. The variables analyzed were number of hospitalizations, gender, age group, color/race and deaths. **RESULTS:** During the analyzed period, 2,228 hospitalizations for cardiac conduction disorders and cardiac arrhythmias were reported. The male gender presented a slight majority with 52.74% of hospitalizations, while 47.26% were females. Regarding the age range, there is a higher prevalence of the pathology among the elderly, corresponding to 74.42% of the total. Of these elderly individuals, 467 were between 60-69 years old, 616 between 70-79 years old and 575 were 80 years old or older. The age interval less affected was that of children between 5 and 9 years old, displaying 8 cases. Regarding to color/race, 1,384 were specified. Of these, 1,121 referred to mixed ones, 136 yellow ones, 79 white ones, 48 black ones. 844 of the totals were not informed. As for the variable deaths/year, it totaled 363 notifications and the highest number of these in 2017, with 106 records. **CONCLUSION:** In the view of results obtained, it can be inferred that men represent the majority in the number of hospitalizations for cardiac conduction disorders and cardiac arrhythmias, as well as the population aged between 60 and 80 years. Regarding color/race, of those that were specified, the most affected were the mixed-race individuals. Moreover, the highest number of deaths was recorded in 2017. Therefore, the analysis of these data becomes important to trace the epidemiological profile of the population studied, and thus allow reflection in an attempt to improve the performance of health services.

80. OOPHORECTOMY DUE TO OVARIAN CYST TORSION IN A NEWBORN: A CASE REPORT

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INTRODUCTION: Ovarian masses with cystic content can occur at different ages in females and usually occur due to an enlargement of a cystic follicle, also called a physiological cyst, or as a consequence of a benign or malignant ovarian tumor. The clinical presentation progresses suggestively with abdominal distension, a palpable mass on physical examination and confirmation via imaging. In children, most cysts are physiological or at the expense of a benign tumor. Despite this, it is important to carry out an early diagnosis both to guide the treatment and to guarantee a better prognosis and avoid possible complications, such as cystic hemorrhage, cyst rupture and, especially, ovarian torsion. **CASE REPORT:** Female newborn, full term, 3640 grams, born by vaginal delivery uneventful, APGAR 9/10 with gestational ultrasound with a 4 cm abdominal cystic mass. The patient evolved well in rooming-in, and an abdominal ultrasound was performed suggesting a teratoma with intrauterine ovarian torsion. On the 5th day of life, he underwent surgical laparotomy, in which a torsion of the left ovary was found with necrosis, a left oophorectomy was performed and the histopathological confirmation of a benign ovarian cyst was confirmed. The patient evolved uneventfully and was discharged from the Intensive Care Unit 7 days after surgery. **FINAL CONSIDERATIONS:** The most common ovarian cysts in the fetal and neonatal period are follicular, which occur physiologically due to the growth of a cystic follicle by ovarian stimulation via maternal and fetal gonadotropins. Although the factors that increase its incidence are unknown, there is evidence of a direct relationship with advanced gestational age and maternal complications such as diabetes mellitus and pre-eclampsia. In neonates, physiological cysts present as asymptomatic pelvic or abdominal cystic masses, which can be displaced into the abdomen due to the mobility of the cystic ovary. To confirm the diagnosis and guide the approach, ultrasonography is of great value to demonstrate the pattern of the cystic material. Simple pattern cysts are generally physiological cysts, whereas complex pattern cysts may indicate ovarian torsion or hemorrhage. Therefore, early diagnosis helps in the patient's treatment and prognosis, in order to avoid complications such as ovarian torsion, rupture, intracystic hemorrhage and intestinal obstruction, which require effective and immediate management, usually with surgical correction after birth.

81. THORACOSCOPIC DIAPHRAGMATIC PPLICATION DUE TO TOCOTRAUMA

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INTRODUCTION: Diaphragm paralysis can occur due to trauma during childbirth, cardiothoracic surgery, or neuromuscular disorders. It predominates in newborns born vaginally, weighing more than 4500 grams and cephalic or pelvic presentation, caused by injury to the phrenic nerve or brachial plexus, which may be unilateral or bilateral. Unilateral paralysis is usually asymptomatic and may require, in the presence of symptoms, plication of the affected hemidiaphragm. Bilateral paralysis, on the other hand, requires treatment with ventilatory support, diaphragmatic stimulation and/or surgical nerve reconstruction. **CASE REPORT:** Female newborn, full term, large for gestational age, 4560 grams, born vaginally, cephalic presentation, with difficulty in extraction, associated with the presence of cephalohematoma and brachial plexus injury. In the delivery room, the patient was hypotonic, APGAR 3/8, weak crying, evolving with apnea and bradycardia. Two cycles of positive pressure

conditioning were performed, followed by orotracheal intubation. Maintained in mechanical ventilation (MV) and referred to the neonatal intensive care unit. A chest X-ray showed elevation of the right hemidiaphragm. After two months of unsuccessful ab lactation from ventilatory support, surgical treatment through diaphragmatic plication by thoracoscopy was indicated. The patient evolved well, being discharged after the thirtieth day after surgery, without oxygen support and with good bilateral pulmonary expansion. **FINAL CONSIDERATIONS:** The history of traumatic injury to the brachial plexus and radiological findings guide the diagnosis of diaphragmatic eventration secondary to nervous palsy. As differential diagnoses we can also consider congenital diaphragmatic hernia, congenital diaphragm muscle deficiency and right phrenic nerve injury. Diaphragmatic plication is characterized by the creation of tortuosity in the diaphragm, through suture lines, reducing the mobility of the paralyzed hemidiaphragm. The plication facilitates weaning from MV and oxygen therapy, improves pulmonary vascular resistance and improves exercise resistance and dyspnea.

82. ISCHIO OMPHALOPAGUS TWINS: A REPORT OF A RARE ANOMALY

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INTRODUCTION: Xyphopagus twins are a rare type of monochorionic and monoamniotic twins, joined by body segments. Birth defects are common in these cases, and there is a high prevalence of stillbirths. These cases have a poor prognosis even with the surgical separation. **CASE REPORT:** Preterm newborns (NBs), 33 weeks, undefined sex, 3,118 grams, 40 cm, born by caesarean section due to prenatal diagnosis of ischio/omphalopagus siamese twins. APGAR on the 1' and 5', 9 and 9; Rh incompatibility, single umbilical cord, 4 upper limbs, 3 lower limbs, and anorectal anomaly (AAR). The diagnosis of the connection of the twins through the abdomen and pelvis was performed using morphological ultrasound in the 2nd trimester (17 weeks 03 days), without complications during pregnancy. Twenty-five hours after birth, due to the RAA without identifying a fistula to the perineal or genitourinary region, we opted for abdominal surgical exploration, and the presence of a separate gastrointestinal tract to the distal ileum, 15 cm from the ileocecal valve, was confirmed. merged. The single colon was hypoplastic and malfixed, ending in a blind end. Partial colectomy was performed, with ileostomy and mucous fistula, fixed in the topography of the umbilical scar. Cardiovascular and abdominal investigation was performed, with identification of a single liver mass in the midline, drainage of independent hepatic veins, 2 kidneys, 1 spleen, 1 bladder, in addition to atrioventricular septal defects in both, wide interatrial communication and transposition of large vessels in one of the RNs. They managed to remain stable in the first postoperative days (POD), on room air, with parenteral nutrition and slow progression of the enteral diet. Due to the progressive hemodynamic worsening of the twin with complex heart disease, both evolved to mechanical ventilation on the 7th POD and died on the 17th POD. **FINAL CONSIDERATIONS:** The presentation of the case becomes relevant due to the rarity of occurrence and association with AAR. It is worth emphasizing the importance of prenatal diagnosis for obstetric/surgical planning and referral to a specialized service.

Mortality is high because of the complexity of the fused structures and the incidence of associated malformations.

83. NON-SURGICAL NEWBORN MANAGEMENT WITH BILE-PLUG SYNDROME

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INTRODUCTION: Obstruction of extrahepatic bile ducts is the most common cause of neonatal cholestasis. Although related to many infectious or mechanical disorders, biliary atresia and neonatal hepatitis are responsible for most cases. Thick Bile Syndrome, a rare etiology of direct hyperbilirubinemia, refers to obstruction of the extrahepatic bile ducts by the biliary slurry in patients with anatomically normal bile duct. In general, it is a cause of obstructive jaundice in newborns (NB), surgically correctable or not. **CASE REPORT:** Male, 40 weeks, APGAR 9 and 10. He presented jaundice on the 3rd day of life (ddv) and was readmitted on the 5th ddv with suspicion of kernicterus and sepsis. Laboratory tests showed indirect hyperbilirubinemia and leukocytosis. Physical examination showed mild hepatomegaly and normal physiological clearances. He was treated with phototherapy until the 9th ddv, remaining jaundiced. During this period, blood cultures were positive for *S. haemolyticus*, treated with oxacillin and amikacin for 7 days, with resolution of the infectious condition. On the 10th ddv, ultrasound (US) of the biliary tract showed the presence of biliary sludge, starting the investigation of the underlying cause. On the 15th ddv, he evolved with cholestasis, fecal acolia and US presenting a swollen vesicle. MRI identified the presence of thick bile in the common, cystic and common bile ducts, causing a slight dilatation of the upstream bile ducts. Discussed with a gastroenterologist and opted for conservative treatment, with the use of ursodeoxycholic acid, since it is clinically stable and without signs of cholangitis. After 7 days of medication use, bilirubin levels reduced, stools were colored and the control US showed a patent biliary tract and a small amount of biliary mud in the gallbladder. Thus, we opted for outpatient follow-up. **FINAL CONSIDERATIONS:** The diagnosis of Bile-Plug Syndrome is suggested through US of the biliary tract or cholangiopancreatography by magnetic nuclear resonance and confirmed by endoscopic retrograde cholangiopancreatography. Therapeutic surgical procedures have been described in the literature, such as retraction of the biliary plug via duodenostomy/papilotomy and intraoperative irrigation of the biliary system with saline or mucolytics. However, despite being rare, this syndrome can resolve spontaneously. Conservative treatment proved to be effective and opens the door to a less invasive approach in cases without cholangitis.

84. BENIGN CYSTIC TERATOMA - A CASE REPORT

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INTRODUCTION: Germ cell tumors originate from the primordial germ cell and present a benign or malignant evolution, which may occur in a gonadal or extragonadal location. Teratoma is characterized as a germ cell tumor, with the sacrococcygeal region

being the most common extragonadal location, and the lesion may be solid, multicystic or formed by a large single cyst. This neoplasm is more frequent in the neonatal period. Most of these tumors are benign, however, there is a risk of malignancy with age. Its diagnosis and treatment must be early for a good prognosis. **CASE REPORT:** Newborn, male, gestational age 36 weeks and 4 days, birth weight 5240g, 24 days old, presenting a tumor in the sacral region at birth, conducted in the intrauterine period as myelomeningocele visualized on obstetrical ultrasound. On the second day of life, a computed tomography scan of the lumbar-sacral region showed extensive expansive formation, measuring up to 15.9x10.1cm, with homogeneous cystic attenuation incited by fine internal septations in the sacral region, with a nonspecific aspect, without well-defined communication with the canal spinal cord. On the same day, the patient underwent excision of a sacrococcygeal tumor with an inverted V incision in the buttock, dissection of the lesion in a single piece, preserving the rectum and adjacent musculature. The patient evolved with a dry surgical wound, without signs of dehiscence and with good clinical evolution, evacuating normally and accepting an adequate diet, being discharged from hospital on the twenty-second postoperative day and referred for outpatient follow-up. During hospitalization, newborns evaluated by a geneticist for the presence of dysmorphism on physical examination. He also presented changes in the echocardiogram, with the presence of FOP + VSD, but with little repercussion. Awaiting the result of G-band karyotype. Histopathological results showed cystic material measuring 15x14x10cm, weighing 1,126g, consisting of hemorrhagic fluid, suggesting benign cystic teratoma. **FINAL CONSIDERATIONS:** Teratoma is the main form of neoplasm in the newborn, being often diagnosed in the uterus. This report demonstrates the importance of early diagnosis and treatment, being of fundamental importance to prevent its malignancy.

85. EPIDEMIOLOGICAL CHARACTERISTICS OF HOSPITAL ADMISSIONS FOR ANTEPARTUM HEMORRHAGE IN PIAUÍ FROM 2016 TO 2020

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INTRODUCTION: Antepartum hemorrhage is one of the most important causes of maternal-fetal mortality. By definition, this condition corresponds to vaginal bleeding occurring from the 20th week of gestation until delivery. The main causes of this bleeding are premature Placental Abruption (PA) and Placenta Previa (PP). While PA is the separation of the placenta implanted in the body of the uterus, PP is defined as the implantation of the placenta in the lower segment of the uterus (totally or partially). **OBJECTIVES:** To characterize the epidemiological profile of antepartum hemorrhage cases associated with Placental Abruption and placenta previa in the state of Piauí in the period from 2016 to 2020. **METHODS:** This is a retrospective, descriptive, quantitative approach study, conducted from data collected in the SUS Hospital Information System (SIH/SUS) of the Department of Informatics of the Unified Health System (DATASUS). The records were analyzed in simple statistical form. The variables were evaluated by annual distribution of hospitalizations, age range, color/race and deaths. **RESULTS:** 1,423 cases were recorded in the analyzed period, and the year 2020 displayed the highest incidence with 312 cases (21.92%). Women aged between 25

and 29 years were the most affected, representing 336 cases (23.71%). Regarding color/race, only 461 cases were specified, and the majority being the mixed ones (74.40%). As for the deaths, only 2 cases were notified in the analyzed period. **CONCLUSION:** Based on what was exposed, most cases happened to women between 25 and 29 years of age, in the state of Piauí. Regarding color/race, the cases were predominant in the mixed one. Therefore, the importance of knowing the epidemiological profile of this pathology is also highlighted to improve the network of care for these women and ensure the promotion of health, and to reduce maternal and fetal morbidity and mortality as well.

86. SPONTANEOUS INTESTINAL DRILLING IN AN ATYPICAL LOCATION IN THE NEWBORN – CASE REPORT.

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INTRODUCTION: Spontaneous intestinal perforation (SIP) is a condition of unknown etiology that presents with focal perforation of an intestinal segment of the newborn (NB), particularly in the distal ileum. The main risk factor is prematurity associated with low birth weight, with an estimated incidence of 5-6%. Despite having been interpreted as a variant of necrotizing enterocolitis (NEC), today it is accepted as a distinct clinical entity, differing in clinical, radiological and surgical aspects. **CASE REPORT:** NB born at 32 weeks, male, 1700 grams, cesarean for severe preeclampsia, fetal centralization and anhydramnios, APGAR 6 and 8. At birth, referred to the neonatal intensive care unit (NICU) due to respiratory distress. Treatment for late-onset sepsis started despite normal laboratory investigations. After four days of hospitalization, without clinical or radiological worsening, pneumoperitoneum was identified on an abdominal X-ray. Submitted to exploratory laparotomy: identified perforation located in the proximal jejunum, about 15 cm from the angle of Treitz, affecting less than 50% intestinal light. Absence of signs of ischemia, necrosis or obstruction throughout the rest of the assessed gastrointestinal tract. Opted for lesion biopsy and enterorrhaphy due to location. The histopathological report suggests a localized acute inflammatory process of unknown etiology. After surgery, the patient evolved to radiological normalization, abdomen without distension, without vomiting or fever. Extubated on the 7th postoperative day, with good diet acceptance, with gradual progression of volume. Hospital discharge after 34 days of hospitalization, 13 days of hospitalization in the NICU, on full diet and weighing 1920 grams. **FINAL CONSIDERATIONS:** The differential diagnosis of EIP can be made by the presence of clinical, radiological, surgical and anatomopathological findings typical of NEC, characterizing a progressive and severe condition. Treatment is directly related to the perforation site and the degree of peritonitis. Signs of gross cavity contamination and low perforations are best conducted through an ostomy. In patients without signs of peritonitis or in lesions closer to the angle of Treitz, complications related to the high ostomy justify enterorrhaphy. Faced with a rapidly progressive abdominal distension in a premature and low birth weight NB, we should always think about EIP and promptly seek the best possible treatment.

87. IMPACTS OF THE COVID-19 PANDEMIC ON DIABETES COMPREHENSIVE CARE INDICATORS IN PRIMARY HEALTH CARE

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INTRODUCTION: The SARS-CoV-2 pandemic forced a reorganization of the Unified Health System (SUS) from Primary Health Care (APS) to the entire Hospital System. This action, which was so necessary to fight the pandemic, has an impact of an uncertain dimension, notably in chronic non-degenerative diseases (NCDs) and the lines of continued care established within the PHC. In the case of Diabetes, this reorganization has the potential to affect, mainly, screening and screening strategies for the disease to prevent cardiovascular events, and the continued care established for this disease. Therefore, there is a need to analyze this impact to propose adequate health policies, especially for the post-pandemic period. **OBJECTIVES:** This study seeks to analyze the impact of the pandemic on diabetic care in primary care in the state of Piauí. **METHODS:** This is a descriptive study, using data available in the Health Information System for Primary Care (SISAB). Data related to scheduled or scheduled appointments/continuing care were collected from each health region of the state, with diabetes as an assessed condition. This data refers to individual programmatic actions, aimed at priority diseases and conditions, notably diabetes and hypertension, where the patient is monitored, and the patient's condition is assessed. Tables and graphs were built for the variable, which compared the year 2020 and the first 8 months of 2021 with the average of the years 2017 to 2019. **RESULTS:** There was a decrease of 34.87% in consultations in the state, with the regions Entre Rios and Vale do Sambito showing the biggest drops (53.07% and 9.85%). It was possible to notice a sustained fall between March 2020 and August 2021, greater than 50% between April and August 2020. In addition, there was a differential impact in each sex, with a reduction in attendance of 31.89% in men and 36.12% in women in 2020. **CONCLUSION:** We have signs of impairment in the attributes of primary care, such as comprehensive care, longitudinality and coordination of care, in addition to losses in prevention strategies for cardiovascular events and adherence to treatment. The main limitation is that the SISAB data lacks auditing and data control, as the data is only informed by the municipalities and published in the system. In this way, the real impact will be known from further epidemiological studies.

88. SERIOUS ASSOCIATION BETWEEN ONPHALOCELE ROUTE AND CONGENITAL DIAPHRAGMÁTICA HERNIA.

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INTRODUCTION: Omphalocele is an abdominal wall defect with evisceration of the abdominal contents covered by a translucent membrane that, when not intact, is called a ruptured omphalocele. Diagnosed by ultrasound after 12 weeks.¹ Of unknown etiology, it may be linked to genetic predisposition, nutritional deficit and exposure to teratogens.² With an incidence of 1-3 per 1000 live births, it prevails in men in a 3:1 ratio. The association with other

abnormalities, which lead to a poor prognosis, exists in 50 to 70% of cases, with cardiac, genitourinary, gastrointestinal, etc., being more frequent.³ Thus, the fetal karyotype must be investigated.⁴ With the advancement With the surgical technique, the prognosis of these newborns evolves significantly, but they are still a surgical challenge. **CASE REPORT:** On 03/22/2021, a 17-year-old patient, G1P1A0, was admitted to the reference maternity hospital in Piauí with a cesarean delivery, at 39 weeks and 6 days. Prenatal said uneventful. Female newborn with ruptured bag, clear amniotic fluid, cephalic presentation. It weighed 2800g and apgar 3/8, 33 cm in head circumference. Resuscitation was performed with positive pressure ventilation (PPV) and orotracheal intubation with 100% FIO₂. Omphalocele ruptured in childbirth with placement of a silo. Patient evolved with progressive reduction of the silo. During this period the suspicion arose, and was confirmed, of the presence of diaphragmatic hernia. Taken on the 7th day of life to close the silo and correct the diaphragmatic hernia. Readmitted to the ICU under mechanical ventilation, she evolved without signs of abdominal hypertension and hemodynamic instability, using vasoactive amines and antibiotic therapy. It evolved with acidosis, hypernatremia, hyperkalemia, hypermagnesemia and malperfused in a comatose state. On 04/01/2021, he had no pulse. Resuscitation, VPP and adrenaline started. No return of the beat and in asystole, declared death. **FINAL CONSIDERATIONS:** Ultrasound advancement allows the previous diagnosis of omphalocele. Treatment is guided by the size of the defect and the age of the patient. Due to the size, the closure can be spontaneous. In this case, the condition required surgical intervention. Thus, it is worth analyzing the complications present, bearing in mind the association between omphalocele and other malformations. Adequate reception in the delivery room with protection of the defect and stabilization of the airways is important. Live births have a survival rate of 90%, which emphasizes prenatal diagnosis.

89. THERAPEUTIC ITINERARIES OF PEOPLE EXPERIENCING LEPROSY

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INTRODUCTION: Leprosy, characterized as a neglected condition in Brazil, has been a public health problem. Even with the World Health Organization establishing a global goal to interrupt the transmission of this disease in 2020, this did not materialize in the country. From this, there is a tension for the elaboration of intervention proposals to prevent, control and minimize the effects caused. The therapeutic itineraries built by people who experience this condition contribute to the identification of good practices, as well as points to be improved and improved. **OBJECTIVES:** To understand the therapeutic itineraries of the population who experience leprosy in the state of Piauí, in view of the need to realize the potential and weaknesses of the network. **METHODS:** This is a study of qualitative design guided by the interpretive paradigm. We conducted individual interviews from a semi-structured script with thirteen people who experienced leprosy in the state of Piauí, following the proposal of the Standards for Reporting Qualitative Research (SRQR) to ensure the transparency and completeness of this production. The project was approved by the Research Ethics Committee of the Universidade Federal do Piauí, with its opinion approved under number 3,429,590. From the transcription and full analysis of the interviews, the units of

analysis (units of meaning) were identified, which were discussed with professionals with expertise in the subject. **RESULTS:** The users' experiences allowed identifying gaps in the attributes of Primary Health Care, such as longitudinality, comprehensiveness and coordination of care, as well as in health education and active search strategies. On the other hand, there were weaknesses related to scheduling appointments, the pilgrimage of users and the diagnosis and preparation of professionals in the face of appropriate conduct for the diagnosis and treatment of leprosy. **CONCLUSION:** It is important to consider the highlights mentioned in this study, as it proposes the health care of people who experience leprosy. Therefore, it includes reflection on the organization and functioning of network services, definition of support and logistics systems, adoption of protocols and flows, as well as an emphasis on training and professional development. This must be based on important principles such as, for example, empathy, respect and humanization.

90. POSSIBLE HISTOPATHOLOGICAL ALTERATIONS IN RATTUS NORVEGICUS AFTER TREATMENT WITH ETHANOLIC EXTRACT OF DYSPHANIA AMBROSIOIDES L. (MASTRICH) AND NASTURTIIUM OFFICINALE R. BR (CRESS) ON BONE REPAIR

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INTRODUCTION: Megaesophagus (ME) is a disease characterized by progressive dysphagia and esophageal dilatation, resulting from the destruction of Meissner and Auerbach's autonomic nervous plexuses, which results in achalasia and peristalsis alterations. The main cause is Chagas disease (CD), the idiopathic form being rare - annual incidence of 1/100,000 and prevalence of 1/10,000. The ME has a progressive character and determines relevant repercussions on the nutritional and psychological status. **REPORT:** M.S.S, female, 63 years old, hypertensive, born in the rural area of União - PI, went to the UPA complaining of recurrent vomiting and hyporexia for 40 days. She reported "snap" and progressive dysphagia for solids for years, in addition to unmeasured weight loss. Denied smoking and drinking. no visceromegaly. Serology for non-reactive CD and upper digestive endoscopy ruled out neoplasia and evidenced dolichomegaesophagus and associated moniliasis. Tomography and esophagogram (EG) confirmed important esophageal caliber dilation with many food debris and distal cardia thinning, typical sign of "beak. Confirmed delay in esophageal emptying and diagnosis of grade IV idiopathic BD and achalasia. The patient underwent surgical treatment, esophagectomy in two fields by videolaparoscopy, reconstruction with gastric tube and intrathoracic anastomosis with the Ivor-Lewis technique with linear stapler endoscopic surgery, and chest drainage in water seal. He was discharged from the ICU in the 2nd day. On the 5th day, he developed a gastroesophageal anastomotic fistula, and the chest tube was repositioned for better lung expansion and fistula drainage. Today, on the 25th day, he remains in good general condition, without infections, on a zero oral diet, enteral nutrition with post-pyloric NS, weaning from parenteral nutrition, with a fistulous treatment schedule with vacuum tube and esophageal prosthesis. **CONCLUSION:** Advanced ME is considered a serious pathology, although rare, and its definitive treatment is exclusively surgical. As it is a debilitating disease that affects nutritional status, surgery carries a high risk of complications. Thus,

the patient needs to be closely monitored and well prepared before the procedure. Likewise, your complications must be promptly resolved.

91. CLINICAL AND EPIDEMIOLOGICAL PROFILE OF LEPROSY IN PIAUÍ FROM 2016 TO 2020

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INTRODUCTION: Leprosy is a chronic infectious disease caused by *Mycobacterium leprae*. In Piauí, it is endemic and constitutes a public health problem, since besides causing skin lesions, this disease can course with limiting chronic neurological lesions, such as loss of sensibility, peripheral neuritis and motor sequelae. The course of the disease depends on the individual's cellular immunity and may evolve to cure or to paucibacillary, borderline or multibacillary forms. Reactive states also leave sequelae and can occur during or after treatment. Thus, diagnosis, early treatment and recognition of reaction states are essential to interrupt the chain of transmission and to prevent neurological sequelae of the disease. **OBJECTIVES:** To study the clinical and epidemiological profile of leprosy patients in the state of Piauí, between 2016 and 2020, comparing with the national reality. **METHODS:** Quantitative descriptive epidemiological study, prepared from data obtained from the Notification System of Notifiable Diseases (SINAN), in the period from 2016 to 2020. The following data were analyzed: sex, race, age group, macroregion of origin, clinical form, skin lesions, performance of skin smears and occurrence of leprosy reactions. **RESULTS:** In the period from 2016 to 2020, 5545 patients diagnosed with leprosy in Piauí were registered, with 1124 cases notified in 2016 (20.3%), 1343 cases in 2017 (24.2%), 1318 cases in 2018 (23.8%), 1176 cases in 2019 (21.2%) and 584 cases in 2020 (10.5%). The male population showed higher prevalence, with 56.7% of cases during the 5 years, while the female population reached 43.3%. As for the race of patients, browns showed higher prevalence in all years, being 69.6% overall. Moreover, the population of adults between 40-69 years of age (52.5%) and the Mid-North macro-region (51.3%) were the most affected over the years. Regarding the clinical form, the dimorphic form was the most prevalent, with 46.8% of cases. Regarding skin lesions, most patients presented more than 5 lesions (multibacillary) (38%). In addition, 47.4% of patients did not undergo sputum smear microscopy and 66.4% had no reaction. **CONCLUSION:** The profile of the cases analyzed points to the prevalence of involvement of men, browns, between 40-69 years, indicating the need for public policies aimed at this population in order to reduce the number of cases and their complications.

92. PITIRIASIS VERSICOLOR ASSOCIATED WITH INSULIN RESISTANCE: A CASE REPORT

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INTRODUCTION: *Pityriasis versicolor* (PV) is a superficial fungal disease caused by *Malassezia furfur*, a lipophilic fungus found in the horny layer of the skin. The most frequent location of PV is in areas of higher sebaceous gland concentration, such as the upper half of the trunk and arms, but it can also affect the face, abdomen and even the lower limbs. Insulin resistance (IR) is responsible for several alterations in the immune system. Therefore, the action of IR promotes a significant deficiency of the immune response on the vasculature system, which favors infections and delays their resolution. **CASE REPORT:** F.A.S.M., 31 years old, male, from Teresina-PI, street vendor, sought Dermatology outpatient clinic complaining about some pruritic lesions all over the body. He reported that the condition started about 5 years ago, getting worse with some exposure to the sun. In addition, he said he had already taken medication, but he did not know much about it, and that there was an improvement about such condition for about 8 months. After this period, the lesions and symptoms returned, causing such damage that he decided to change careers. He denied having comorbidities and allergies. The physical examination displayed *Acanthosis nigricans* in the cervical region and hypochromic, pruritic, scaling spots on the malar region, neck, back, upper and lower limbs. The Wood's light examination evidenced golden-yellow fluorescence in the lesions. The diagnostic hypothesis was *Pityriasis versicolor* associated to insulin resistance. A treatment for PV with local spray isoconazole and oral ketoconazole for 20 days was chosen for such condition. In addition, fasting glycemia and fasting insulin were requested for diagnostic confirmation. Upon return, the patient presented recovery from the lesions and brought tests that confirmed the association of PV with insulin resistance. Finally, the treatment for PV with ketoconazole cream for 20 days along with the continuous use of metformin was prescribed for the patient. **FINAL CONSIDERATIONS:** It was observed that the insulin resistance is a precipitating factor in the appearance of infection by recurrent PV. Thus, the importance of dermatological examination in general medical practice is highlighted, since cutaneous manifestations may reflect in the early diagnosis of systemic diseases.

93. EVALUATION OF PROGNOSTIC FACTORS OF PATIENTS WITH DIAGNOSIS OF GIANT CELLS BONE TUMOR

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INTRODUCTION: The giant cell tumor (GCT) of bone is a benign-looking mesenchymal neoplasm with aggressive characteristics, affecting mainly individuals in the third and fourth decades of life, with a slight predominance in females, and they are located preferentially in the epiphyseal region of the long bones. The most used classification is that of Campanacci. **OBJECTIVES:** Evaluate the prognostic factors of patients diagnosed with bone GCT treated between 2009 and 2019 in a philanthropic hospital in Teresina-PI, as well as determine the regional clinical and epidemiological profile. **METHODS:** Analytical, observational and cross-sectional with retrospective collection and quantitative approach, with analysis of medical records of patients diagnosed with GCT treated at a philanthropic hospital in Teresina-PI from 2009 to 2019. **RESULTS:** Forty-nine medical records were evaluated, with 55.1% women; with

53.1% of cases in the age group 20–40 years; 69.4% of Campanacci grade III cases; 30.6% affecting the proximal end of the tibia. There was a low rate of pathological fracture along with the tumor and pulmonary metastasis. Intralesional surgery was performed in 69.5% of patients. Recurrence occurred in 16.3% of cases. **CONCLUSION:** The criteria used for diagnosis, classification and treatment used in our service followed the standards established in the literature. Being able to guide further research and improve the local prognosis in the future.

94. RECURRENT PAPILLARY CARCINOMA: A CASE REPORT

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INTRODUCTION: Papillary carcinoma is the most common malignant neoplasm of the thyroid, accounting for about 80% of cases. The prevalence of this type of pathology is higher in children, adults under 30 years of age, patients with a history of head and neck irradiation, and patients with a family history of thyroid cancer. It usually manifests as a nodule of firm consistency, detectable on physical examination or ultrasound. Management is based on the ultrasound pattern and on the interpretation of fine needle aspiration puncture. Definitive diagnosis is confirmed by histopathological examination. **CASE REPORT:** Patient, female, 62 years old, complaining of a painless nodule in the neck in April 2015. After ultrasonography, which showed a lesion with irregular contours in the right thyroid lobe, she underwent partial thyroidectomy: 2.1 cm papillary carcinoma of the classic non-encapsulated variant. Compromised surgical margin due to extrathyroid tumor extension and present angiolymphatic invasion. The resection was completed after one month, the patient started iodine therapy and remained in follow-up with thyroglobulin dosage and thyroid hormone replacement. In 2020, thyroglobulin 12.2 with the possibility of relapse. Magnetic resonance imaging showed nodular lesion in L3 vertebra and computed tomography (CT) with bilateral pulmonary nodules. Cervical CT with lesion invading cricoid cartilage, subglottic larynx and trachea. The patient underwent radiiodotherapy and palliative chemotherapy. Currently, 8 months after the diagnosis of recurrence, she is in good general condition, with a reduction in the lesion with an expanding effect on the right visceral space and a slight increase in nodulation in the tracheoesophageal sulcus. **FINAL CONSIDERATIONS:** The case reported brings to light the discussion about the treatment of papillary thyroid carcinoma, as the monitoring of patients through periodic evaluations is essential to avoid late diagnosis of disease recurrence. Thyroglobulin dosage, when altered after thyroidectomy, may indicate tumor recurrence, in this report, irregular thyroglobulin dosage may have contributed to the patient's prognosis.

95. EPIDEMIOLOGICAL ANALYSIS OF CASES OF AMERICAN TEGUMENTARY LEISHMANIASIS IN THE NORTHEASTERN REGION FROM 2016 TO 2019

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INTRODUCTION: American Tegumentary Leishmaniasis (ATL) is an infectious disease, with low mortality, non-contagious, caused by a protozoan of the genus *Leishmania*. Transmission is by the bite of insects called sand flies - belonging to the genus *Lutzomyia*. ATL can present four clinical forms: cutaneous (LC), disseminated (DL), mucosal (ML), and diffuse (CDL). The cutaneous form is the most common presentation of the disease, accounting for more than 90% of cases in Brazil. ATL is an important dermatological affection, both because of the risk of deformities and the psychological involvement of patients. In view of this, ATL is a serious public health problem, requiring studies that portray its occurrence and clinical-epidemiological characteristics. **OBJECTIVE:** To describe the epidemiological profile of ATL cases in the Northeastern Brazilian states, in order to provide a statistical comparison between them in the period from 2016 to 2019. **METHODS:** We conducted a descriptive, quantitative study, in which the secondary data used were obtained from the Sistema de Informação de Agravos de Notificação (SINAN) and the Departamento de Informática do SUS (DATASUS). The confirmed cases notified in SINAN of ATL in all Northeastern states in the period between 2016 and 2019 were counted on a monthly basis, as well as their clinical manifestations. **RESULTS:** Bahia (BA) had the highest monthly average of registered cases (173.33) and Rio Grande do Norte (RN) the lowest (0.52). The absolute value for Bahia was 8,320 confirmed cases of ATL, while for Rio Grande do Norte it was 25, representing 0.06% and 0.00079% of the population of these states, respectively, according to the last census data. The cutaneous clinical form was registered, on average, about 19 times the mucosal form. June, September and December had the lowest rates of registered cases, while January, February and March had the highest, comparatively 50% more cases than the months with the lowest. No state showed a significant and steady reduction in the number of ATL infections and 6 states had more cases in 2019 than 2016. **CONCLUSION:** ATL is a disease that persists in northeastern Brazil and has increased in recent years, with summer being the season with more infections. It is important, then, that projects are carried out by the Ministry of Health in conjunction with State Governments for prevention, diagnosis, control of ATL and more accurate data collection.

96. PILOMATRIXOMA: A CASE REPORT

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INTRODUCTION: Pilomatrixoma is a benign calcified and rarely invasive tumor of uncertain etiology that arises in the sebaceous glands. It presents through hardened nodules on the skin that can affect any part of the human body, despite being more frequent in the cervical and cranial region, affecting mainly children, adolescents, and young adults. **CASE REPORT:** An 18-year-old female patient sought specialized care due to a tumor on her back (interscapular region). On physical examination, a mobile nodule with central ulceration, drainage of serous secretion and no clinical evidence of adherence to deep planes measuring approximately 8 cm in its largest diameter was observed. In addition, mobile adenomegaly in the left axilla with reactive characteristics was observed. Anatomopathological and immunohistochemical examination favored the presence of pilomatrixoma and magnetic resonance imaging did not show invasion of deep planes. Based on

the clinical history, excision of the tumor was indicated, and the pathological examination identified an exophytic ulcerated lesion consistent with a pilomatrixoma measuring 7 cm in its largest diameter, 0.8 cm from the nearest margin, presence of an area of central ulceration with a size of 2.2 cm in its largest diameter and, in the cuts, a necrotic area of 7.0 x 4.0 cm, with a distance of 1 cm from the deep margin was observed. **FINAL CONSIDERATIONS:** Most patients cannot feel the nodulation and do not present specific symptoms, with only a feeling of discomfort to the touch, erythematous and swollen appearance. It is a differential diagnosis in cases of head and neck masses in people up to 21 years of age, the main diagnostic tool being incisional biopsy. However, as this is an invasive procedure, a clinical diagnosis is usually made, hampered by the lack of knowledge. Treatment consists of complete surgical excision of the mass.

97. MARJOLIN ULCER WITH DEGENERATION FOR SARCOMATOID SPINOCELLULAR CARCINOMA: CASE REPORT

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INTRODUCTION: Marjolin ulcer is a chronic malignant ulcerated lesion resulting from chronic scarring, especially after burns. It is a rare entity and squamous cell carcinoma (SCC) is the most frequently found (75-96% of cases). The latency in malignant transformation is an average of 3 decades. **CASE REPORT:** A 65-year-old patient searched for specialized care because, on histopathological examination of a burn scar acquired in childhood in the sternal region, a sarcomatoid SCC with infiltration of the reticular dermis, without angiolymphatic or neural invasion. Two years earlier, excision of a sarcomatoid squamous cell carcinoma was performed; at the pathology exam measuring 2.5 cm and with free margins. The current physical examination showed the presence of extensive burns in the sternal region with ulceration around 5 cm in its largest diameter; imaging exams without evidence of bone invasion were performed. Based on the clinical history and complementary exams, surgery was indicated for resection of the lesion with a skin graft and immunohistochemistry, which was compatible with sarcomatoid SCC. **FINAL CONSIDERATIONS:** The development of SCC in chronic ulceration or scarring is a relatively rare event. The percentage of burn scars that will suffer malignant degeneration is estimated at 2%. The average latency time from the time of the injury to the proof of the neoplasm is about 30 years, however there are cases of acute evolution within a period of up to one year, especially when burn scars are the cause of the injury. Chronic scarring or ulcerated lesions that undergo changes in their clinical evolutionary appearance must be evaluated as potentially carcinomatous and ulcerations with a tendency to chronicity must be promptly addressed. The patient in question was referred to surgery for resection of the lesion with a skin graft; performed immunohistochemistry, which showed compatibility with sarcomatoid SCC and partial necrosis.

98. IMMEDIATE RECONSTRUCTION OF NASAL TRAUMA WITH MEDIOFRONTAL FLAP: CASE REPORT

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INTRODUCTION: One of the main etiological factors of nasal deformities is trauma, which can result in aesthetic, anatomical and functional injuries. In these cases, nasal reconstruction can be challenging due to the centralized and protruding position of the nose, playing an important aesthetic role in the face. An adequate and easy-to-use nasal reconstruction technique is the mediofrontal flap. Studies show that this flap is a great option for nasal coverage, due to its safety, amount of skin obtained and similarity in skin color, texture and thickness. **CASE REPORT:** Male patient, 33 years old, victim of a motorcycle accident with tip trauma and left nasal wing with loss of substance. Opted for immediate reconstruction by making a mediofrontal flap supplied by the supraorbital artery. The flap had its pedicle released after twenty-five days. The patient returned for consultation nine days after the second procedure to remove the stitches. It evolved very satisfactorily with good perfusion, without losses. **FINAL CONSIDERATIONS:** Based on the above-mentioned case and the available literature, it could be seen that the use of the mediofrontal flap has a determinant value in nasal reconstruction with large losses, considering its similarities with the receiving area, in addition to vascular safety and amount of skin possible to obtain. Furthermore, there is minimal deformity in the donor area, in order to obtain an aesthetically favorable result.

99. LONG-TERM FOLLOW-UP OF A PATIENT WITH PANTOTHENATE KINASE-ASSOCIATED NEURODEGENERATION CAUSED BY MUTATION OF THE PKAN2 GENE

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INTRODUCTION: Pantothenate Kinase Associated Neurodegeneration is an autosomal recessive disease caused by mutation of the PKAN2 gene. It has symptoms such as parkinsonism, dystonia, dysarthria, cognitive decline and iron accumulation in the brain. The case in question is characterized by the atypical form of the disease, due to its late onset, being less common than the classic form. Until then, several drugs are available and do not interfere in the progression of the disease, among them botulinum toxin and neuroleptics. **CASE REPORT:** A 38-year-old man was diagnosed with Pantothenate-Associated Neurodegeneration Kinase (APNK) 16 years ago. At the first consultation, he presented with stereotyped movements in the left hand, dysarthria, and generalized tonic-clonic seizures for about 2 years. Magnetic resonance imaging of the skull indicated the "tiger eyes" sign. Thus, neurodegeneration associated with PANK2 was found. In the following year, there were behavioral changes, with signs of insomnia, aggressiveness, depression, and anxiety, in addition to worsening of the motor picture, with the appearance of motor tics, progressive dystonia in the left foot, and difficulty walking. Over 15 years, a diverse drug therapy was introduced, with pimozide, memantine hydrochloride, baclofen, biperidene, levodopa, risperidone, sodium valproate, carbolothium, calcium pantothenate, coenzyme A, and several botulinum toxin applications in the affected muscles. However, the patient evolved

with loss of deambulation and speech capacity, a marked cognitive decline and worsening of insomnia, depression, anxiety and aggressiveness. Thus, unusual clinical aspects were observed in the evolution of the condition, with a predominance of neuropsychiatric dysfunctions such as depression and psychosis, similar to schizophrenia. Skull MRI revealed a typical sign of the disease, the "tiger's eyes": hyperintense lesion in the globus pallidus surrounded by T2-weighted hypointensity. **FINAL CONSIDERATIONS:** The case describes a variable course disease with difficult identification of diagnostic clinical features. Atypical form is infrequent a predominance of extrapyramidal symptoms, which analyzed in isolation could induce diagnostic error. Therefore, it is worth highlighting the importance of the "tiger eyes" sign in the MRI, as well as the confirmation by genetic test in order to exclude possible differential diagnoses, establishing appropriate prognosis and treatment.

morbidity in the state of Piauí, mainly in São Raimundo Nonato, and that there is a predominance of individuals with brown color, men, despite not being the majority in the number of deaths, aged 60 to 69 years. Based on this prevalence, an intervention focused on the target profile is necessary.

100. HOSPITAL MORBIDITY DUE TO PULMONARY THROMBOEMBOLISM IN THE STATE OF PIAUÍ: EPIDEMIOLOGICAL ANALYSIS

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INTRODUCTION: Pulmonary thromboembolism is an acute cardiovascular disease with variable systemic repercussions, which basically occurs due to an obstruction of the pulmonary artery due to the accumulation of materials that circulate in blood vessels (emboli), such as blood clots (the main causes of the PTE). This pathology represents the third most serious cause of cardiovascular disease in the world, with a mortality rate above 65%. **OBJECTIVES:** To identify the epidemiological profile and outcome of patients hospitalized for PTE in the state of Piauí. **METHODS:** This is a descriptive, exploratory epidemiological study with a quantitative approach. The database used was the Mortality Information System, made available by the Information Technology Department of the Unified Health System (DATASUS), from 2011 to 2021. The analyzed aspects were: gender, age group, municipality, color/race and region. The data used in the preparation of this research are freely accessible, which justifies the absence of the opinion of the Research Ethics Committee. **RESULTS:** Between 2011 and 2021, there was a total number of 495 cases of hospitalizations and 63 cases of deaths from PTE in Piauí. In the state, the municipality of São Raimundo Nonato was the most affected in admissions with 116 cases (23.43%), followed by Teresina with 92 cases (18.59%), and the number of deaths prevailed in the municipality of Teresina with 23 cases (36.15%), followed by Parnaíba with 6 cases (9.52%). Among the reported cases, the highest number of admissions was male, with 350 cases (70.71%), and deaths were female, with 38 cases (60.32%). Regarding color/race, brown color was the most prevalent with 283 cases (57.17%) of hospitalizations and of these 14 (22.22%) were deaths, while black only registered 17 (3.43%). The age group from 60 to 69 years was the one with the highest number of hospitalizations with 30.51%, while cases of deaths predominated in the age group over 80 years, with 23 deaths (36.51%). These data rank Piauí at third place in the Northeast region in terms of hospitalizations and deaths due to PTE. **CONCLUSION:** It is concluded that PTE is a phenomenon that causes death and

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