

ANALYSIS OF PHARMACEUTICAL CARE IN MENTAL HEALTH IN THE MUNICIPALITY OF NITERÓI – RJ

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Introduction

Mental health assistance has undergone transformations over time, globally. Currently, it is guided by the principles of Psychiatric Reform, proposing care in freedom, promoting autonomy and psychosocial rehabilitation for individuals with severe and persistent mental disorders. In the Brazilian Public Health System (SUS), treatment is offered in a community care network, consisting of various devices, such as: Psychosocial Care Centers (CAPS), Basic Health Units, Mental Health Outpatient Clinics, Therapeutic Residential Services, psychiatric beds in General Hospitals, to expand access to health at all levels of complexity, longitudinally¹. In this expanded care scenario, pharmacists are inserted into pharmacy services, developing Pharmaceutical Care actions, through technical-management activities of logistics and supply that ensure safe and quality medicines, and clinical-assistance actions, to promote the rational use of medications and pharmaceutical care centered on user needs². The present study aimed to conduct a situational diagnosis, to understand how Pharmaceutical Care in Mental Health is organized in the city of Niterói-RJ.

Material and Methods

The research was conducted between March 22 and 29, 2023, covering four outpatient pharmacy services that compose the municipality's CAPS: two Adult CAPS, one Alcohol and Drugs CAPS, and one Child and Youth CAPS, and one hospital pharmacy service, located at the municipal Psychiatric Hospital. For this, ten researchers, undergraduate and graduate students from the Pharmacy School of the Fluminense Federal University (FFU), formed pairs for field research to conduct a systematic survey for data collection, through direct observation and semi-structured interviews with the pharmacists of the units. Based on the dimensions *structure, processes, and results*³, the questionnaire displayed closed questions related to the activities that compose the pharmaceutical cycle, from drug programming to dispensing and rational use, as well as open questions to understand the professionals' perception on this topic. The answers to the open questions were recorded in audio format and later transcribed for content analysis. The research was approved by the Research Ethics Committee of the FFU School of Medicine.

Results and Discussion

Five pharmacists participated in the study, four professionals from outpatient units and one from the hospital unit. All units have a pharmacist responsible for the pharmacy, with managerial and clinical duties. It was possible to perceive that all perform activities directly related to the pharmaceutical cycle (selection, programming, storage, dispensing), although acquisition and distribution activities were not reported as assistance tasks. However, the results differ between units, showing that there is no standardization in the services performed. Professional potentialities in the CAPS were observed: reception activities for new users, home visits, suicide prevention actions, active participation in team meetings, matricial support and shared care with devices in the territory. On the other hand, challenges were also highlighted: no service of this profile is enabled according to specific legislation, and infrastructure conditions are not ideal; the absence of an electronic management system was one example presented. Furthermore, there is no exclusive team for Pharmaceutical Care development; some pharmacists work alone or have support from professionals

of other categories. At the hospital level, some different results from the outpatient units were pointed out, such as the presence of a robust team in the pharmacy, management through an information system, and technical documentation attesting to the regularity of the service. The lack of specific permanent training on Pharmaceutical Care was reported. In general, all pharmacists recognized the great importance of clinical activities in patient care, but their implementation was limited, either due to infrastructure problems or insufficient human resources.

Conclusion

The data analysis provided insight into the operation of Pharmaceutical Care in Mental Health. Potentialities and challenges were evidenced, demonstrating the importance of developing strategies to improve the Pharmaceutica Care in Mental Health offered to the users of the mentioned units.

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