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Sociodemographic Profile of Pregnant Women with Syphilis in Dourados - Ms, Reported to The Information Against Notification System (SINAN)

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Abstract

Syphilis is a disease that has Treponema pallidum as its etiologic agent, has been known for at least 500 years. Congenital syphilis is the result of the hematogenous spread of Treponema pallidum, from an untreated or improperly treated infected pregnant woman, via the transplacental route. This is a descriptive and retrospective study that analyzes an online database, the Ministry of Health's Notifiable Diseases Information System (SINAN) in which, among other problems, the cases of pregnant women with syphilis that occur are recorded. in the country. All cases of gestational syphilis in residents of the city of Dourados-Mato Grosso do Sul, registered with SINAN in the years 2009 to 2013 were included. The number of cases of gestational syphilis reported in the study interval was 181 cases in the city of Dourados o which demonstrates the need to develop effective actions aimed at its control, as well as health education for the population, since it is a completely preventable disease, as long as there are prevention and treatment measures for the pregnant woman and her partner.

Keywords: Pregnant; Syphilis; Epidemiology

Introduction

According to Brasil [1], syphilis is a disease that has *Treponema pallidum* as its etiologic agent and has been known for at least 500 years. It is, in most cases, a sexually transmitted disease, although it can be transmitted by transfusion of contaminated blood, by contact with mucocutaneous lesions rich in treponemas and by transplacental route to the fetus or through the birth canal, which configures congenital syphilis. Congenital syphilis is the result of the hematogenous spread of *Treponema pallidum*, from the infected pregnant woman untreated or inadequately treated for her conceptus, via the transplacental route. Vertical transmission of *Treponema pallidum* can occur at any stage of pregnancy or

clinical stage of maternal disease [2,3]. Thus, gestational syphilis, despite having a simple diagnosis and effective treatment, still has an alarming prevalence, especially in poor or developing countries [4]. It is believed that 12 million new cases of syphilis occur annually in the adult population worldwide, 90% of them in developing countries. Estimates indicate that congenital syphilis is responsible for more than 500 thousand fetal deaths per year worldwide [5, 6]. Despite being an easily diagnosed disease and easily preventable when the treatment of the pregnant woman and her partner is properly performed, syphilis is still considered an important public health problem [7]. This study aimed to know the

sociodemographic profile of pregnant women notified with syphilis in the city of Dourados from 2009 to 2013.

Methodology

This is a descriptive and retrospective study that analyzes an online database, the Ministry of Health's Notifiable Diseases Information System (SINAN). This system is powered by compulsory notification forms, which consist of a standardized form with sociodemographic and clinical information filled out by health professionals. All cases of gestational syphilis in residents of the city of Dourados-Mato Grosso do Sul, registered with SINAN in the years 2009 to 2013 were included.

All reported cases of gestational syphilis in residents of Dourados, registered with SINAN in the years 2009 to 2013, were included, a total of 181 cases that met the criterion for defining confirmed cases according to the Ministry of Health. The sociodemographic variables that were analyzed: educational level, clinical form of syphilis, age, type of residence. The information related to the variables is displayed in tables, based on the calculation of absolute values and, subsequently compared with the relevant literature. The program used to build the tables of cases of gestational syphilis was Microsoft Excel 2010.

Results and Discussion

<u>Table 1</u>: Confirmed cases of pregnant women with syphilis by education level in the city of Dourados-MS in the years 2009 to 2013. Source: Ministry of Health / SVS- Notifiable Diseases Information System-SINAN NET.

Schooling	Notified cases
Ignored / white	55
Illiterate	1
1 st to 4 th incomplete EF series	17
4 th complete EF series	16
5 th to 8 th incomplete EF series	49
Complete primary education	13
Incomplete high school	15
Complete high school	13
Incomplete higher education	2
Total	181

The profile of pregnant women with syphilis in this study is in line with results already found in the literature. 181 cases of syphilis were reported in pregnant women between 2009 and 2013 in the city of Dourados. In Table 1 we can analyze the level of education of pregnant women with syphilis in the city of Dourados-MS in the period from 2009 to 2013 and (30.38%) of these women had schooling not completed by the health professional Most of

the notified pregnant women (27.07%) had only between the 5th to 8th incomplete series, then (9.39%) between the 1st to 4th incomplete series, (8.8%) of the notified pregnant women had only the 4th complete series, Only (7, 18%) had completed high school and only (1.10%) of them had incomplete higher education. In the study by Cavalcante et al5 about (76.0%) of pregnant women with gestational syphilis had incomplete elementary schooling, corroborating the results similar to this study. In the study by Serafin et al. [8], low education is considered a marker of greater risk for exposure to sexually transmitted infections, due to a limited understanding of the importance of preventive measures.

Regarding the age group of pregnant women diagnosed with syphilis, about (74%) of pregnant women are in the age group between 20 and 39 years old, as we can see in Table 2. The data found corroborating with the study carried out by Cavalcante et al. [4] the majority of pregnant women with syphilis (67.8%) were in the 20-34-year age group, similar to the results found in the present study. Regarding the area of residence (83.9%) are in the urban area and (15.4%) are in the rural area, with a predominance of cases in the urban area, as observed in Table 3. The study by Figueiro et al. [9] confirms the prevalence of the problem in the urban area, corresponding to (99.8%) of the analyzed population. Regarding the diagnosis of syphilis in pregnant women by clinical classification, about (37.56%) of the filling was ignored / white, (25.41%) was reported in the primary phase and (16.02%) in the latent phase of the disease Table 4.

<u>Table 2</u>: Confirmed cases of pregnant women with syphilis by age group in the city of Dourados-MS in the years 2009 to 2013. Source: Ministry of Health / SVS- Notifiable Diseases Information System-SINAN NET.

Age Range	Notified Cases
14-0ct	1
15-19	33
20-39	134
40-59	13
TOTAL	181

<u>Table 3</u>: Confirmed cases of pregnant women with syphilis by area of residence in the city of Dourados-MS in the years 2009 to 2013. Source: Ministry of Health / SVS- Notifiable Diseases Information System-SINAN NET.

Residence Zone	Notified Cases
Ignored / white	one
Urban	152
Rural	28
TOTAL	181
TOTAL	181

<u>Table 4</u>: Confirmed cases of pregnant women with syphilis by clinical classification in the city of Dourados-MS in the years 2009 to 2013. Source: Ministry of Health / SVS- Notifiable Diseases Information System-SINAN NET.

Clinical Classification	Cases Reported (n)
Ignored / white	68
Primary	46
Secondary	17
Tertiary	21
Latent	29
Total	181

It is observed that the majority of notified cases of syphilis in pregnant women was confirmed in the primary stage of the disease with the study carried out by Almeida on the epidemiological characterization of congenital syphilis in the city of Salvador, Bahia, where a greater number of cases were reported in the phase primary (17.6%). In the study by Schmid [10] on the epidemiological profile of syphilis cases in pregnant women in the city of Sobral-CE, the most frequent clinical classification among pregnant women with syphilis was the primary, equivalent to (71%) of the cases. At this stage of the disease, according to Brazil [11], the rate of vertical transmission is high, being estimated at (70% to 100%). These findings disagree with the study by Guidi [7], on oral manifestations of syphilis, where, of the total diagnoses of syphilis, (1.6%) were classified as primary syphilis, (11%) as secondary, (16.4%) latent and (2.6%) tertiary.

Conclusion

It is inferred in this study that the majority of cases of gestational syphilis were aged between 20 and 34 years old, the prevalent education level was that of incomplete elementary school, and the majority of pregnant women live in the urban area regarding the clinical classification, most cases were diagnosed in the primary phase. The number of cases of syphilis during pregnancy reported

during the study interval in the city of Dourados-MS demonstrates the need to develop effective actions aimed at its control, as well as permanent health education for the population, since it is a disease totally avoidable, as long as there are prevention and treatment measures for the pregnant woman and the partner. Thus, it is necessary to continue studies in this area so that we can know the gaps found in public health that have not yet allowed to considerably reduce the cases of gestational syphilis and its possible problems for the fetus.

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