

A tropical beach scene with palm trees and a blue sky. The image shows a sandy beach in the foreground, with the ocean extending to the horizon. Several palm trees are visible, some leaning over the water. The sky is a clear, vibrant blue with some light clouds. The overall atmosphere is peaceful and serene.

***Good Afternoon***

***Forte Beach in Salvador, Bahia, Brazil***



3RD INTERNATIONAL  
Cancer Control Congress

INTERNATIONAL COLLABORATIONS

8-11 NOVEMBER, 2009 / CERNOBBIO, COMO, ITALY

## Breast Cancer Control Strategic: the Public Programs trajectory in Brazil



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## Introduction – The background



### The largest countries in the world

- 1 - Russia: 17.075.200,000 Km<sup>2</sup>
- 2 - Canada: 9.984.670,000 km<sup>2</sup>
- 3 - United States: 9.631.418,000 km<sup>2</sup>
- 4 - China: 9.596.960,000 km<sup>2</sup>
- 5 - Brazil: 8.514.876,599 km<sup>2</sup>**

### The biggest populations in the world

- 1 - China: 1.333.720, 000
- 2 - India: 1.171.618, 000
- 3 - United States: 307.784, 000
- 4 - Indonesia: 229.965,000
- 5 - Brazil: 189.953,000 (2008)**



# Introduction – The background



## Territorial organization

- Federal Republic
- 1 Federal District
- 26 states
- Health System it is mix, afford for 25% Private Services and **75% Public Services** (SUS – Unique Health System).

Women = 97.520,000  
**(51,34%)**

- Brazilian Population  
189 953,000 (2008)

Men = 92.433,000  
**(48,66%)**

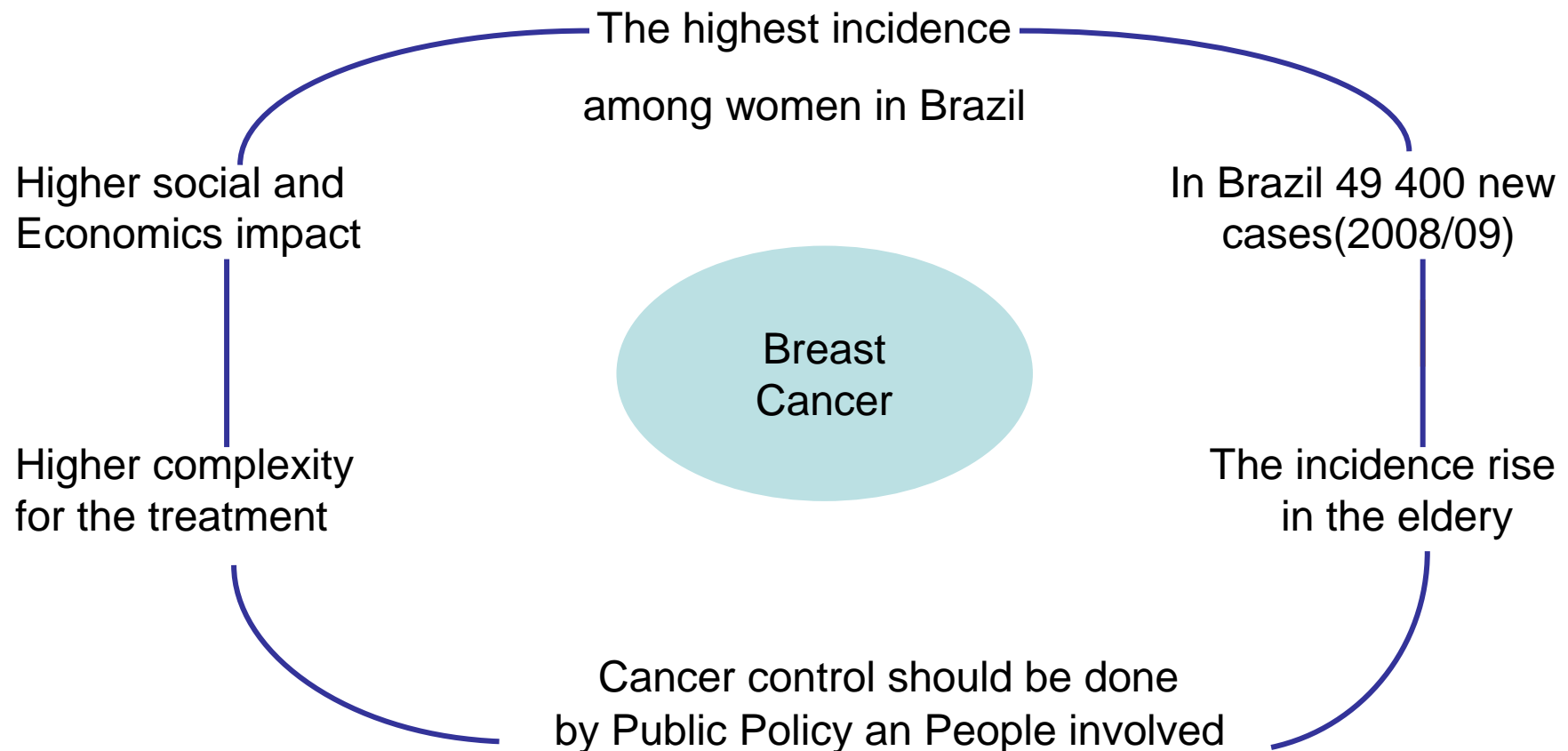
©ghiapereira

IBGE. *Síntese dos Indicadores Sociais: uma análise das condições de vida da população Brasileira*. 2009, 252 p  
MS e IBGE. *Pesquisa nacional por amostra de domicílios. Acesso e utilização de serviços de saúde*. 2003, 169 p.



# Introduction

Cancer it is a Public Health Problem

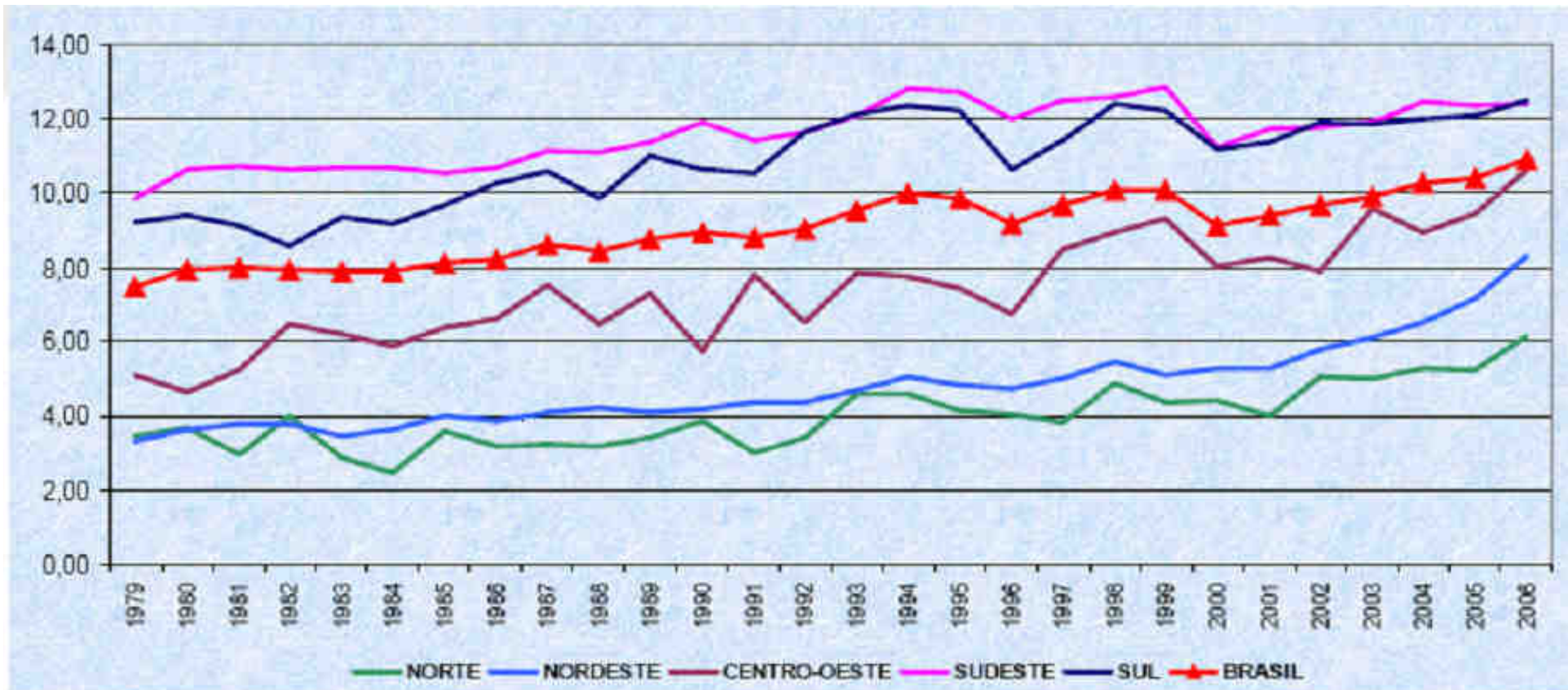




# Introduction



Breast Cancer Mortality Rate, Brazil, Large-regions, between 1979 to 2006 (\*)

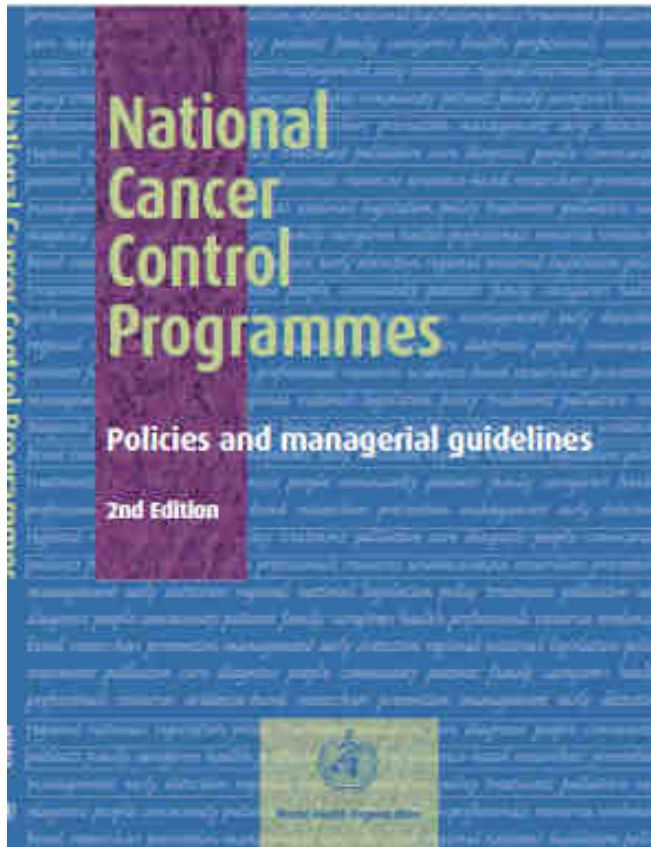


Source: MS/SVS/DASIS/CG1AE/SIM – IBGE, MS/INCA/Conprav/Divisão de Informação. <http://mortalidade.inca.gov.br>

(\*) Rate adjusted for age in brazilian population for 100 000 women.



## *Introduction*



The impact of the disease has required Governmental Control Interventions by Public Programs and new forms of collaboration among countries.

These Programmes are described in several documents that need to be evaluate in the view to understand the strategy.



## *Objective*



To investigate in a chronological line, which strategies were used during the development of National Breast Cancer Control Program in Brazil.





## *Method*

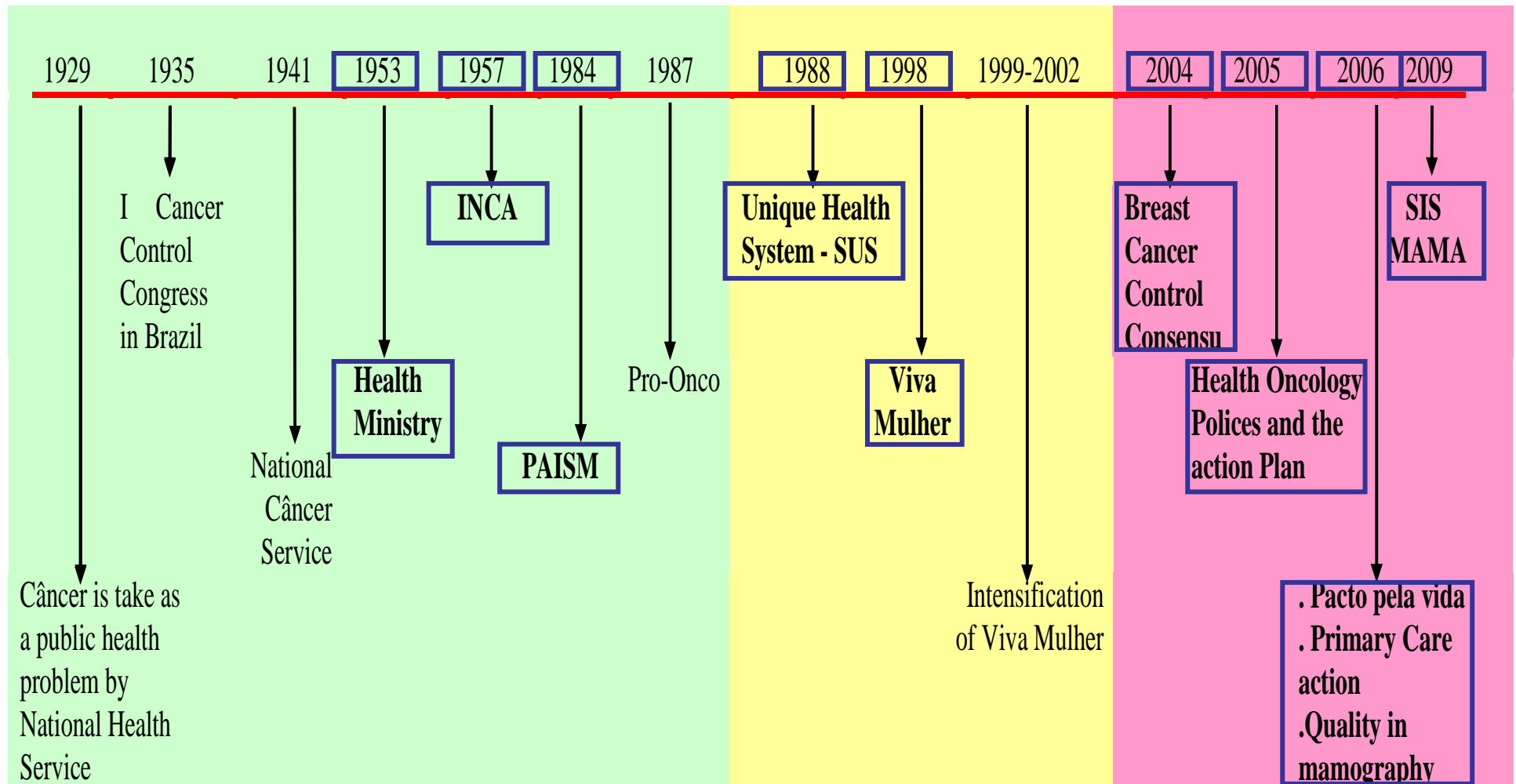


- Narrative review.
- Documental research in the data base of National Health System.
- The keywords used were: breast cancer control, cancer programs and women health.



# Results

From all the documents found, 10 principals of those were analyzed, between 1998 to 2009. The principals events found in those documents were:



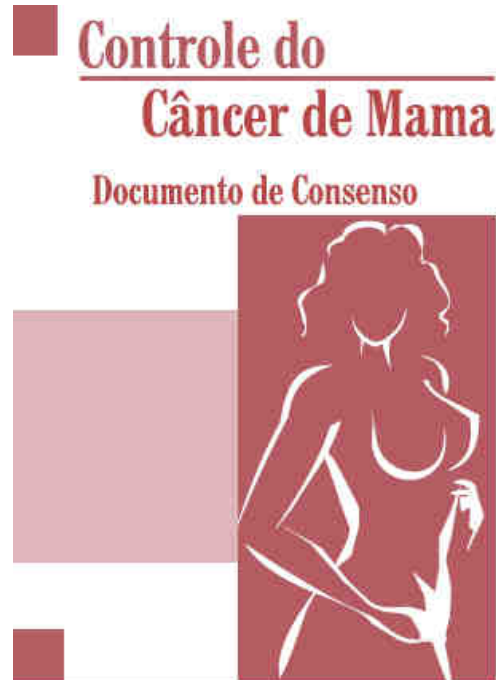
# Results

## The Strategies for Breast Cancer Control

2004

Before 2004

- Self breast examination
- Education
- Cancer treatment
- Reconstruction breast surgery

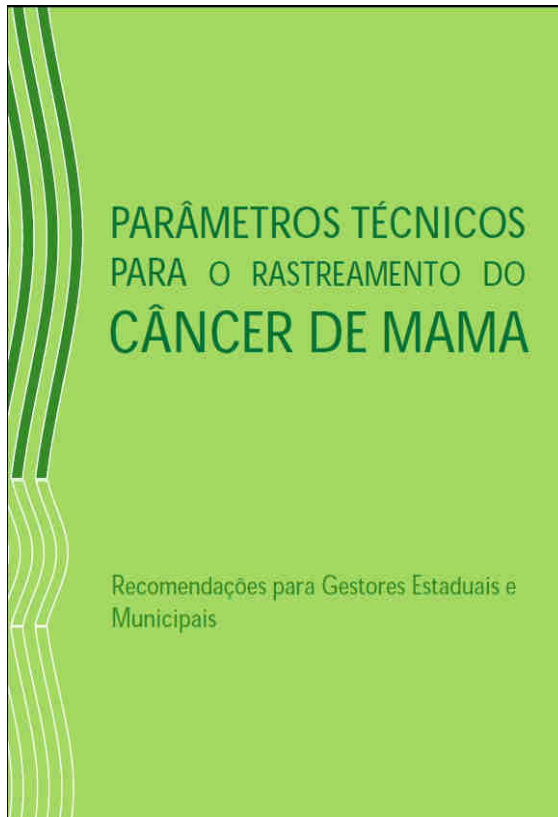


After 2004

- Screening will start on primary care
- Education in health promotion
- Early detection
- Identification of target public
- Opportunistic screening
- Mammography services qualification.



## Results



The procedures for Breast Cancer Control Consensus according to the women age should be:

- 35 years old – just for Women at high risk of breast cancer, once a year with mamography and clinical breast examination
- 40 to 49 years old: Clinical Breast Examination, once a year.
- 50 to 69 years old: Mamography every 2 years and clinical breast examination every year.
- Self Breast Examination for all ages every month.

The assystematic screening should start on primary care.



## Results

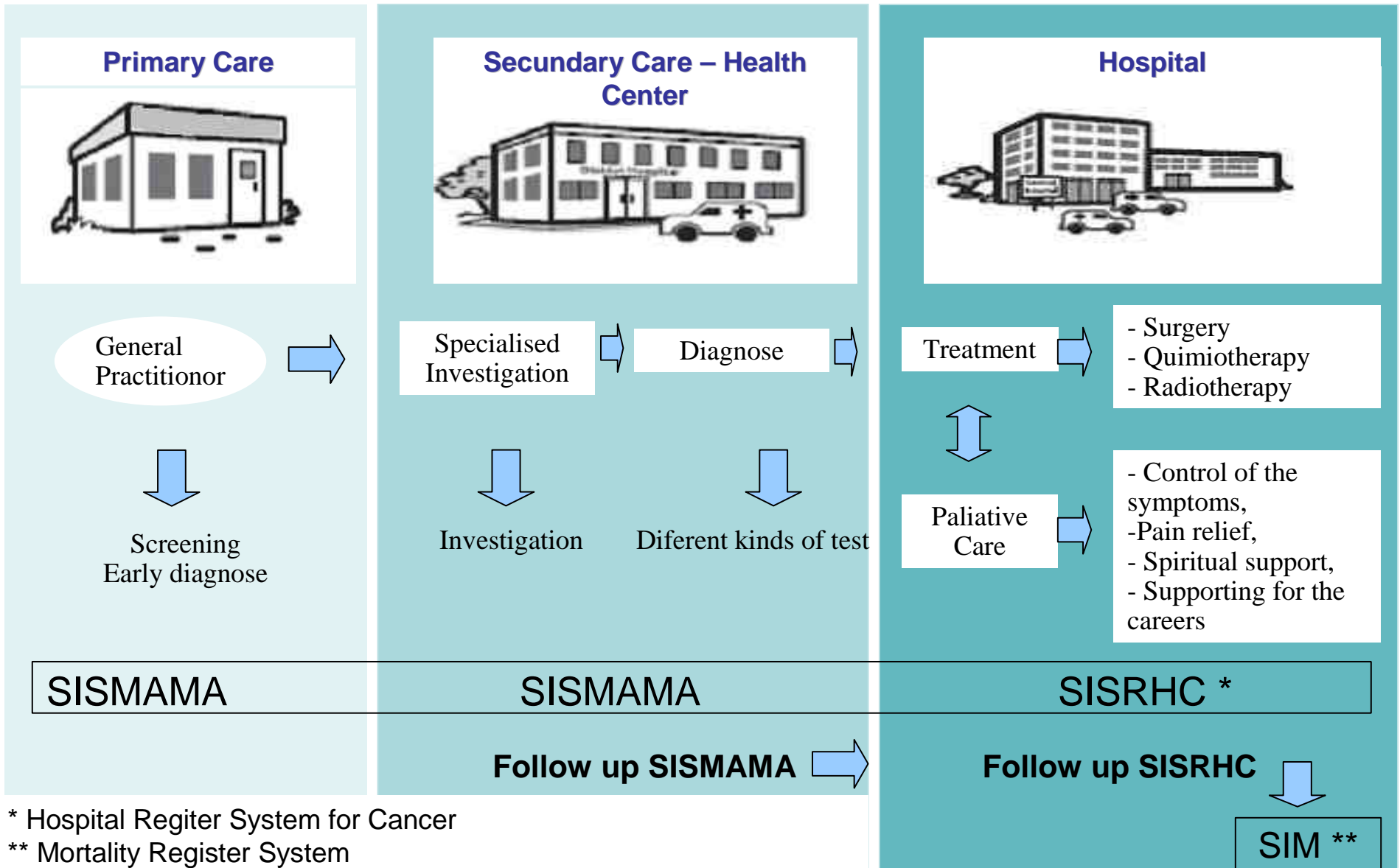


In 2005 was highlighting the development the National High Complexity Oncology Structure for treatment by the National Oncology Politices.

Nowdays:

- The network system in breast cancer will start running a pilot test,
- Ways to implement a systematic breast cancer screening has been targeted with some helpful advises from the Developed Countries.

# Results



\* Hospital Register System for Cancer

\*\* Mortality Register System



## *Conclusion*



- The most of all trajectory had been drive to the treatment and education to the population and to the health professional.
- Early detection is now in focus.
- The long time spent to get in this way, should be looked through the results into the economy influences in developing countries add to the Brazil territorial length.
- Despite all it, the Brazilian Breast Cancer Strategies has improved and still looking forwards.



Thanks a lot

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