

Using Patient Navigation to Ensure Access to Breast Cancer Treatment in Times of the COVID-19 Pandemic in Brazil

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"The problem always has the solution it deserves, in the terms of the way in which it is stated".

-Gilles Deleuze

Access to health services supports all quality efforts, especially in a system of universal health coverage existing in Brazil, and in the search for equitable, timely, efficient, integrated and acceptable by the population. Health care - and particularly the assistance of the health service team - is, of course, a social practice that is also technologically complex (and multidetermined). What is expected from the assistance of a health service, regardless of the social diversity and inequality in the regions of Brazil? I believe that there must be a baseline that is common, with adaptation to socio-cultural contexts, for all services in Brazil.

Although there is a trajectory of actions for the prevention and control of breast cancer in Brazil, the scenario of high incidence, disease diagnosed at an advanced stage and high mortality, remains a constant because of barriers to access to health care. Recognizing the negative impact of this situation, in 2012, the Brazilian government issued Law No. 12.732/12 of the Ministry of Health, or the "Law of 60 days". This law establishes that treatment for any type of cancer for patients in the public health system must begin within 60 days of the definitive diagnosis. Unfortunately, women diagnosed with breast cancer and users of the public health system (SUS) are only able to comply with the law in 39% of cases, taking an average of 125 days to start treatment. Quite different from women who use the private service who can be treated in about 32 days, complying with the law in 87% of cases.

In 2017, in a collaborative network with Global Cancer Institute, State Health Secretariat of Rio de Janeiro and Brazilian NCI, a patient navigation program (PNP) was developed and implement-

ed to help women diagnosed with breast cancer and coming from SUS to start treatment at a specialized center within 60 days. Since then, a trained social worker facilitates a patient's passage through the health care system by providing services such as scheduling diagnostic and follow-up appointments, facilitating health system referrals and coordinating communication between patients and health care professionals. The main barriers reported by patients to access treatment were: fear and fatalistic thoughts, difficulty in communicating the patient with the medical team and uncoordinated health care and the PNP's performance was considered excellent by the patients. In 2020, in the middle of the COVID-19 pandemic, with the support of Instituto Avon and Fundação Laço Rosa, PNP managed to reduce the time to start treatment to 38 days. The law enforcement rate was 86%.

To achieve this incredible success, changes were necessary in the work processes of the oncology journey. The central pillar was to recognize the importance of understanding the patient's experience to move towards patient-centered care. I invite everyone to understand that the health problem can "deserve better solutions" with production of the common for populations in areas where access to health is fragmented and health systems can be fragile and lack resources. In the Brazilian context, PNP can represent an opportunity to properly implement the existing legislation and, as such, it would have a great potential to favor the functioning of the health system in the health care network. Find out more about the approaches adopted in our methodology in the "Manual de Navegação de Pacientes: experiência brasileira" (Patient Navigation Man-

ual: Brazilian experience) that describes the necessary steps and informs the tools to incorporate patient navigation in a health organization in Brazil.

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