

1240

BREAST CANCER DURING PREGNANCY - EPIDEMIOLOGY TO PROGNOSIS: A SYSTEMATIC REVIEW

CATEGORIA DO TRABALHO: PESQUISA

Thalia Michele Vier Schmitz, Pedro Carlos Fritscher Junior, Igor Luiz Dos Santos Kessler, Juliana da Silva Uhlmann, Eduardo Priesnitz Friedrich, Eduarda Goldani Rodrigues Peixoto, Jaqueline Neves Lubianca
UNIVERSIDADE FEDERAL DO RIO GRANDE DO SUL
HOSPITAL DE CLÍNICAS DE PORTO ALEGRE

Background: Breast cancer (BC) during pregnancy refers to those diagnosed during pregnancy or up to one year after birth. Although it is a rare condition, it is the most common malignant neoplasm associated with pregnancy. Still, health professionals have concerns about the basics related to the care of these patients. Thus, bringing up the best evidence to reduce questions is essential. Objectives: Address topics related to BC during pregnancy - epidemiology, risk factors and prevention, screening and diagnosis methods, treatments and prognosis - to build an informational base in order to guide health professionals not specialized in the field through management of these patients. Methods: A systematic review was done searching Cochrane, Pubmed, Scielo, Embase and Lilacs databases. A set of keywords was elaborated according to each topic addresses. Thus, research was done separately for each topic. The analysis of the articles was done, firstly, by title, then by abstract and, finally, by the entire article. Only articles in Portuguese, English and Spanish were included. The final ion was reviewed by all group members and was based on the quality of evidence and year of publication. Results: Clinical diagnosis of BC is difficult due to physiological changes associated with pregnancy that occur in breast tissue. Mammograms and ultrasound, associated or not with magnetic resonance imaging, are preferably indicated when additional investigations tests are required. Management is similar to that directed to non-pregnant women; genotypic and phenotypic characteristics of the tumor are analyzed, as well as patients singularities, making it possible to choose approaches that do not cause harm to the fetus, as well as ensure the adequate treatment of the illness. Both surgical and systemic therapy approaches are available. However, any interventional measures must be interrupted a few weeks before childbirth. In the postpartum time, after systemic therapies, a withdrawal security period is indicated before beginning breastfeeding. Conclusions: Available interventions to treat BC during pregnancy are essentially the same ones offered for non-pregnant women with similar health conditions; care should be taken, however, with the safety profile of these approaches regarding the fetus. Investigation and interventional measures offering a proper management of the disease while not compromising the fetus and womans health should be prioritised.

1290

AVALIAÇÃO DO ENSINO SOBRE SEXUALIDADE HUMANA ENTRE MÉDICOS RESIDENTES DO SUL DO BRASIL

CATEGORIA DO TRABALHO: PESQUISA

Janete Vettorazzi, Fernanda Santos Grossi, Luciana Borges Chagas, Edimárlei Gonsales Valério, Rodrigo Rossi Balbinotti, Vitória Ruschel Lorenzon, Milena Nunes Pinto
UNIVERSIDADE FEDERAL DO RIO GRANDE DO SUL
HOSPITAL DE CLÍNICAS DE PORTO ALEGRE

INTRODUÇÃO: A sexualidade é um componente fundamental na saúde física e psicológica do ser humano. Apesar de sua indiscutível importância e da alta prevalência de disfunções sexuais na população, muitos médicos não costumam abordar o tema "sexualidade" de forma rotineira em sua prática. Essa lacuna na assistência à saúde pode estar relacionada com inconsistências na incorporação da sexualidade na formação médica. OBJETIVO: Avaliar a abordagem do tema sexualidade no ensino e na prática de médicos residentes em programas de Ginecologia e Obstetrícia (GO), Medicina de Família e Comunidade (MFC), Psiquiatria e Urologia. MÉTODOS: Estudo transversal entre médicos residentes em ginecologia, urologia, psiquiatria e medicina de família, avaliando o conhecimento adquirido em sexualidade durante a graduação em medicina e durante a residência médica e sua aplicação na prática clínica através de um questionário estruturado. RESULTADOS: Foram incluídos 114 residentes de 4 programas com idade média de 27,7 anos, sendo 44 do programa da Psiquiatria, 35 da Gineco/Obstetrícia, 18 da Medicina de Família e Comunidade e 17 da Urologia. Em relação ao número de horas-aula, 60,4% tiveram até 4 horas-aula abordando sexualidade na graduação, e 80,7% tiveram até 4 horas-aula sobre