

Arterial Hypertension and Diabetes Mellitus Basic Health Care

During the period of 2000 and 2002, the Brazil have improved its AH (Arterial Hypertension) and DM (Diabetes Mellitus) basic health care through the Reorganization Plan of Arterial Hypertension and Diabetes Mellitus Attention.

It has been implanted through Brazilian Ministry of Health, State and Municipal Secretariats of Health in partnership along with National Council of State Secretariat of Health - CONASS, National Council of Municipal Secretariat of Health - CONASEMS, Pan American Health Organization - PAHO, Brazilian Societies of Cardiology, Nephrology, Hypertension, Diabetes, National Federations of Hypertension and Diabetes Bearers.

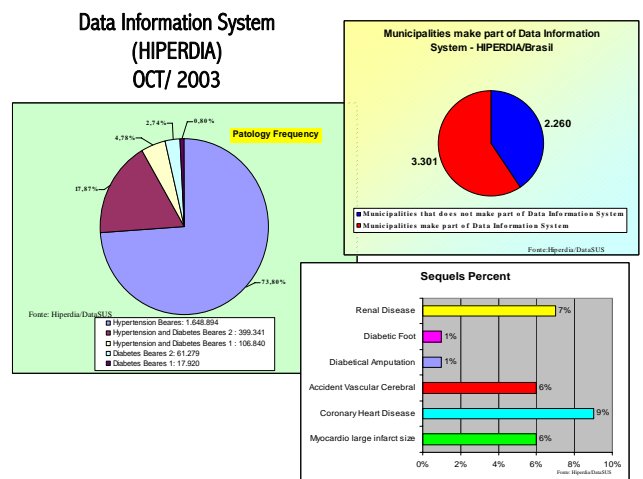
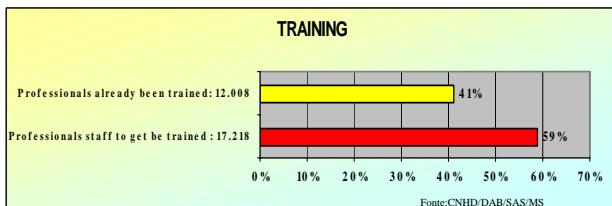
OBJECTIVE:

To reduce in-patients number in order to seek to first-aid clinic and expenses with complex treatment, precocious retirements and cardiovascular mortality search to aim an expressive improvement of life quality on the population.

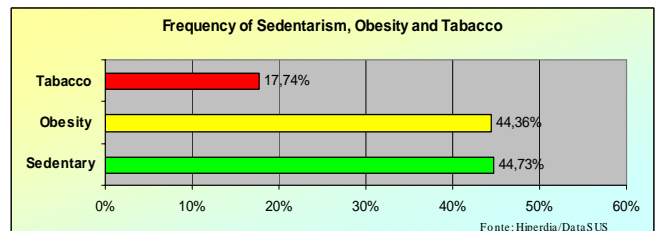
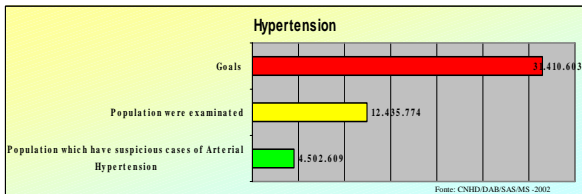
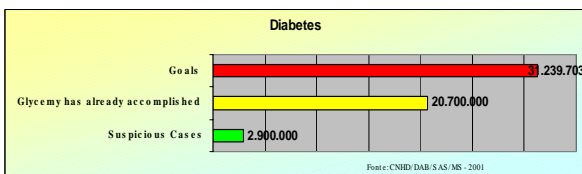
ACHIEVEMENT (2001 a 2003)

1 - to update multipliers which have been training the professionals in Arterial Hypertension and Diabetes Mellitus - whose has been developed actions on the Brazilian Health System (SUS).

GOAL: To update 29.226 health professionals (physicians and nurses)



2 - Campaigns of Arterial Hypertension and Diabetes Mellitus suspicious detection cases seeking precocious diagnosis and intense incentive to the life habits promotion. Population Goal: Equal or more than 40 years old



5 - Registering and entailment of bearers of both - AH and MD - to the Basic Health Units.

Proposed 2004-2005

Permanent education on the Basic Care Attention services: training, consultancy, Distance Teaching and Learning.

To motivate the registry enlargement on the Information System of Information linking the bearer to the Basic Health Unit.

Definition of indicators monitoring and evaluation which allowing to follow the attention actions to DM and HA along with proposal to qualify these kind of actions.

Elaboration of Clinical Protocols and professionals training to its own use.

Definition of the healthy life styles promotion policies, health promotion and, risks prevention (to get sick and complications)

Integration of actions relating to basic care attention along with actions of average and high complexity seeking to reduce complication risks: Renal Disease, Diabetic Foot, Cardiovascular Chronic Disease and blindness.

Looking for as well as to strengthen partnerships.