



Evaluation of referrals from primary care to a tertiary Rheumatology service in Porto Alegre – RS, Brazil.

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BACKGROUND

Delays in accessing specialist care is one of the greatest limitations of the Brazilian Unified National Health System (Sistema Único de Saúde - SUS). Identification of factors associated with such delays is fundamental for the construction of strategies to ensure timely access to early treatment and consequently improve disease outcomes. Our objective is to evaluate the quality of referrals from primary care to the Rheumatology Service at the Hospital Nossa Senhora da Conceição - Grupo Hospitalar Conceição (HNSC-GHC), Porto Alegre, RS, Brazil.

MATERIALS AND METHODS

In a prospective cross-sectional study, physicians of the Rheumatology Service at HNSC-GHC collected information regarding referrals over a 6-month period. Referrals were considered appropriated when an autoimmune inflammatory disease was suspected by the rheumatologist at the first evaluation.

RESULTS

500 first consultations were scheduled from 01/10/2017 to 03/31/2018, and data from 357 patients who attended their appointments were analyzed. Inflammatory autoimmune diseases were suspected by the rheumatologists in 184 patients (51.6%). Rheumatoid arthritis was the most common diagnosis, followed by systemic lupus erythematosus and spondyloarthritis (see details in Table 1). In the group of non-autoimmune diseases (173 patients, 48.4%) the most common diagnoses were fibromyalgia and osteoarthritis (Table 1).

CONCLUSION

The quality of referrals from primary care to specialized Rheumatology care in our state may be one of the aspects involved with the long waiting time for first appointments, since most of the referred patients probably did not need treatment at tertiary care level. Therefore, we emphasize the importance of interaction between the rheumatologist and the general practitioner (through courses or training programs in Rheumatology for primary care), which may enhance the quality of referrals and reduce waiting times.