



## **IMMUNIZATION IN PATIENTS WITH RHEUMATOID ARTHRITIS IN TERTIARY HEALTH CARE SERVICE**

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### **BACKGROUND**

A significant portion of the population with chronic inflammatory diseases, although more susceptible to infections, remains unprotected. This is the case of patients with rheumatoid arthritis. The optimization of care for patients with autoimmune disease requires treatment of the underlying disease and minimization of infection-related comorbidity, with vaccination being an important component. The objective of the study was to determine and evaluate the frequency of vaccination among patients with rheumatoid arthritis who use immunobiologicals in a rheumatology center in Belém, Pará.

### **MATERIALS AND METHODS**

A cross-sectional and descriptive study through interviews, in the period from June to July 2017, with 36 patients diagnosed with rheumatoid arthritis using immunobiological therapy. The following data were analyzed: age, sex, schooling, comorbidities, time of disease, immunobiological in use and vaccines performed.

### **RESULTS**

Most of patients were women(83%) in the age group over 60 (39%) and had incomplete secondary education (31%). Systemic arterial hypertension was more frequent comorbidity (30.6%). The mean time from diagnosis of rheumatoid arthritis was 144 months. Adalimumab was the most commonly used immunobiological agent (44%). The most commonly used vaccines were: influenza (H1N1) (21%), yellow fever (17%), diphtheria and tetanus (dT) (16%), hepatitis B (16%) and hepatitis A (13%). The majority of the patients (97%) had an outdated vaccination schedule, and 56% received medical recommendation on need for vaccination.

### **CONCLUSION**

Continuous medical education and the orientation of patients in relation to updating the vaccination schedule are necessary, especially those that use immunosuppressive medications. In this way, it is possible to prevent infectious complications that can lead to death and promote the well being of the patient with rheumatoid arthritis.