



INCIDENCE OF DENGUE IN BRAZIL IN 2017

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BACKGROUND

Dengue is an arbovirolosis transmitted to humans through the bite of the *Aedes aegypti* mosquito contaminated with the virus of the Flaviviridae family. Common in tropical climates, the clinical aspects of the disease range from nonspecific conditions (exanthema, arthralgia, myalgia and headache associated with fever) to hemorrhagic conditions that may precede shock. This disease is a problem of public health in Brazil, as much in the sphere of treatment as in prevention.

MATERIALS AND METHODS

Cross-sectional and documentary study with a quantitative approach, with a sample of 239,395 individuals with a suspected case of dengue fever reported in Brazil in 2017 through the DATASUS Information System for Notification of Aggravations. It was evaluated the data variables by the month of care, serotype, the occurrence of hospitalization, race, education, age, region and state of residence.

RESULTS

The number of notifications for dengue in Brazil in 2017 was 239,395 (incidence = 114.37 per 100,000 inhabitants). The most affected were brown populations (115,030 cases), complete secondary education (22,502 cases) and 20-39 years (95,773 cases). The first half of the year (January - June) had a higher incidence, representing 79.8% of all cases, with April being the month with the highest number (40,508 cases). The Northeast Region was responsible for 83,602 notifications (34.5% of all cases), of which 39,104 were in the State of Ceará alone. The South Region had the lowest number of notifications in relation to the others (2,519 cases). The presence of the vector *Aedes aegypti* becomes larger in warm and humid places, as in the tropical climate of the northeast, in rainy seasons, predominantly from January to June. The high incidence of this disease is directly related to the educational level and the local infrastructure, since in order to cope with the vector, some knowledge about preventive measures is necessary. Faced with the aforementioned facts, they can be related to factors, especially the number of hospitalizations in the Northeast, with a relatively low enrollment rate, and a low number of hospitalizations in the region.

CONCLUSION

With this, the number of examples of dengue cases in the northeast of the country should be the most sensitive to the region, which favor the presence of the mosquito *Aedes aegypti*. Schooling and local infrastructure are other important factors for epidemiological analysis, since the Northeast has a low schooling rate and a high number of hospitalizations, reflecting the lack of knowledge to combat this disease.