





RHEUMATOID ARTHRITIS PACIENTES LACK OF ADERENCE TO VACCINAL IMMUNIZATION PROGRAMS: A BIBLIOGRAPHIC REVIEW

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BACKGROUND

Patients with Rheumatoid Arthritis (RA) have increased risk for infectious diseases. It is known that depending on the state of immunosuppression, the vaccines may have a lesser effect, but it is still the main preventive measure. The Brazilian Society of Rheumatology indicates that all RA patients should follow the vaccine schedule, avoiding only those with attenuated virus such as hepatitis B, influenza and tuberculosis. However, there is still a growing antivacin movement, which puts collective protection against individual autonomy on the path. Therefore, this study aimed to evaluate the importance of vaccination for the health of patients with RA.

MATERIALS AND METHODS

A literature search was performed on the SciELO, LILACS and MEDLINE databases, published between 2014 and 2019. A total of 121 articles were found, being used as descriptors: RA, vaccines, autoimmune disease. Tem of them were selected that fit the criteria of inclusion, being about vaccination and RA, and those of exclusion, animal studies and bibliographic review.

RESULTS

Studies report that the reasons why many patients do not adhere to vaccination are complex, including: misinformation, temporal relation with adverse effects, concomitant diseases, access difficulties and even conscious refusal for fear of exacerbation of the preexisting condition. The same study revealed that among the total of respondents only 7.3% were informed by the rheumatologist about the need for vaccination as a preventive character for infectious diseases; however, 63% of these were already vaccinated, even without the specialist's information. In addition to individual risks, such as disease exacerbations and predisposition to infection, these populations that do not use the vaccine induce attitudes that pose a risk to public health, resulting in higher rates of morbidity in the population and public health expenditures that could be avoided. Thus, the literature, although scarce, reports the importance of more specific interventions in risk groups.

CONCLUSION

The evolution of the antiviral movement directly affects patients with RA. Continuous monitoring and interventions in populations that refuse vaccination and the need for awareness through information campaigns and other methodologies become necessary tools to reduce infectious disease in RA patients. This can be done through health professionals, especially rheumatologists, encouraging vaccination as a path of maintenance for a better quality of life and control of their underlying pathology.