



Health workers with reports of headache in a medium-sized hospital in the interior of São Paulo and self-medication with analgesics

Trabajadores de la salud con relatos de cefalea en un hospital de mediano porte del interior de São Paulo y automedicación con analgésicos

Funcionários da saúde com relatos de dor de cabeça em hospital de médio porte no interior de São Paulo e automedicação com analgésicos

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Abstract

The aim was to detect the level of headache prevalence and awareness of the nursing team regarding self-medication for headache, 50 nursing professionals answered the questionnaire applied at Santa Casa de Misericórdia de Avaré, the data obtained were analyzed by the Epi-Info[®] software. Self-medication with analgesics is something very common among health professionals. Nursing has a pharmacological knowledge base and for this reason has greater self-confidence to self-medicate. It was evidenced that 100% of people are aware of self-medication and are fully aware of its risks, although this knowledge does not prevent 78.9% of people who participated in the research from self-medicating with analgesics, the ease of access to drugs makes it easier for the individual to self-medicate to feel pain relief, which may be camouflaging a more serious disease, causing chronic dependence or collateral damage in their body by the use of analgesics with certain types of active principles. A relative percentage sought medical attention for headache although this did not prevent them from self-medicating with other non-prescription drugs.

Descriptors: Headache; Self Medication; Awareness; Nursing; Analgesics.

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Resumén

El objetivo fue detectar el nivel de prevalencia de cefalea y conciencia del equipo de enfermería respecto a la automedicación para la cefalea, 50 profesionales de enfermería respondieron el cuestionario aplicado en la Santa Casa de Misericordia de Avaré, los datos obtenidos fueron analizados por el software Epi-Info®. La automedicación con analgésicos es algo muy habitual entre los profesionales sanitarios. Enfermería tiene una base de conocimientos farmacológicos y por ello tiene mayor confianza en sí misma para automedicarse. Con la investigación realizada se evidenció que el 100% de las personas conocen la automedicación y son plenamente conscientes de sus riesgos, aunque este conocimiento no impide que el 78,9% de las personas que participaron en la investigación se automediquen con analgésicos, la facilidad de acceso a los medicamentos facilita que el individuo se automedique para sentir alivio del dolor, lo que puede estar camuflando una enfermedad más grave, provocando dependencia crónica o daños colaterales en su organismo por el uso de analgésicos con cierto tipo de principios activos. Un porcentaje relativo buscó atención médica por dolor de cabeza, aunque esto no impidió que se automedicaran con otros medicamentos sin receta.

Descriptor: Cefalea; Automedicación; Concienciación; Enfermería; Analgésicos.

Resumo

Objetivou-se detectar qual o nível de prevalência de cefaleia e conscientização da equipe de enfermagem perante a automedicação para a dor de cabeça, 50 profissionais da área da enfermagem responderam ao questionário aplicado na Santa Casa de Misericórdia de Avaré, os dados obtidos foram analisados pelo *software Epi-Info*®. A automedicação com analgésicos é algo muito comum no meio dos profissionais da área da saúde. A enfermagem tem uma base de conhecimento farmacológico e por esse motivo tem uma autoconfiança maior para se automedicar. Com a pesquisa realizada foi evidenciado que 100% das pessoas têm consciência sobre a automedicação e tem pleno conhecimento sobre seus riscos, embora esse conhecimento não impeça que 78,9% das pessoas que participaram da pesquisa se automediquem com analgésicos, a facilidade de acesso aos fármacos facilita para que o indivíduo se automedique para sentir um alívio da dor podendo estar camuflando uma doença mais séria, causando uma dependência crônica ou danos colaterais em seu organismo pelo uso de analgésicos com determinados tipos de princípios ativos. Uma porcentagem relativa procurou atendimento médico para cefaleia embora isso não os impediu de se automedicar com outros fármacos não prescritos.

Descritores: Cefaleia; Automedicação; Conscientização; Enfermagem; Analgésicos.

Introduction

Most patients with chronic daily or occasional headache use excessive painkillers, often self-medicating. The mechanisms by which these interfere and cause chronification are beginning to be known. The World Health Organization (WHO) proposes that, for the rational use of medicines, it is first necessary to establish the need to use the medicine and to prescribe the appropriate medicine, the best choice, according to the dictates of proven and acceptable efficacy and safety.

In addition, it is necessary that the drug is properly prescribed, in pharmaceutical form, doses and duration of treatment; that it is available in a timely manner, at an affordable price, and that it always meets the required quality criteria; that it is dispensed under appropriate conditions, with the necessary guidance and responsibility, and, finally, that the therapeutic regimen already prescribed is complied with, in the best possible way.

According to a study, in Brazil at least 35% of the drugs purchased are used through self-medication. There are several reasons that lead the individual to self-medication with analgesics, such as the difficulty of accessing health services, sometimes waiting days and even months to be seen by a doctor, the low purchasing power of

the population and the precariousness of health services. the ease of obtaining medicines without any kind of prescription and advertising of medicines at pharmacy counters^{1,2}.

There is also drug advertising, which has been a frequent stimulus for the inappropriate use of medicines for headaches, mainly because it tends to emphasize the benefits and omit or minimize the risks and possible adverse effects, giving the impression, especially the lay people, who are harmless products, influencing to consume like any other commodity. To make this situation even worse, the increasing use of the Internet to disseminate advertising to consumers was observed, many of them assuming a less explicit form as they try to give the impression that they are educational or information instruments, aiming to promote health³.

According to the Federal Council of Pharmacy (CFF), a report recently concluded by the United Nations (UN) alerts the world's health authorities to the rapid trafficking of licit drugs (controlled drugs) by virtual pharmacies, whose main form of action is the emails. The CFF spoke out calling attention to the fact that the sale of medicines is much more serious than imagined, because in addition to trafficking, it



accumulates other serious health problems for the population.

Multi-drug users, patients who become addicted and continue to use medication, even after completing treatment, and people who prefer the convenience of receiving products at home and at low prices are targets of the "cyber traffic". It is still important to remember that this type of remote commerce, as it evades inspection and other types of control can also make counterfeit or expired products end up in the hands of unsuspecting users³.

The proposal of immediate relief from suffering, as if by magic, consuming medicines without the need for medical consultation is an attractive appeal, but it has its price. This price is not always restricted to financial factors and can be discounted from one's own health. The notion that there is an ecology of the body, which deserves to be preserved and spared from pollution and unnecessary pharmacological interventions, is emerging, albeit slowly, amidst the dense fog of extraordinary and dubious promises of painkillers that can be purchased without a prescription⁴.

The nursing team working in contact with medications and having a facility to obtain a level of knowledge to know their indications, is easy to self-medicate and prescribe medication when presenting headaches without going through a specialist or undergoing more complex exams to be able to adopt a suitable treatment for each type of headache.

Headache is a very common symptom and should be considered a warning sign, whether it is a result of serious problems or not. The classification of headaches has clinical utility, helping to establish the diagnosis, prognosis and therapeutic approach, and scientific, standardizing the nomenclature of the different types of headache. Primary headaches are those that occur without a demonstrable etiology by the usual clinical or laboratory tests. Secondary headaches are those caused by diseases that can be demonstrated by clinical or laboratory tests⁵.

In these cases, the pain would be the consequence of an aggression to the organism, of a general or neurological nature. Explosive headaches are those that appear abruptly, in a fraction of a second, reaching maximum intensity instantly, sometimes with the patient referring to a pop. This installation suggests rupture of an intracranial arterial aneurysm or other vascular malformations. Acute headaches are those that peak in minutes or a few hours. Both primary and secondary headaches can present this type of installation. Chronic headaches are headaches that persist for months or years and are usually primary. They can be relapses, occurring for periods of minutes, hours or days and then disappearing, reappearing some time later. May be persistent, appearing daily or nearly daily, for a minimum of four hours⁵.

The intensity of pain should remain more or less the same over the months. These are the characteristics of chronic daily headache, one of the most common in physicians' offices, specialized in headache. The physician must be attentive, in chronic headaches, to changes in the characteristics or intensity of the pain, as they may indicate the appearance of associated secondary headache⁶.

Analgesics, antipyretics and anti-inflammatory drugs are among the most widely used medications for headache, with or without a prescription. Most healthy individuals, when ingesting usual doses of analgesics for a short period, do not present abnormal reactions to these drugs and, as they are considered safe, many are sold without a prescription.

Despite the relative safety and widespread use of analgesics, one cannot forget that any medication can cause undesirable effects. Ingestion of excessive doses of analgesics can cause adverse events. Occasionally, even at the usual recommended doses, reactions may occur. Unfortunately, there is a general lack of awareness about the risks of self-medication⁶.

The objective was to carry out data collection on the consumption of analgesics without a prescription and related to the incidence of chronic headache, to investigate the use of self-medication of analgesics for headache, analyzing the habit of consumption of analgesics without adequate awareness of their use.

Methodology

It was developed in a descriptive way through the application of a questionnaire to nursing professionals who were in the sectors from Monday to Friday during the period of 2 months, with questions relevant to the problems identified.

To carry out this scientific investigation, deductive and inductive methods will be used. According to the study, these consist of general methodological resources of science, which guide the ways of reasoning in the development of research. The deductive method guides from the general (hypotheses) to the particular (conclusions). The inductive method guides from the particular (specific facts) to the general (general conclusions). According to the same author, both methodological resources complement each other, that is, the use of one does not exclude the other⁷.

The choice of such methods was justified by the fact that, from these, it will be possible to compile the theoretical knowledge on the subject, through the theoretical foundation, as well as make it possible to generalize this knowledge, through the intervention proposal, in such a way that, these methods will prove to be adequate to what is proposed for the performance.

The sample of this research was 50 people of the 137 nursing professionals from Santa Casa de Misericórdia de Avaré who were on the days and times described, the questionnaire will consist of 22 open questions pertinent to the subject in question, the interviewees answered the questionnaire after signing the Term of Free and Informed Consent (ICF) and approval of the Research by the Research Ethics Committee contained in Resolution No. 466/12 of the National Health Council. Research approved by Opinion No. 773,406 by the Educational Association of Vale da Jurumirim, issued by the Faculty of Medicine of Botucatu (UNIESP), under CAAE: 34607714.4.0000.5411.

The information was stored in the Epi-Info[®] software database, version 6.04. For the statistical study

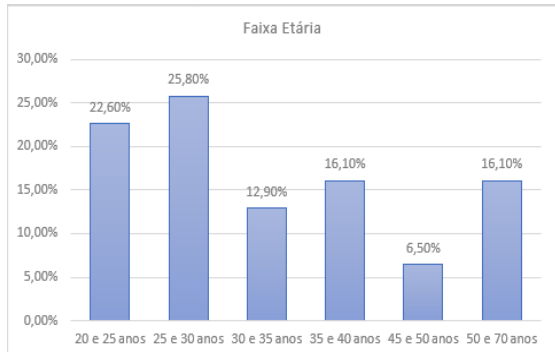


using the chi-square test in the comparisons of 2 X 2 proportions and the Goodman test in the multiple comparisons. For any result, 5% will be adopted as the confidence limit ($p < 0.05$)⁸.

Results and Discussion

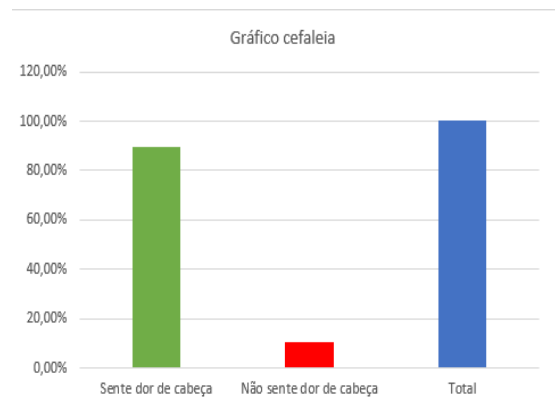
Fifty people who work in the nursing area participated in the research, the following graphs represent the questions that had the relevant values with a margin of error below 0.5% in the Epi-info® software used in the questionnaire answered by the Nursing employees of the Holy House of Mercy of Avaré.

Graph 1. Age range of respondents. Avaré, SP, Brazil, 2015



According to the data shown in the survey, 22.6% of respondents are between 20 and 25 years old, 25.8% are between 25 and 30 years old, 12.9% are between 30 and 35 years old, 16.1% are between 35 and 40 years old, 6.5% are between 45 and 50 years old and 16.1% are between 50 and 70 years old.

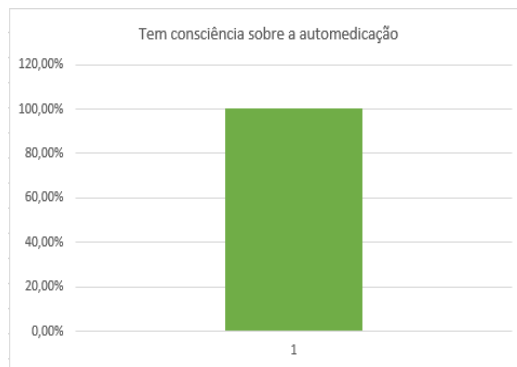
Graph 2. Monthly headache incidence. Avaré, SP, Brazil, 2015



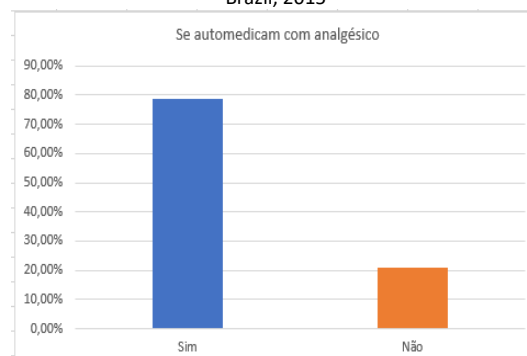
The graph above shows that 89.7% of respondents feel a headache at least once a month. Even with low pain incidence values, they do not prevent the individual from practicing self-medication.

Nursing professionals have broad awareness and knowledge about the risks of self-medication, showing that 100% of the individuals who participated in the research have a pharmacological knowledge base on the effects of self-medication. Studies indicate that people with a higher level of education have more knowledge and feel more confident in taking medicines without a prescription⁹.

Graph 3. Individuals who are aware of self-medication. Avaré, SP, Brazil, 2015

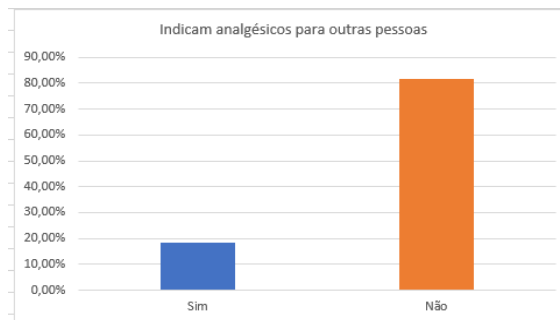


Graph 4. They take painkillers without a doctor's prescription. Avaré, SP, Brazil, 2015



The graph above shows that 78.9% self-medicate with analgesics and 21.1% do not self-medicate. Self-medication is very common in cases of headaches. However, this is not a risk-free practice.

Graph 5. Indicate Painkillers to other people. Avaré, SP, Brazil, 2015



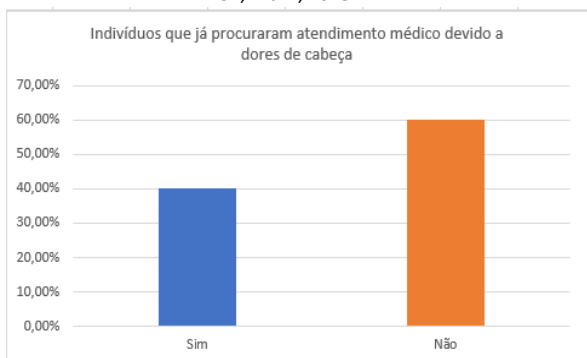
The frequent use of analgesics for a long time can contribute to the development of a chronic headache in the patient. The body becomes dependent on these substances and when the patient does not ingest them, the lack of them triggers the pain. That is, instead of the medicines eliminating the headache, they end up contributing to the worsening of the problem⁹.

The chart above indicates that 18.4% of professionals recommend analgesic drugs to others. On the other hand, 81.6% of health professionals do not recommend analgesic drugs to other people.

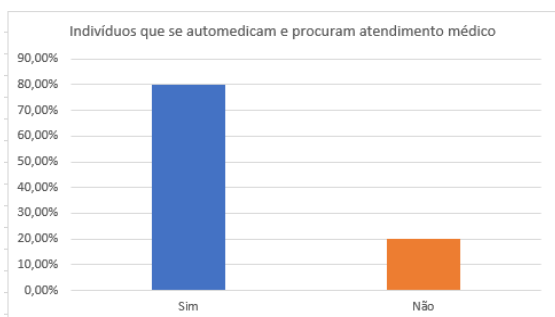
Based on the graphic analysis, 89.7% of the individuals who participated in the research have already felt or feel headaches at least once a month, although of this

percentage, 40% of the people have already sought medical attention complaining of headaches and 60% do not.

Graph 6. Physician search index for headache report. Avaré, SP, Brazil, 2015



Graph 7. Relationship between self-medication and medical demand. Avaré, SP, Brazil, 2015



It is shown from the graphic analysis that 80% of people who take painkillers without a prescription sought care for having a headache, although the search for the professional does not prevent the act of self-medication with other painkillers that were not prescribed by the professional. In the graph below, it is pointed out that 9.1% take homemade medicines and the other 90.9% do not take homemade medicines.

Graph 8. Homemade medicines. Avaré, SP, Brazil, 2015

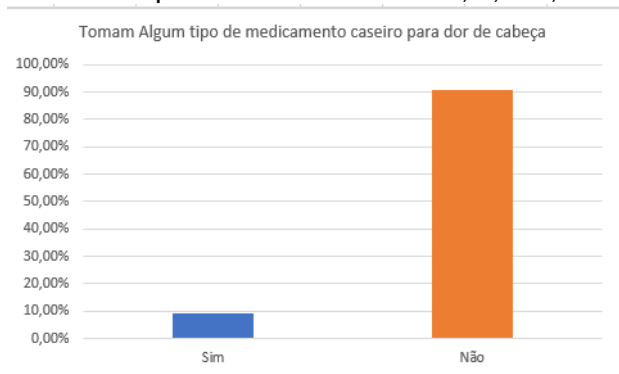
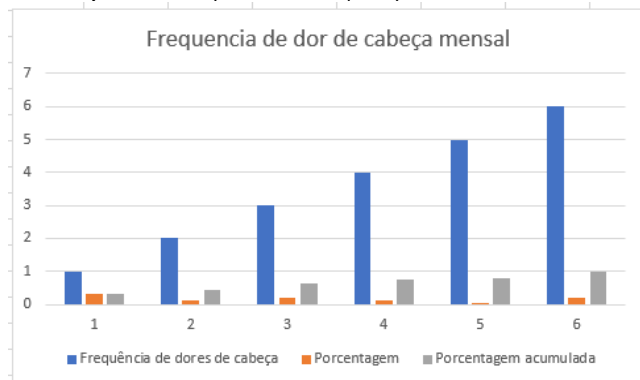


Table 1. Home remedies consumed. Avaré, SP, Brazil, 2015

Homemade medicine	Percent	Accumulated percentage
Unspecified herbal tea	66,7%	66,7%
Chamomile tea	33,3%	100%

Herbal teas are easily found in the homes of people who usually take medications derived directly from the natural plant, although it does not imply that they have effects on the body like any industrialized drug. A medicinal plant is understood to be one that, native or cultivated, is used for medicinal purposes. These owe their pharmacological action to known active principles, eventually providing raw material for the pharmaceutical industry^{10,11}.

Graph 9. Monthly headache frequency. Avaré, SP, Brazil, 2015



The graph demonstrates the incidence of times that the interviewee has a headache in the month. The table below shows the percentage rate in which the individual has a headache related to self-medication, so the highest incidence is given to people who experience headaches 1, 3 and 6 times a month.

Table 2. Monthly pain frequency and self-medication. Avaré, SP, Brazil, 2015

Frequency of headaches in the month	Percentage	Accumulated percentage
1	32,1%	32,4%
2	10,7%	42,9%
3	21,4%	64,3%
4	10,7%	75%
5	3,6%	78,6%
6	21,4%	100%

Graph 10. Percentage rate of individuals who take medications based on other people's indications. Avaré, SP, Brazil, 2015

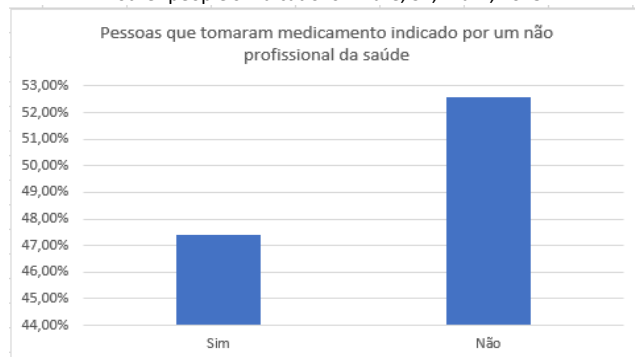


Table 3. Headache intensity. Avaré, SP, Brazil, 2015

Individuals	Intensity
12	Much
7	Few
14	Reasonable

From the analysis of the table, the incidence of reasonable pain overlapped indicating that individuals tend to self-medication. From the graphic analysis, it can be seen that 47.4% of the people have already taken medication by indication, that in addition to being self-medicating, they are consuming analgesics that were not prescribed by a trained

professional to be able to provide the correct treatment for each type of headache condition.

Another problem related to self-medication is drug interaction. In addition, certain substances used indiscriminately have altered the physiological conditions of a patient's body and these changes are often ignored and this must be considered.

Table 4. Self-medication awareness indices and rates of individuals who self-medicate. Avare, SP, Brazil, 2015

Are you aware of the risks of self-medication?	Percentage	Accumulated percentage
Yes	100,0%	100,0%
Do you take over-the-counter pain relievers for headaches?	Percentage	Accumulated percentage
Yes	78,9%	78,9%
No	21,1%	100,0%

The results obtained clearly demonstrate that individuals are fully aware of the risks of self-medication. Although that doesn't stop them from self-medicating with headache pain relievers. Thus, it is possible to observe that 89.7% have monthly headaches and the use of analgesics is very common among the interviewees and that most of those studied use analgesics without a medical prescription. The data obtained show that 100% of respondents are aware of such an act, but this does not prevent 78.9% from self-medicating with analgesics.

Most people experience headaches at least once a month, consequently, the incidence of self-medication with painkillers increases.

Therefore, self-medication and headache interfere with everyday life. The act of self-medicating is very common, consisting of the consumption of a product to treat

or alleviate symptoms and diseases, even in health promotion. Industrialized medicines or home remedies can be used.

Conclusion

From the data obtained in the research, it was found that all nursing professionals who participated are aware of self-medication, although most of them use to self-medicate.

Headache levels vary, however the amount is only once a month. The custom of taking painkillers without a prescription is evidenced in the research in order to demonstrate that everyone knows the risks of taking any painkiller medication indiscriminately. The damage to the long-term health of the organism should be a subject addressed in other studies.

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