

14-4DXH MENSTRUAL POVERTY: CURRENT PANORAMA AND ITS REPERCUSSIONS

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Introduction Many women and people who menstruate in Brazil and around the world live in precarious living situations, where the basics of nutrition and hygiene are lacking, even affecting the ability of these people to have access to sanitary pads or other means to contain menstruation, the so-called menstrual poverty. This situation affects both the physical and mental health of women, so the objective of this study was to verify what is available in the literature on menstrual poverty and its repercussions.

Methods This is an integrative review, with research in the following databases: Pubmed, Scielo, Tripdatabase and Virtual Health Library (VHL), Google Scholar, in Portuguese, English and Spanish, and on Federal Government websites, IBGE and similar, from November 2023 to February 2024.

Results According to a study carried out in Brazil, adolescents miss, on average, around 45 days of school per school year due to a lack of menstrual resources. Another article demonstrated that more than 4 million Brazilian students study in places without sufficient hygiene infrastructure. Of this number, almost 200 thousand do not have any basic hygiene items at school. The same study also points out that 713 thousand girls do not have access to any bathroom in their homes, and another 632 thousand live in places without any common bathroom on the land or property. The main problems related to inadequate management of menstruation were: allergy and irritation of the skin and mucous membranes, urogenital infections such as cystitis and candidiasis and Toxic Touch Syndrome. Among the emotional damages, discomfort, insecurity, stress and increased discrimination against girls and women were most cited, with a decline in well-being, development and opportunities, and withdrawal from leisure activities, physical activity and others.

Conclusion Menstrual poverty has been the reason for several physical and emotional problems in the lives of women and people who menstruate, which leads to losses in their lives and greater demand on health services. In Brazil, the promulgation of Law 14,214/2021 is being processed in the Federal Senate, which creates the Menstrual Health Protection and Promotion Program, aiming at the free distribution of sanitary pads in places such as schools and health services, with an ongoing public consultation. Therefore, it is necessary for the topic to be increasingly discussed and analyzed, seeking to

create strategies and projects that help this population to have their dignity and health preserved.

15-4EAB DECREASE ANTIBIOTIC ADMINISTRATION TIME IN A HIGH-LEVEL HOSPITAL IN MEXICO (HORA DORADA)

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Introduction Febrile neutropenia is a serious complication associated with chemotherapy. Neutropenia may arise from bone marrow suppression, a common toxicity of chemotherapy, or the cancer itself, radiation, or another pathological process can triggered it. Neutropenic is a risk factor infection in patients with hemato-oncological diagnoses, and fever is a common symptom among neutropenic patients. Managing febrile neutropenia is an oncological emergency that requires immediate treatment due to it is a life-threatening nature.

Aim To reduce antibiotic administration time to less than 60 minutes in pediatric patients with hemato-oncological diagnoses and fever (PHODf), through the implementation of the ‘Hora Dorada’ collaborative in a high-level hospital in Mexico.

Methods The ‘Hora Dorada’ is a collaborative effort between the network ‘México en alianza con St. Jude’ and the Institute for Healthcare Improvement (IHI). This project employs continuous improvement methodology and the IHI’s ‘Break-through Series’ model. Initiated at our high-level hospital in 2022, we are currently in the implementation phase. We have used change ideas such as the ‘doradito’, continuous training, dissemination of results and recognition of ‘personal dorado’.

Results Before implementation, we had five patients; while post-implementation, we have treated eighty-four patients. There is a significant difference in the time from triage to antibiotic administration (115 minutes vs. 55.5, $p=0.041$), in the incidence of sepsis (40% vs. 2.4%, $p=0.015$), and intensive care unit admission (ICU) (40% vs. 1.2%, $p=0.007$).

Conclusions The ‘Hora Dorada’ implementation has positive impact in the outcomes of PHODf, particularly in terms of reducing the incidence of sepsis and ICU admissions. Further efforts are necessary to ensure the sustainability of these improvements.

17-4ECS REDUCTION OF CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTIONS IN THE SOLID ORGAN TRANSPLANT UNITS

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The Transplant Program is part of the Support Program for Institutional Development of the Unified Health System (PROADI-SUS) with the objective of carrying out solid organ transplants (SOT), ensuring the quality, safety, universality and equity of care for people in queues of transplant.