

Influence of the pandemic by Coronavírus on the performance of the papanicolau exam in primary healthcare

Influência da pandemia pelo Coronavírus na realização do exame papanicolau na atenção primária

Influencia de la Pandemia del coronavirus en la realización del examen papanicolau em la atención primaria

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How to cite: Andrade CMV, Ribeiro LB, Silva GS, Salles LCB, Anselmo GS, Lima AJV. Influence of the pandemic by Coronavírus on the performance of the papanicolau exam in primary healthcare. REVIS. 2021; 10(4): 743-55. Doi: <https://doi.org/10.36239/revisa.v10.n4.p743a755>

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Received: 30/07/2021
Accepted: 20/09/2021

RESUMO

Objetivo: analisar a influência da pandemia nas consultas preventivas da Saúde da Mulher na atenção primária, descrevendo a percepção das mulheres quanto à assistência de enfermagem e orientação prestada durante o período da pandemia e avaliando sobre o retorno da paciente para busca do resultado. **Método:** estudo de qualitativa e exploratório que utilizou os princípios de Gil. Entre março e dezembro de 2020, foram entrevistadas 11 mulheres com idade entre 18 e 23 anos, que responderam questões referentes ao exame Papanicolau realizado durante a pandemia e suas experiências. **Resultados:** Após a transcrição e análise das entrevistas, surgiram quatro categorias temáticas, a ser: motivos para realização do papanicolau; sobre a realização do papanicolau durante a pandemia; orientações sobre a covid-19 e sobre o exame papanicolau por parte da equipe durante a pandemia; e orientação sobre a importância da busca do resultado. **Conclusão:** As entrevistadas evidenciaram que as mulheres se sentiram inseguras em realizar o exame, bem como a dificuldade em acessar os serviços de saúde durante a pandemia. Além da necessidade do fortalecimento de ações de educação em saúde que visem a realização, orientação e importância do retorno para busca do resultado.

Descritores: Saúde da mulher; Pandemia; Exame papanicolau.

ABSTRACT

Objective: to assess the influence of the pandemic on preventive consultations in Women's Health, describing the perception of women in relation to the nursing care provided during the pandemic and evaluating the patient's return to search for the result. **Method:** qualitative and exploratory study that used Gil's principles. Between March and December 2020, 11 women aged between 18 and 23 years were interviewed, who answered questions regarding the Pap smear test performed during the pandemic and their experiences. **Results:** After the transcription and analysis of the interviews, four thematic categories appeared: reasons for performing the pap smear; on the performance of the pap smear during the pandemic; guidelines on covid-19 and the pap smear by the team during the pandemic; and guidance on the importance of the search for the result. **Conclusion:** The interviews showed that women felt insecure about taking the exam and had difficulty in accessing health services during the pandemic. In addition to the need to strengthen health education actions aimed at the achievement, guidance and importance of the return to search for the result.

Descriptors: Women's health; Pandemic; Pam smear.

RESUMEN

Objetivo: evaluar la influencia de la pandemia en las consultas preventivas en salud de la mujer, describiendo la percepción de las mujeres en relación a los cuidados de enfermería brindados durante la pandemia y evaluando el retorno de la paciente para buscar el resultado. **Método:** estudio cualitativo y exploratorio que utilizó los principios de Gil. Entre marzo y diciembre de 2020 se entrevistó a 11 mujeres de entre 18 y 23 años, quienes respondieron preguntas sobre la prueba de Papanicolaou realizada durante la pandemia y sus experiencias. **Resultados:** Tras la transcripción y análisis de las entrevistas, aparecieron cuatro categorías temáticas: motivos para realizar la prueba de Papanicolaou; sobre la realización de la prueba de Papanicolaou durante la pandemia; directrices sobre covid-19 y la prueba de Papanicolaou por parte del equipo durante la pandemia; y orientación sobre la importancia de la búsqueda del resultado. **Conclusión:** Las entrevistas mostraron que las mujeres se sentían inseguras sobre la realización del examen y tenían dificultades para acceder a los servicios de salud durante la pandemia. Además de la necesidad de fortalecer las acciones de educación en salud orientadas al logro, orientación e importancia del retorno para la búsqueda del resultado.

Descritores: Salud de la mujer; Pandemia; Prueba de Papanicolaou.

Introduction

In 2019, an unknown respiratory disease affected several people in Wuhan City, China. Shortly thereafter, already in 2020, COVID-19 was declared a pandemic, generating alarming numbers of deaths globally, mainly in risk groups.¹ The measures adopted to contain this disease were mainly based on collective and non-pharmacological interventions that helped reduce the number of cases. Among these measures are the isolation of infected people and their contacts and the blocking of all non-essential activities- lockdown.²

The pandemic has led to a significant change in the organization of health services. Many services were reorganized, discontinued and professionals were relocated to meet the demand of COVID-19.³ Among the discontinued and reduced routine services is the pap smear, which has as a function to detect if there are any changes in the cells present in the cervix.⁴

Cervical cancer is a neoplasm that affects thousands of Brazilian women and that if diagnosed early, the chances of cure reach 100%.⁵ It is extremely important to emphasize that usually this neoplasm does not generate visible symptoms in women, and it is of paramount importance to focus on prevention, treatment and rehabilitation.⁵

This test is extremely important because it is able to detect early the existence of cervical cancer and generate a prevention capable of reducing the number of deaths caused by cervical cancer.⁶ In addition, the chances of cure approach 100% when diagnosed early.⁵

In 2019, the total number of deaths from cervical cancer was 6,596 and with an adjusted mortality rate of 5.33/100,000 women.⁷ Preventive examination can be developed mainly in Primary Care, the entrance door of the Unified Health System, by nurses, aiming at the promotion, prevention and early screening of cervical cancer.⁸

The data presented above explain the importance of performing the exam. According to the Ministry of Health⁹, it is also up to the nursing professional to explain to the woman the importance of the examination¹⁰ from its correct performance to the return to search for the result of the same, creating an active search mechanism to ensure that all women have access to their preventive.

Cervical cancer is a disease that affects several women in Brazil and represents a public health problem. The pap smear is extremely necessary, since it allows early screening of this neoplasm, allowing a greater chance of recovery for the female population. This study is relevant because it will allow an analysis of the coverage of this test during the pandemic, analyzing from the first consultation to the return to search for the result in a UBS (Basic Health Unit) that is characterized by being the gateway to the unified health system and being a health service that aims at health promotion and prevention.

The study becomes relevant, since despite the low cost it is necessary to have a good support by the female population and that women know the importance of performing annually, or when necessary. And it is extremely important to understand whether the pandemic influenced an increase or reduction in the search for the examination and the result.

The results of this research are of great contribution to health professionals who want to understand the dynamics of the search for routine tests during the pandemic in the basic units. It is also useful for health managers to formulate

health policies or plan activities so that health units can reach a greater number of women and increase, if necessary, the coverage of the examination and delivery / analysis of the result even during the pandemic.

In view of the above, this article studied the following research problem: did the pandemic affect the performance and the return to search for the result of the pap smear test? How has the perception of women about the orientation performed by the nursing team be?

The aim of this article was to analyze the influence of the pandemic in preventive consultations of Women's Health in primary care, describing the perception of women regarding nursing care and guidance provided during the pandemic period and evaluating the patient's return to search for the result.

Methodology

The methodology for this study was qualitative approach and method using gil principles¹¹, using the exploratory research method.

Data collection was performed at the Basic Health Unit (UBS) 1 of Taguatinga, in the Federal District. The choice of this scenario was due to the fact that the Basic Health Unit is the main gateway of the population to health services and in the search for pap smears, providing health care in a territorialized way, with a multidisciplinary team composed of physicians, nurses, nursing technicians, community health agents and the Expanded Center for Family Health and Primary Care (NASF). The chosen location serves an estimated population of 36,000 inhabitants, which are assisted by seven Family Health teams.

For the purpose of proposing the study, a field research was carried out with human beings, and it is necessary to submit to the Research Ethics Committee of FEPECS-SES/DF (CEP/FEPECS), in the Federal District- DF, in accordance with resolution no. 466, of December 12, 2012/ CNS/MS, which approves the guidelines and regulatory standards of research involving human beings. The research was initiated only after approval issued in the opinion embodied in CEP No. 4,980,249. The data obtained by the research were used to perform the course completion work in the nursing course, transcribed in a reliable way, the participants had their identities preserved and kept confidential. The participants were informed still gives the possibility to give up the research at any time, without any burden or injury.

The participants of this study were women who underwent pap smear in a basic unit of Taguatinga-Federal District from March 2020 to December 2020 – an initial period delimited by the beginning of the pandemic.

To carry out this study, the subjects obtained contacts only after authorization from the CEP and when accepting the invitation, the Informed Consent Was accepted and signed, only then to have the research continued.

To participate in the research, it was necessary to meet the following inclusion criteria: women, over 18 years and under 64 years of age, underwent the Pap smear test from March 2020 to March 2021 in a basic health unit in Taguatinga- Distrito Federal, and enjoyed full mental health, i.e., women who had full cognitive conditions and abilities, lucid, time and space oriented, without history and/or diagnosis of mental health problems, they agreed to participate voluntarily and signed the Informed Consent.

Furthermore, factors such as race, color, belief, socioeconomic situation and or level of education were not used within the inclusion criteria. Exclusion factors included: not being a woman, being under 18 years of age and over 64 years of age, not having performed the Pap smear in a basic health unit in Taguatinga- Federal District, not signing the TCLE, not enjoying full mental health, women who do not have full conditions and cognitive abilities, lucid, oriented in time and space, with any history and/or diagnosis of mental health-related problems.

The interview was conducted through a questionnaire of four questions, after authorization of the CEP and signing of the Informed Consent, following a semi-structured questionnaire model, with basic questions defined, but open to broader answers by the participants. 11 interviews were conducted in person and all ensured the anonymity and confidentiality of the data provided for the research. The interview was conducted on a date and beginning chosen by the participants.

Results and Discussion

The results that will be presented here were obtained through 11 interviews with women who underwent the Pap smear at a basic health unit in Taguatinga- Federal District. The participants were given fictitious names of flowers to preserve anonymity, according to Table 1.

Table 1- Profile of study participants. 2021.

Identification	Age	Marital Status	Education	Occupation	N. of Children
Daisy	21	Single	Incomplete Superior	Student	0
Sunflower	18	Single	Incomplete Medium	Student	0
Violet	34	Single	Complete Superior	Nurse	2
Rose	28	Married	Full Medium	Housewife	2
Hibiscus	35	Married	Full Medium	Seamstress	3
Harpsichord	24	Married	Incomplete Medium	Unattended	2
Jasmin	27	Single	Complete Superior	Unattended	1
Camellia	19	Married	Incomplete Superior	Student	1
Dahlia	53	Single	Incomplete Medium	Housewife	3
Peony	36	Married	Full Medium	Nursing Technician	3
Tulip	47	Single	Incomplete Fundamental	Kitchen helper	2

Reasons for performing the Pap smear

In this category, the participants clearly reported the reason for having underwent the test, where most women reported taking the test only even for the prevention of diseases, not knowing how to describe what they are. It was observed that the reasons presented by them are: prerequisite for placement of the intrauterine device (IUD), influenced by third parties, not feeling well and to rule out an STIs. It is important to highlight that none of the participants mentioned the relevance of the test for the prevention of cervical cancer in this category.

Since I had lost my virginity I had never gone to a consultation with Gynecologist, i was taking contraceptives but on my mother's sake and when I decided to take the exam it was because I was not feeling very well with the contraceptive i used, whenever i returned from the necessary break that he had to have felt very sick and weak, then I also thought I was getting too fat and started to feel bad about my body, another reason I also looked for was to rule out the possibility of having some health problem and/or having some infection. (DAISY)

I had been in a relationship for some time and had lost my virginity with my partner and by indication and influence of my cousin I performed the exam even to rule out the possibility of having some sexually transmitted disease because I did not used to use condoms and since I had sexual intercourse wanted to start taking an ideal contraceptive for me. (SUNFLOWER)

I took it as a routine exam. To be able to keep up with my health, assess how things go with my body. (VIOLET)

I do it every year to make sure it's all. Last year I did even during the pandemic, this one i haven't done yet, it's very difficult to get a job. The day I was here to score, I only had ten spots available and I was the eleventh to arrive so I couldn't. (ROSE)

I always check up so I did it even just for prevention. (HIBISCUS)

It was to put the IUD. In the hospital after childbirth I was guided in relation to the placement of the IUD, so I got it I went after and had to take the exam for it. (HARPSICHORD)

I was going to put in the IUD and the doctor asked me to take the test to see how it was. Before the pandemic I was already performing by prevention, to make sure everything was okay. (JASMIN)

I went to take the exam because I had IUD, Read on the internet about, my mother said it would be good to seek a doctor since I put the IUD and the doctor said that the return was only necessary 10 years later. I performed the exam and everything worked out, this year I did it again and during the exam I discovered the pregnancy, the doctor said that the IUD left the place and ended up getting pregnant. (CAMELLIA)

Every year I take the exam and I was a little bleeding, so I looked for the unit. My daughter does nursing so she always tells me to take the exam. I went into the unit several times and tried to score until one day I got it. (Dahlia)

I really did it so I could take care of myself, to value primary detention. As I am from the health area, at the time of the pink October I ended up looking to perform the exam. My teacher of the technician, in the field of women's health also guided me a lot about having to take care of myself. (PEÔNIA)

I was feeling a lot of pain during intercourse, I always did the preventive, but I was a long time away, I was not feeling anything so I thought I didn't need to do it. Age was coming and I felt the need to seek the drive to prevent me and stop feeling the pains during sex. As it was closed during the pandemic, I came to do in the pink October campaign, when they reopened the vacancies. (TULIP)

The main cervical cancer screening tool recommended by the Ministry of Health is the Pap smear, and it is advisable to be performed in women aged 25 to 64 years, and can even be performed in pregnant women.⁶

Cervical cancer is ranked among the most affecting women and occurs mainly in countries that do not have a health service with efficient and organized screening.¹²

About performing the Pap smear during the pandemic

Most of the participants reported being unsafe to perform the test during the pandemic period, due to the risks of contamination within the hospital environment. Secondly, the delay in gaining access to the health service during the pandemic was cited, since the unit suspended its activities for a period focusing only on emergency cases and COVID-19. In addition, the use of personal protective equipment as something widely used as protection during this period was cited, as follows:

When I performed the exam it was quite complicated because as it was in the pandemic I felt insecure about going to the health center and being exposed to agglomerations. The delay you had to perform this exam was unbelievable, I could no longer wait. (SUNFLOWER)

I felt pretty safe since all the professionals were following the protocols, wearing a mask. I am a nurse and although I have not worked in the area for some time I understand about it so I ended up being very safe about it. (VIOLET)

Oh, it was kind of weird. I found it strange because of the service, which was no longer the same. It changed pretty much everything after the pandemic, anything that appeared was a symptom of COVID. The doctors almost did not attend, it was very difficult to get a job, I tried to mark the preventive several times and was not doing for a while. (ROSE)

I was afraid, the fear we always have when we go to the hospital. Only I was taking all the care, wearing a mask, with gel alcohol so I ended up getting more relaxed. (HIBISCUS)

It was quiet, I didn't feel insecure since I had spent a lot of time going to hospital because of the prenatal care I did during the pandemic. (HARPSICHORD)

I thought it was quiet. I had no difficulty at any point, always had vacancies to score. I've never felt insecure or anything. (JASMIN)

It was very difficult to score, almost had no agenda available. There are very few times so I had difficulty and felt very insecure and afraid to come because of the pandemic. (CAMELLIA)

We're always afraid to get contaminated, to catch the virus on something, put our hands somewhere and end up taking COVID but we didn't have much to do, you have to take a chance and go. (DAHLIA)

During the pandemic everything was a little complicated, taking too long. As I'm friends with a person who works here, as soon as he showed up vacant I was able to schedule, but until opening took a while. (PEÔNIA)

I was very insecure, Had not vaccinated yet at the time so I even thought about not taking the test so I would not be at risk of getting COVID. It's just that the pain bothered me too much so I took all the care and came. Here everyone was taking care of themselves too, wearing mask, alcohol, seeing the temperature at the entrance and it made me more relaxed. (TULIP)

Pandemic is defined as a "epidemic disease of wide dissemination"¹³. Coronavirus is characterized as a pandemic that has affected several countries and affected a huge number of people, determining new habits for society.¹⁴

In the Brazilian context, until October 20, 2021, cervical cancer is the third most common type of cancer among women. In 2021, more than 16,000 new cases were estimated. Such data are relevant for the formulation of actions in the areas of health.¹⁵

It is necessary to emphasize the importance of stimulating health services for women, belonging to the vulnerable group in the pandemic, since the isolation process generates a negative impact with regard to care in women's health areas such as reproductive health, sexual health and during the stages of pregnancy. Therefore, actions that fall within this context should be reinforced and not interrupted, avoiding the isolation of this portion of the population of health units during this period.¹⁶

Primary Health Care (PHC) is one of the main axes of the Unified Health System, being the first level of care and with emphasis on health promotion and protection, preventing injuries, acting in the diagnosis, treatment, promotion and prevention of health. For this fact, it is necessary the use of participatory, democratic actions, acting in collective and with the territorial basis. And within these actions, it is up to the prevention of cervical cancer using as tools: health education, vaccination of the indicated age group and early detection performed through the Pap smear.⁶

Many studies conducted during the pandemic indicate that mental health care should be prioritized as much as health care. COVID-19 caused a feeling of insecurity in the population that goes beyond the fear of becoming contaminated with the disease. This insecurity can affect several areas of life of the person, both in personal and collective, altering interpersonal relationships known until then.¹⁷

During the COVID-19 pandemic, access to women's support services was reduced, including the social assistance, health, public security and justice sectors. Thus, there was a reduction in the supply of services as well as in demand, since women did not seek the service due to the fear/insecurity of contagion.¹⁸

Guidelines on The Covid-19 and the Pap smear by the team during the pandemic

In this category, most participants reported that the orientation received by the team and whether or not the pandemic was cited for them. Most women did not receive guidance on COVID-19 and on the test. Many report that the pandemic subject was not addressed or information on the use of EPI's needed. Some received only the information that was necessary to perform the test, such as not being in the menstrual period, without using vaginal creams. And only two report the approach to the diseases that the test can track.

I received only the guidance of how the test would be taken and how long on average the result would come out. The pandemic was not mentioned and I did not receive any guidance regarding prevention, wearing a mask or anything like that. (MARGUERITE)

When I decided to take the exam the post nurse at the consultation told me that I had first to do a pregnancy test which is the HCG Beta to rule out the possibility of me being pregnant. I also received guidance on how that exam was done and also the guidance of being in a mask all the time on behalf of COVID. It wasn't until I performed the HCG Beta that I was able to do the preventative. (SUNFLOWER)

I didn't get any guidance. The pandemic has not been mentioned and I will be honest with you have not quoted anything even about prevention. I follow the arrangements of the protocols I know of my training. (VIOLET)

I have not received guidance on the exam, who talks to me more about it is my mother or I myself research the internet to know about. (ROSE)

I didn't get any guidance, I basically know it's to prevent, to know if you have any sexually transmitted diseases. I know you have to take care of yourself, but it's important to know what test you're taking on me, what it's for. Of the pandemic they didn't say anything, just the care at the entrance to the gas station, temperature, mask. (HIBISCUS)

They just handed me a piece of paper to read and follow what was written there so I could perform the exam, I couldn't be menstruating, avoid having sex. About the pandemic did not comment anything no. (HARPSICHORD)

The doctor said what the test is for, he talked about the diseases and that I needed to do this test to put the IUD. They talked a lot about it with me, about sexually transmitted diseases, which I should always repeat, but they didn't say anything about the pandemic. (JASMIN)

I didn't get any guidance from the team. They didn't say anything about the pandemic, or about any disease, or what the test was for. I know about the exam because I researched and informed myself. (CAMELLIA)

The nurse told me right over the top, I think even by my age right. The people here think we know everything, I've lived a long time. She talked about the discomfort, what she needed to do, not to use cream, not to be menstruating, but what the exam will look at was not talked

about at any time, I do not even know what it is for exactly (laughs).(DAHLIA)

No, as I already know and I'm from the area didn't say anything about. The pandemic was mentioned yes, i was told that the delay in getting a vacancy was that the unit had been closed for care for a while. Recommendations on the pandemic, care and such, were not mentioned. (PEÔNIA)

Yes, I got it, the doctor talked to me about HPV, cervical cancer, discharge. Like I told her about the pain, she had a conversation about all this with me. At no time did they say anything about the pandemic. (TULIP)

The collection of the exam should occur in a period of approximately 25 minutes and during the established time it is important to perform the reception of the woman in this period. Before the examination are made recommendations such as: avoid sexual intercourse 48 hours (if reported, collection should occur so as not to miss the opportunity), do not use showers, vaginal creams, spermicides 48 hours before, avoid collection if the woman is menstruating, exclude patients undergoing total hysterectomy. In addition, the collection should follow all the steps recommended by the Ministry of Health in order to ensure quality in the collected sample, always looking to identify the blade, correctly distribute the material collected on the blade, perform the fixation of the material and the correct identification of the tube that will store the smear.¹⁶

The Covid-19 pandemic brought with it impacts that go beyond clinical and epidemiological issues, being responsible for affecting the social, economic, cultural and political spheres on a global scale. This impact affects the population and certain vulnerable groups, generating problems due to isolation time, financial conditions and affecting even the mental health of several people.¹⁹

Guidance on the importance of the search for the result

Regarding the guidelines for searching for the test result, most participants reported that they were not oriented as to the importance of the return to search for results. They also report the delay in the release of the exam that is often only delivered, without evaluation of a professional after ready.

At all times the Doctor told me that it was important to return for him to explain what he had accused in the exam. (DAISY)

No. I went after knowing the result because I had a few months already had done and nothing to get the result for me. So much so that when I took my preventive in the test gave positive result for Supracytoplasmic Bacilli and suggestive for an infection and at no time explained to me about what would be this infection, I only knew because I researched what it would be, so I had to pay a private consultation because the health center had difficulty to schedule appointments in general and I did not want to be waiting and I was afraid to aggravate in infection that was detected. (SUNFLOWER)

The nurse in my room said that it was important to return to know how my health was and the importance of doing this every year because there can always be some change during the exam, from one exam to the other. (VIOLET)

No, the result took almost a year to get out. I got the result almost at the end of the year, they say it's 90 days but it takes longer. And when I got the result they just delivered it, but they didn't tell you what it had given, if anything was altered. They just turned me in and I went home, and I didn't even go back to the doctor to look. (ROSE)

Yes. The technique in my office explained to me, said it's important to prevent some diseases, but you didn't tell me which ones or anything. I managed to get the result right, without any changes but it took a long time to get ready. (HIBISCUS)

I did not receive any guidance, I returned to pick up on the date they told me and I have to go every three months parra evaluate the IUD. The result didn't take long, they handed me over and I left. (HARPSICHORD)

yes, they talked about the comeback. It took a while to get out, but they said it was all right and asked to always do it because sometimes, from one month to the next can give some change and that I always have to know how everything is. (JASMIN)

No, i was just told that you had to go back 30 to 40 days to get the results, and bring it to the doctor to look. Usually they explain about what you gave on the exam, the results. The last one I did took about 4 months to get out, as it was in the pandemic they did not attend anything, only emergency. So it was harder. (DAHLIA)

They didn't say anything. Can you believe I haven't received any results yet? No explanation about. (PEÔNIA)

They didn't say no, I didn't even get the results, but it must be on somewhere in the system. The day I did, they said I had myoma, they referred me to the polyclinic to do the follow-up. (TULIP)

When performing the examination in the basic health unit, the material should be sent to perform the analysis and release of the result. The return of these reports must be accompanied and delivered to the woman in a return consultation so that she receives professional guidance appropriate to its result.

The Comprehensive Women's Health Care Program (PAISM) exposes the importance between the dialogue between women and health professionals, and this return is relevant to enable the provision of self-knowledge and autonomy of the body itself and health.²⁰

It is necessary to emphasize that the return to search for the result is of paramount importance for women to act in the prevention of diseases, knowing how their health is and can perform any treatment when any alteration in the examination is detected. The preventive examination can be developed mainly in Primary Care, the gateway of the Unified Health System, by the nurse, aiming at the promotion, prevention and early screening of cervical cancer.²¹

Final Considerations

This study met the objectives proposed for the research and leaves a message to health professionals who develop assistance in the UBSs. The female population is still lacking in information about the exam. Not only encourage women to attend the collection of material, but have the same commitment in relation to the guidelines for return when the results arrive.

Another aggravating fact elucidated in the research is that although many women cite prevention as the main reason for performing, few were aware that the test tracked cervical cancer and other diseases, showing that at some point in care, these women do not receive the necessary information, or if they receive, information is unclear and has not been checked by the issuer.

Another aggravating factor is that during the pandemic, health services reduced the performance of tests and prevention projects including the pap smear. With this, many women found it difficult to access the service, citing difficulties ranging from the difficulty in scheduling an appointment with the gynecologist to insecurity with a possible contamination with COVID-19.

The findings highlight the need to strengthen health education, where it is important to regularly train professionals, not only in relation to collection techniques, but in communication and active listening. It is also necessary that public health policies have effective actions in each sphere of government in relation to knowledge and the indication of the examination by women.

The collected data also indicate that during the pandemic there was a difficulty in accessing health services, which may mean a pent-up demand in relation to the number of tests to be performed still. In relation to the number of women who were not taking the test during this period it was not possible to analyze this data. Therefore, it is suggested the possibility of a new study that numerically evaluates the tests performed during the pandemic period when compared to previous years.

The nursing professional should be able to act, know and intervene in the face of problems, acting in health prevention and promotion, being able to actively act in health, as in the case of COVID-19. It is the role of nurses to assist in the early diagnosis of cervical cancer, provide necessary information for women about the examination, guiding on its purpose and addressing external situations, use of personal protective equipment, prevention methods. Enabling that even in cases of pandemic, access to health services is not impaired and there is always continuity in the provision of care.

Acknowledgement

This research was funded by the authors themselves.

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