

Trabalhos Científicos

Título: Assessment Of Clinical Pediatrician Perception Of Short Stature In Childhood And Challenges To Treat With Growth Hormone In Brazil: A Exploratory Evaluation Of A Developing Country Daily Practice.

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Resumo: Concerns about a child's growth are one of the most common topics parents express during pediatric visits and are a leading cause for referral to a pediatric endocrinologist. For the general pediatric, when short stature is diagnosed, its clinical management remains a challenge. The aim of the study was to approach and understand the perception from the general pediatrician about short stature, when is the optimal time to refer to pediatric endocrinologist and what are the challenges of the GH therapy in a developing country. The study was Observational, cross-sectional, self-completed electronic survey, preceded by an exploratory stage. The questionnaire comprised 27 questions based on evaluation scales and was applied to active general pediatricians in private practice. Exclusion criteria were proportion of private appointments <20% and proportion of patients with low purchasing power (considering that in Brazil, the access to somatropin is not universal). A total of 120 pediatricians were included. Short stature represented 12% of all appointments in a 30-day period (203 patients). Among this, families were concerned about child growth in 85% of the cases. In 31% of patients, the concerns about height arose from comparing the child with peers. Finally, in 35% of patients, the child himself raised concerns about his height. 84% of pediatricians wait for about 6 months to one year to refer a child to a specialist if height and weight do not suggest severe GH deficiency. Changes in eating habits and physical activities prior referral are usually recommended. Pediatricians believe that in 62% of cases, decreased adherence to somatropin therapy are related to cost and in 17% to fear of injections and adverse events. Patient and primary care physicians lack awareness about GH deficiency and frequent changes in physicians reflect on delayed treatment. 83% of patients and 71% of physicians, respectively believe that awareness campaigns and access to guidelines and GH treatment are relevant. In addition, 53% did not see relevance of early treatment with somatropin. The most frequently reported challenges were access to specialists, cost of therapy, and family acceptance regarding GH treatment. To our knowledge, this is the first observational qualitative survey performed in Brazil to gather perceptions about GH deficiency in primary care practice. From the pediatric point of view, referral to a specialist appears to be a challenge. The need of continued medical education regarding eligibility of GH therapy should be addressed promptly.