CHARACTERIZATION OF THE SERVICE TO THE VICTIMS OF TRANSIT ACCIDENTS IN A PUBLIC EMERGENCY SERVICE

ABSTRACT

Objective: to characterize the victims of traffic accidents in an emergency public service, focusing on motorcycle accidents. Method: descriptive, cross-sectional, quantitative approach, with documentary analysis of secondary data, developed at a University Hospital (UH). Results: the majority of the victims were male (76.4%). With respect to age, individuals older than 20 years (50%) were predominant, followed by those with zero to 15 (30.3%). Of all the cases, 1.9% of the victims died. Conclusion: in view of the scope of the PEBA Network, the results will serve as a subsidy in the implementation of the Interstate Health Care Network of the Middle São Francisco Valley, it is also possible to implement specific educational actions to promote and prevent traffic accidents. These should focus, primarily, on the most affected profile, with a view to raising awareness of them in order to reduce the phenomenon. Descriptors: Accident-Transit; Emergency Relief; Emergency.

RESUMO

Objetivo: caracterizar as vítimas de acidentes de trânsito em um serviço público de emergência, enfocando os acidentes que envolvem motocicleta. Método: estudo descritivo, transversal, de abordagem quantitativa, com análise documental de dados secundários, desenvolvido em um Hospital Universitário (HU). Resultados: a maior parte das vítimas foi do sexo masculino (76.4%). Com relação à idade, predominaram, neste estudo, indivíduos com idade superior a 20 anos (50%), seguidos pelos que tinham de zero a 15 (30.3%). Entre todos os casos, 1,9% das vítimas foram a óbito. Conclusão: Tendo em vista a abrangência da Rede PEBA, os resultados servirão de subsídio na implementação da Rede Interestadual de Atenção à Saúde do Vale do Médio São Francisco, podendo ainda ser implantadas ações educativas específicas de promoção e prevenção de acidentes no trânsito. Estas devem focar, prioritariamente, o perfil mais atingido, na perspectiva de conscientizá-lo para a redução do fenômeno. Descriptors: Acidentes de Trânsito; Socorro de Urgência; Emergência.
INTRODUCTION

A major concern in Brazil and in the world is related to the repercussion that external causes have had on the organization of health systems. The frequent crisis through which the Brazilian health system passed, led to the opening of large emergency hospitals, in an attempt to respond, more quickly, to the population that congregated in queues at the doors of health facilities. These crises are a reflection of the history of the construction of the Brazilian health care network that had in the hospital, especially small and medium size, the reference for hospital care.¹

Worldwide, around 1.2 million people die each year from traffic accidents. In addition, between 20 and 50 million suffer nonfatal damages. In recent years the recommendations of the World Report prepared by the World Health Organization have been approved in a number of countries to guide improvements in road safety, in order to reduce the number of deaths and injuries caused by traffic accidents. Among the fatal victims, are pedestrians, motorcyclists and cyclists.²

In Brazil, the severity with which traffic accidents, environmental tragedies and episodes involving interpersonal violence is occurring is considerable and increasing. With this, several people lose their lives early. This situation demands, more and more, the evolution of emergency hospital services, in order to provide a good support in the care of these people, increasing their chances of survival. In this sense, it is emphasized that accidents and violence constitute public health problems of great magnitude and transcendence, with a strong impact on the morbidity and mortality of the Brazilian population.¹

In Brazil, the National Emergency Care Policy was created, in 2011, through the ordinance 1,863, which determines that health services provide assistance with equity, integrality and universality, together with the creation of Decree 7.508, that deals with the Health Regions, which should be constituted of neighboring municipalities, with the purpose of integrating the organization, planning and execution of actions and health services.

Based on the criterion of regionalization of the UHS, the Interstate Health Care Network of the Middle São Francisco Valley was developed and established, unifying the interstate macro-region composed of neighboring cities of the states of Pernambuco and Bahia. This interstate macro-region called the PEBA network, is subdivided into two major macro-regions of health - Petrolina and Juazeiro, comprising 55 municipalities, with about 1.8 million inhabitants. The macro-region of health of Juazeiro / BA is subdivided into micro-regions: Juazeiro, Paulo Afonso and Senhor do Bonfim, with approximately 1,060,422 inhabitants, distributed in 27 municipalities. The Petrolina / PE health macro-region is also subdivided into micro-regions: Petrolina, Salgueiro and Ouricuri, with approximately 898,263 inhabitants distributed in 28 municipalities (Interstate Health Network of the Middle of São Francisco).³

Considering that the municipalities of Petrolina / PE and Juazeiro / BA have the peculiarities that deal with Decree 7.508 concerning the creation of Health Regions and having the need to comply with the principles of regionalization and hierarchy recommended by the Unified Health System (UHS), the Interstate Network, also known as the PEBA Network, was also agreed between the governments of the respective states, which, including the Emergency Care Policy, was based on the University Hospital (UH) of UNIVASF in Petrolina for the services of urgent care for orthopedics, neurology, vascular, among other services.³

In this perspective, UH-UNIVASF serves around three thousand people per month and, despite the large volume of care, there is still no official record that reports the magnitude of traffic accidents in the population, the degree of injuries and deaths recorded in the hospital resulting from post-trauma complications. The problems experienced are of several orders and there is no established protocol for the attendances, nor system of organization of computerized medical records.

The nature of medical and hospital care for victims of traffic accidents can be understood in two ways: the first, of an outpatient type, refers to prompt care in small procedures (sutures, minor surgeries, etc.) and consultations; the second, hospitalization type, is usually intended for care due to more serious injury problems (Medical-hospital research, 2011).

In 2011, a study was carried out in this unit of care regarding the most frequent etiology of TBI and, as a result, the most recurrent ones were due to motorcycle accidents, being the male the most affected.⁴ DNIT data indicate that Pernambuco presented 1,518 cases Involving motorcycle, in a total of 5,886 records of traffic accidents.⁵

With all this dynamic pertaining to traffic accidents and to health, a deeper knowledge...
of the victims becomes necessary, because, by characterizing the victims of traffic accidents treated in the emergency of HU-UNIVASF, several correlations can be established with the type of trauma and with the acquired disabilities. It is also intended to collaborate in the planning and execution of Nursing actions in emergencies that aim to prepare professionals for quality care assistance, according to the characterization of the victims referenced to UH-UNIVASF, and within the context of Humanization.

It is noticeable the scientific relevance for demanding an analysis on the traffic accidents, as well as their victims; also becomes of social importance for allowing, although indirectly, the prevention of these accidents by the users as well as allowing the professionals a greater technical-scientific preparation when identifying the possible demand that is usually taken care of in this emergency service. With this, this study aimed to characterize the victims of traffic accidents in an emergency public service, focusing on motorcycle accidents.

**METHOD**

A retrospective, exploratory-descriptive study, with a quantitative approach, based on data obtained from the HU-UNIVASF Traffic Accident Registry Book.

The research was developed in the University Hospital (UH) of the municipality of Petrolina - PE. It is characterized as a large public institution that is under UNIVASF's administration, initially designed to cover 27 municipalities and, with the regionalization process, started to provide highly complex assistance to 55 cities in the States of Pernambuco and Bahia.

The data used in this study were obtained through secondary data sources, using records of occurrence to patients who were victims of traffic accidents that entered the emergency room (red room) of the University Hospital, from January to December of the year 2013. The data used in this research were related to the duly completed forms, including, all accidents that involved cars or motorcycles, amounting to a total of 1,321 recorded in the care book. The cases where the data were incomplete were excluded from the study. At the end, the total sample was of 1,318 records of patients victims of accidents.

In order to carry out this research, all norms and guidelines for research involving human beings established by resolution 466/12 of the National Health Council - Ministry of Health were complied with.

Data collection began after approval of the mediator institution, expressed by the signing of the Letter of Consent, and the Ethics Committee on Human and Animal Studies (CEEAH) of UNIVASF, by protocol of approval No. 0009/200813.

**RESULTS**

Related to the days of the week in which the accident occurred, showing that the age group from zero to 20 years had a greater number of occurrences, being more frequent during the week, of Monday to Thursday, thus reducing to the weekends. However, the age group between 41 and 60 years showed a decrease in relation to the previous ones, but, with the same statistical behavior referring to the days of the week of greatest occurrence. The increase in admissions at the beginning of the week may be due to several reasons, including excessive alcohol consumption and high speeds used by drivers. It is also observed that, on all days of the week, there is a predominance of patients in the age group of zero to 20 years, followed by the range of 21 to 40 years.

For the age group above 60 years, the lowest number of occurrences of the subcategories was recorded, resembling only on weekends, which, in a directly proportional way, also presented lower attendance at the weekends. It was noticed that there was no direct relation between the age of the victims of motorcycle accidents and the days of the week, however, there was a directly proportional reason when comparing the number of occurrences and the age groups.
Table 1. Distribution of the victims of traffic accidents according to the age group and the day of the week in which the emergence in an emergency service entered. Petrolina (PE), Brazil, 2013.

<table>
<thead>
<tr>
<th>Days of the week</th>
<th>0 - 20</th>
<th>21 - 40</th>
<th>41 - 60</th>
<th>&gt;60 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>146</td>
<td>116</td>
<td>29</td>
<td>9</td>
</tr>
<tr>
<td>Tuesday</td>
<td>142</td>
<td>89</td>
<td>30</td>
<td>8</td>
</tr>
<tr>
<td>Wednesday</td>
<td>103</td>
<td>63</td>
<td>17</td>
<td>5</td>
</tr>
<tr>
<td>Thursday</td>
<td>104</td>
<td>78</td>
<td>24</td>
<td>9</td>
</tr>
<tr>
<td>Friday</td>
<td>74</td>
<td>55</td>
<td>28</td>
<td>4</td>
</tr>
<tr>
<td>Saturday</td>
<td>38</td>
<td>27</td>
<td>11</td>
<td>3</td>
</tr>
<tr>
<td>Sunday</td>
<td>34</td>
<td>42</td>
<td>6</td>
<td>3</td>
</tr>
</tbody>
</table>

The data presented point to the need to develop traffic education activities for the young group, since this is the one that most presents admissions in UH - UNIVASF on every day of the week. Such actions should be directed at encouraging responsible and safe traffic attitudes, since traffic accidents have a high morbidity and mortality rate in the country.

Figure 1. Distribution of attendance by age in an emergency service. Petrolina (PE), Brazil, 2013.

The results presented in figure 1, showed that there was a greater number of victims of traffic accidents in individuals aged between ten and 35 years, evidencing a percentage of 78.2% of the cases. According to the figures, it is observed that, among the highest indexes, young people aged between ten and 20 years stand out, representing a percentage of 48% of the victims of accidents attended at the unit.

Taking into account the days of the week with the greatest demand in the care of victims of traffic accidents in the year of 2013 by UH - UNIVASF, 303 patient records were recorded on Monday, representing the highest number of cases, followed by Tuesday, with 269 facts and, lastly, Thursday, with 223 cases. The remaining days followed a decreasing sequence from Wednesday, Friday, Sunday and Saturday.

This study evidenced an unusual phenomenon, according to other researches, regarding the days of the week with greater number of attendance. It was observed, therefore, a larger number of appointments on the second, third and fifth sessions, corresponding to 795 records (60.18%), and a lower percentage on Saturday and Sunday, corresponding to only 177 cases, or 13.39% of the events, excluding there are nine records due to data scarcity. Noting that most of the research, involving this variable, affirms a greater demand for service on weekends. It is also pointed out that this study refers to a sample of a specific public - patients victims of traffic accidents and not all demands for trauma attended by the hospital (study site).

Based on the characterization of the patients hospitalized in the UH-UNIVASF, it was possible to analyze, in the population of this study the level of risks related to morbidity and mortality and possible severity of the injuries of patients victims of traffic accidents, taking into account the sectors (destinations) with higher demand Of hospitalization.

Regarding the fate of the female patients, of the 308 registries, 51% of the patients were...
discharged from hospital, 21.1% remained hospitalized, 5.2% remained in observation, following other destinations such as: Orthopedic Clinic, Red Room, Blue Room, Green Room, deaths, ICU, Surgical Block and Outpatient Unit. For the other categories such as Suture, Evacuation, Surgical Clinic and Surgery discharge there was no destination of patients. According to the Ministry of Health, the Reception and Classification of risk occurs as follows:

Red Area - an area properly equipped and destined to the reception, evaluation and stabilization of emergencies and clinical and traumatic emergencies,

Yellow Area - area for the care of critical and semi critical patients already with stabilization therapy started;

Green Area - an area for non-critical patients on observation or hospitalized waiting for vacancies in the hospitalization units or removals to other hospitals in the background. Ready Care;

Blue Area - area designed to attend low and medium complexity queries. (BRASIL, 2004).

Regarding the fate of the male patients, 989 cases were recorded. Of these, 55.1% were discharged, 25.9% remained hospitalized and 4.4% remained under observation, following from other destinations such as: Red Room, Orthopedic Clinic, Blue Room, Green Room, Suture, Deaths, Surgical Block, evasion before signature of Term of Responsibility, ICU, Medical Clinic, Surgery / discharge or Outpatient unit.

Due to the non-identification of the origin of the accident, the data was extracted from those files where all the information was present, noting that 637 events were not identifiable, for this variable, due to the lack of presentation of this data, which made a more accurate evaluation of the Analysis, but, as a form of estimation, the data that found the origin of the accident were exposed. Thus, approximately 466 (73.2%) of the cases were registered in the municipality of Petrolina, followed by municipalities with a lower frequency of occurrence records in absolute numbers and percentages, such as: Juazeiro-BA, 41 (5.4%); Casa Nova - BA, 12 (1.9%); Willow-PE Ararí-PE Pylon, eight (1.3%); Lagoa Grande-PE / Dornentes-PE / Curaçá-BA, seven episodes each (1.1%); Araripina-PE, six (0.9%). For the other municipalities, a total of 75 cases were obtained.

It should also be noted that, in relation to the implementation of educational measures in traffic, it is necessary to investigate the true origin of accident victims, since, sometimes, patients may, for fear of not being attended, refuse to come from other localities, claiming to be of operating city of the Hospital Unit, Petrolina.

The patients served come basically from the municipalities that make up the Macroregion that is part of the PEBBA network (Pernambuco and Bahia). The Interstate Health Care Network of the São Francisco Valley - Pernambuco-Bahia (PEBA) was implemented in 2009, the 1st Interstate Region of the country, where the managing board is denominated Regional Interstate
Traffic accidents in Brazil, particularly in a city in the Northeast, are related to the young male population and, most of the causes are related to the abuse of alcohol and other illicit drugs, which corroborates the data found in the HU - UNIVASF.

Alcohol can be considered a public health problem, but, due to its acceptance and the low market cost, it becomes more accessible than other chemical substances, mainly, because it is lawful. With this, there is the increase in consumption and the high stimulus of consumption mediated by the industry, making increasingly difficult coping strategies.

Driving after abusive consumption of alcohol is commonly found in younger individuals and among those with higher schooling. More than 50% of deaths due to traffic accidents occur in people aged between 15 and 44 years. Situations related to the lack of experience of this group, excessive speed, use of alcohol and illicit substances and constant violations of the Brazilian Traffic Code are related to the main causes of this aggravation.

Traffic accidents in Brazil, especially with young victims, have serious personal and social consequences, not only raising mortality but also developing significant physical and psychological sequelae that survivors have suffered from the trauma event. In addition, a great burden on the public financial wealth arises through these social demands, where amounts, that could be directed to improve the quality of life of the population, are redirected to assistance to the victims, usually due to lack of security conditions in the different fields of work.

Another relationship associated with motorcycle accidents is marital status, since singles feel more “free” to adhere more to motorcycles, so, they are more exposed to the risk of serious or fatal accidents when compared to married ones.

In Brazil, mortality and sequelae caused by traffic accidents are at high and recurrent levels, confirming an urgent need for intersectoral and multidisciplinary strategies that help in the control and reduction of these indices. An important aspect to consider is the costs associated with people involved in accidents, among which may be highlighted:

- Cost of pre-hospital care: care of the victim by units equipped with special equipment, vehicles and specialized professionals (ambulances, firemen, doctors, etc.);

- Cost of hospital care: sum of the costs of hospital medical care of the non-hospitalized patient and the patient admitted to the Intensive Care Unit and / or Nursing Unit;

- Post-hospital cost: sum of rehabilitation costs, for cases of temporary or permanent sequelae, with procedures, medicines, transportation, equipment and others;

- Cost of loss of production: cost corresponding to the economic losses of the victims of an accident that, due to the interruption of their productive activities, stop generating income and production to the economic system;

- Cost of removal / transfer: cost of removal of the fatal victim to the Medical Legal Institute (MLI);

- Social security cost: sum of costs incurred - accidents involving motorcycles are another risk factor that has worsened in Petrolina. The facilities for acquisition and the sensation of independence of locomotion, together with other aspects, such as poor, time-consuming and always crowded collective transportation, have increased the number of motorcycles circulating in the Londrina transit and, due to their characteristics, are more vulnerable.

- Other “Non-Valued” Costs (DENATRAN, 2006)
The problem of traffic accidents enters the public health agenda with morbidity and mortality from external causes. It consists of the International Classification of Diseases and Related Health Problems, ICD 10. In the field of collective health, these diseases are seen as violence that brings serious negative impacts. It is possible to expand their analysis by studying the social determinants that make groups more vulnerable.  

 [...] The concept of social determinants can be understood as historical processes that generate problems in collective health and not as causative factors. Especially critical epidemiology admits, corroborating many scholars, that traffic accidents, like several other health problems, can not be understood as distanced from the historical, political and social reality in which one lives. For they reflect, daily and continuously, the existing conflicts in the society in which it is inserted - competition, class difference, consumerism, lack of solidarity, lack of social awareness, and lack of community. Therefore, it involves several multidimensional constraints considered risk situations, whose relations escape the hegemonic multicausal model of the cause-effect type. (ANTP, 2013).

The victims from zero to 15 years of age are the second group most affected by external causes (traffic accidents), thus showing that, since childhood, they become important educational activities by parents, school and government institutions. Actions that guide future adults about the importance of these diseases and their consequences and also that encourage safe attitudes among citizens and their responsible attitude in society. Children see adults as examples and these reinforce situations that are inappropriate for the formation of a collective. 

With regard to traffic accidents involving the elderly, "in Brazil, in 2007, the Mortality Information System of the Ministry of Health recorded 18,946 deaths of people over 60 years of age due to external causes, of which 5,084 were due to accidents Transportation. 

The data verified in the UH - UNIVASF differ from the study done by Soares and collaborators in 2013 on the characterization of the victims of traffic accidents attended by the Mobile Emergency Service (SAMU) in the Municipality of João Pessoa in (2010), which shows that 52% of the visits took place during the weekend, between Friday, Saturday and Sunday, which corresponded to a total of 2,387 cases. It is worth mentioning that, according to the author, Sunday was the day when the relative risk was higher, equivalent to almost double the number of accidents compared to Wednesday, as the reference. 

In the city of Sousa, Paraíba, a study on the victims rescued by the Mobile Emergency Care Service (SAMU) concluded that the greatest demand is for patients at the weekend (Saturday and Sunday), corresponding to 47.9% of the total Cases.

Epidemiological studies indicate that these damages from external causes occur, more frequently, in the age groups between 15 and 44 years of age. Such facts may be related to the increased risk behavior to which men are exposed. Based on the analysis of the factors that interfere in care, we consider the fact that HU-UNIVASF does not have a structure for specialized care for children and adolescents, which sometimes, hinders, the care of the patient.

Regarding the characterization of the accidents, using SAMU's Medical Regulation Files from the city of João Pessoa - PB, as a database, showed that the age difference between victims involved in traffic accidents can also refer to regional factors. The highest frequencies of accidents are found in the age groups between 20 and 29 years (38%) and between 30 and 39 years (22%). The mean age of the victims was 30.6 years (standard deviation: 13.5). The lowest frequency occurred among children aged zero to nine years (3%) and the elderly over 60 years. The variable was not reported in (2.0%) cases.

External causes are the third most frequent cause of death for Brazilians, and this position may change to the first, if the age group observed refers to persons aged 1 to 39 years. Given this, the Ministry of Health has an important and comprehensive role in working with the victims, since it must participate emphatically in the dimension of assistance and rehabilitation of victims and also promote "prevention and epidemiological surveillance.”

It should be noted that, in addition to the increase in mortality because of traffic accidents, the morbidity of trauma patients, including, post-trauma quality of life, should be considered. Taking into account that these end up leaving the labor market indefinitely, since these people are included in an economically active age group, generating high costs to the public coffers. Therefore, the severity of the problem is complicated by the behavioral sequelae of even relatively small cranial lesions. The low age of the victims increases personal and social losses related to the injury.
Saturday (weekend) was the day that most accidents occurred, (17.3%) of the total, followed by Friday (15.9%) and Sunday (14.5%), while on Tuesday And Wednesdays are the days when there are fewer traffic accidents, (12.7% and 12.9%, respectively). 12

From the comparison of the results, regarding gender, consistent data were observed and reaffirmed in other studies. From the total sample, 1,297 (records), this study showed that there was a predominance of victims of a traffic accident of the male sex, making a total of 989 cases, whereas in the female sex, there were only 308 cases. Comparatively, the cases of both sexes that were more prominent were those who were discharged or remained hospitalized for continued treatment, representing 55% and 25%, respectively for the male sex, while the female sex was 61% and 21%. 21

According to the author, the numbers between men and women, has to do with the type of accident, when you observe the proportion between the occurrences, where cyclists represent 9.8 men killed by each woman. Then, motorcyclists with 8, 1: 1, and, finally, occupants of heavy vehicles such as mass carriers, with 6.8: 1, this fact corroborates with other findings, where deaths resulting from this type of event have men as the main victims, with 81.2 % of cases. 11

In line with the results of this study, with regard to age and sex, a survey conducted in Curitiba in 2010 concluded that the age group most affected in traffic accidents were young people who constituted the majority of deaths occurring between zero and 39 years old (45%) and from 40 to 59 years (26%). Of these deaths, 85% are male. 21

The mortality rate was still higher than the world average (19.0 per 100 thousand), the average of all low- to middle-income countries together (20.2 per 100 thousand) and far above high-income countries (12.6 per cent). 100 thousand). This rate had a peak in 1996 and 1997 (28.1 per 100 thousand), declining in 1998 and remained at around 23 per 100 thousand inhabitants per year, while rates in the Northeast remained stable, in about 30 deaths per 100 thousand. 11

A quantitative study was carried out in the State of Pernambuco, covering the interval between 2001 and 2010, it showed a high rate of fatalities due to accidents with cyclists / bicycles, making a total of 517 deaths. Of these, 93% of males. In Bahia, Brazil, between 1996 and 2007, this report describes the temporal evolution of mortality due to traffic accidents occurring in the State, based on data from the Mortality Information System. In the analyzed period, the regions studied accounted for 60% of the deaths. Of these, over male mortality and the highest percentage of deaths were identified in young individuals. 22 13

These episodes end up having consequences that are often more harmful to young people, since, besides the injuries, they end up developing physical and psychological sequel, which also end up bringing high personal and social costs. 11

♦ Characterization of victims of motorcycle accidents

It was possible to perceive, with the study, that the majority of the accidents happened of motorcycle victims. Males presented high rates among victims of traffic accidents, which corresponds to 76.3% of the total in the year of 2013. Regarding age, there was a high demand (50%) of patients over the age of 20, followed by patients from zero to 15 years (30.3%). These data point to the need to initiate educational activities with the aim of early prevention of this type of trauma (Table 2).

<table>
<thead>
<tr>
<th>Sex</th>
<th>Total (n)</th>
<th>Age group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0 - 15</td>
</tr>
<tr>
<td>Female</td>
<td>311</td>
<td>102</td>
</tr>
<tr>
<td>Male</td>
<td>1007</td>
<td>298</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,318</td>
<td>400</td>
</tr>
</tbody>
</table>

The high rates of motorcycle accidents can also be related to the cost, benefit and agility that the motorcycle offers, as well as the low quality of collective transportation in the country and urban and rural mobility, which contributed to the increasing increase of this means of transportation in the labor activities. 9

English/Portuguese
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Silva RM, Costa HGF, Souza DMOR de et al.

Table 2. Distribution of patients victims of motorcycle accidents according to age group in a Petrolina (PE) emergency service, Brazil, 2013.
Some people use the motorcycle not only as a means of transportation, they also use it as a work tool, such as, moto-taxis, which, despite being formal professionals, are present in the daily life of cities. But despite the mobility and speed that this means of transport can bring, it also brings much higher risks of accidents, as well as injuries that are sometimes irreversible, which can not only affect the driver's life, but also that of the passenger.24

Traffic accidents are more frequent on days that correspond to the weekend (Friday, Saturday and Sunday). A total of 69.5% of the cases were highlighted in their research. Among those three days, Sunday was the most prominent event with 248 (33%) of the cases.

In a study carried out in the period from July to November 2010, in the emergency service of a university hospital with a regional reference, which offers care to victims of motorcycle accidents, found that in its sample of subjects with 114 accident victims attended in said service. The highest frequency of these events occurred on Friday, followed by Sunday and Monday. It also corroborates another study that indicates a higher incidence of accidents involving motorcycles that occurred on Monday, followed by Saturday and Sunday.25,26

In a study carried out in the western region of the Paraíba Valley of São Paulo, there were high rates of hospitalization resulting from motorcycle accident. As a consequence, a greater expense was obtained with these events. In 2007, there were approximately 198 thousand hospitalizations due to external causes in the Northeastern region. Consequently, public expenditures with hospitalizations and length of stay increased, directly affecting health public resources.27,28

However, it is important to emphasize that education in traffic has an interdisciplinary character. So it is necessary to approach with different theoretical assumptions, in order to elaborate a pedagogy focused on education in traffic. Thus, through the multidisciplinary aspect, this discussion should be analyzed from a legal, legislative, psychological, technical, human and pedagogical point of view.29

CONCLUSION

When considering that traffic is a social phenomenon, involving the human being in an interdisciplinary perspective that encompasses social, economic, psychological and cultural aspects, it is perceived that education, in this scope becomes essential, since it is a part of the process of transformation not only composed of learning and habits, but as something of valuing human life.

In addition, we also observed the existence of underreporting of data in the records book (research instrument of this study). In the data analysis, it was noticed that some variables had some missing data (age, sex, origin, etc.) of the same patient. For example, in a certain registry, there is presence of the patient's name, gender and age, but the destination is not hospital. It is suggested that these underreporting came about because of the lack of documents of non-literate patients, victims who could not answer all the questions in the book, unconscious and unfamiliar patients (the so-called unidentified ones) or inattention of the professional who registered. These data are essential for the identification of the factors for the implementation of the actions of solvency to the problems that interfere in the quality service to the victims of traffic accidents.

The results identified the groups most vulnerable to transport accidents, as well as areas of greater risk, based on the evidence of the representativeness of the distribution of cases in most of the municipalities of the PEBA Network and also demonstrating, still, that morbidity and mortality due to traffic accidents has been frequent and increasing. The findings make it possible for public agencies linked to traffic, such as the Federal Highway Police and the Petrolinense Transit and Transit Company - PTTC, to create an appropriate infrastructure, in addition to effective legal measures such as "Dry law", for the reduction / prevention of this type of aggravation. The magnitude of this problem represents the flaws or deficiencies with respect to investments in road safety.

From the analysis of the dynamics of the variables identified in this study, it was inferred that there is a need for a more targeted look at traffic accidents in the PEBA component regions, pointing, therefore, an important source of information for the surveillance of Cheers. According to this study, the most frequent sites were Petrolina-PE. This is a reference city for high complexity service to the micro-regions of the city itself and to the micro-regions of Juazeiro-BA. It is important to emphasize the importance of establishing educational actions in the local city traffic, both for the prevention of accidents, and for the permanent education of patients involved in the event (regarding age, socioeconomic factor, permission to drive, etc.).
In this aspect, it discerns the relevance of intersectoral practices to better face the grievance. Considering the scope of the PEBA Network, the results will serve as a subsidy in the implementation of the Interstate Health Care Network of the Middle San Francisco Valley, which still suffers from socio-political and economic barriers in the region, as well as obstacles presented in the reference infrastructure of the macro-regional primary care networks and the medium and high complexity.

Specific educational actions for the promotion and prevention of traffic accidents may also be implemented and should focus, on the most affected profile (men aged between five and 40, particularly young people between the ages of ten and 20), with a view to raising awareness To reduce the phenomenon, establishing a culture of peace in transit.

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First of all to God, for having comforted me at various moments throughout my life trajectory and by the constant protection of God. I also thank my relatives, especially, my mother Luzinete and my dear daughter Raquel, for the absences that I had during this course and for the intermittent support. To all my resident friends, in particular: Helen Gabriele Ferreira Costa, Luanna Costa and Laise Kazahaya, for the coexistence and for giving me emotional support at various times.

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Characterization of the service to the...


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