

Region, Rio de Janeiro, both reference centers for tuberculosis assistance in these respective areas.

There were randomized patients with smear positive pulmonary tuberculosis, age between 14 to 65 years, hepatic and renal functions compatible with the inclusion criteria (Creatininae < 2,0mg% and ALT < 3 times baseline); non temporary resident in the adstrict area of the two Centers and those that signed consent form.

The eligible patients were randomized in one of the following regimens after block randomization and center stratification: Group I - daily RHZ self-administered (standardized regimen); Group II - RHZ intermittent self-administered; Group III - RHZ intermittent supervised once a week.

Results

There were randomized, between July of 1995 and April of 1998, 762 patients, excluded 37 and analyzed 725. The regimens were compared in terms of parameters of effectiveness, that is: Favorable: Completion = Cure and adherence to supervisions; Unfavorable: definitive defaulting, bacteriologic failure and death.

The detected cure and defaulting rates did not show statistically significant differences in relation to compared regimens, with average of 91,2% of cure and 8,8% of defaulting, respectively ($p=0,8586$ CI 95% 7,0-11,4%).

The multivariate logistic regression demonstrated the most related variables to defaulting risk: illicit drug use ($p=0,0002$), males ($p=0,02$), non white ethnicity ($p=0,01$), low income levels D and E ($p=0,02$), radiological severity ($p=0,05$).

Conclusion

The outcomes did not confirm the tested hypothesis that a supervised intermittent regimen *per se* would achieve higher effectiveness under routine assistance conditions of urban TB in Brazil. Male patients, illicit drug users, ethnically non white and with low income make a special group that present 53% of risk for defaulting ($p<0,05$). The adoption of a once weekly mode of supervision could be taken as an operational possibility for the TB programs, not as a single measure but in addition to the other components

of DOTS strategy, once the outcomes here demonstrated are comparable to other studies which tested supervision daily, twice and three times a week. For special risk groups it is recommended to adopt different assistance procedures, particularly a new organization of the flow and access for patients in health facilities, including the supervision of treatment.

Because it was a joint investigation with the participation of an university, two units of the public health network and the National Program of TB Control, this study can contribute as an incentive to carry out similar others aiming to validate cost-effectiveness parameters for decision making process in the Ministry of Health.

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Título: UM OLHAR SOBRE O PERFIL FUNCIONAL RESPIRATÓRIO DE TRABALHADORES DA INDÚSTRIA NAVAL DO RIO DE JANEIRO AVALIADOS EM AMBULATÓRIO DE REFERÊNCIA EM SAÚDE DO TRABALHADOR.

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Resumo

A silicose, pneumoconiose das mais prevalentes, permanece levando seus desafortunados possuidores à intermináveis peregrinações aos serviços assistenciais, à previdência e à justiça, para terem assegurados os benefícios previdenciários a que fazem jus.

O objetivo geral deste trabalho foi analisar o perfil clínico, radiológico e funcional de trabalhadores da indústria naval do Estado do Rio de Janeiro.

Os objetivos específicos foram discutir os indicadores usuais de avaliação em ambulatório especializado, comparar os resultados dos exames espirográficos dos trabalhadores com radiogramas normais dos possuidores de radiogramas com imagens compatíveis com silicose e relacionar o perfil encontrado com os parâmetros estabelecidos para o INSS visando a avaliação de incapacidade.

Foram avaliados 327 trabalhadores, sendo 76 portadores de silicose e 251 com padrão radiológico normal.

Encontrou-se diferença estatisticamente significativa entre as médias das CVF ($p=0,0002$), VEF ($p=0,00002$) e VEF₁/CVF ($p=0,02$) dos trabalhadores portadores de silicose, e as dos normais.

Os portadores de silicose apresentaram mais padrões espirográficos obstrutivos (25%) que os normais (15%), com $p=0,02$.

Concluiu-se que os trabalhadores estudados eram ricos em sintomas e pobres em alterações radiológicas e disfunções respiratórias.

Concluiu-se também que os parâmetros espirográficos avaliados, em valores absolutos, assim como nos valores médios, em percentuais do previsto, do Volume Expiratório Forçado no 1º segundo e da relação VEF₁/CVF, foram menores nos trabalhadores portadores de silicose que nos de raios-X normal.

Concluiu-se ainda que a resolutividade, mesmo em um serviço especializado é pequena, sendo mister exames de maior sofisticação que não são disponíveis com facilidade.

Aponta-se a possibilidade de um exame simplificado, como o teste da caminhada de seis minutos, suprir essa necessidade e, estudos nesse sentido poderão, talvez, permitir a avaliação da disfunção com maior presteza e acurácia.

Palavras chaves: Silicose, pneumoconiose, doenças profissionais

Abstract: WORKERS' OF THE NAVAL INDUSTRY OF RIO DE JANEIRO BREATHING FUNCTIONAL PROFILE EVALUATED AT REFERENCE CLINIC IN THE WORKER'S HEALTH.

Silicosis, one of the most prevalent pneumoconiosis, still takes its unfortunate possessors in endless journeys to the health services, the social welfare agencies, and to the justice, to have the benefits they deserve.

The general goal of this work was to analyze the clinical, radiographic, and functional profile of workers from the naval industry of the State of Rio de Janeiro.

The specific objectives were to discuss the usual evaluation indicators in a specialized clinic, to compare the results of the spirometric examinations of the workers with normal X-ray, to those of the workers with radiographic images that are compatible with silicosis, and relate the obtained profiles with the established parameters from INSS, aiming the evaluation of disability.

327 workers were evaluated, being 76 diagnosed as having silicosis and 251 with normal radiographic aspects.

A statistically significant difference was found between the means of FVC ($p=0,0002$), FEV₁ ($p=0,00002$) and FEV₁/FVC ($p=0,02$) on workers with silicosis and those without silicosis.

Workers with silicosis presented more obstructive spirometric patterns (25%) than the normal ones (15%), with $p=0,02$.

It follows that the studied workers were rich in symptoms, and poor in radiographic alterations and respiratory impairments.

It also follows that the evaluated spirometric parameters as in absolute values, as in average values, in percents of the anticipated, of the Forced Expiratory Volume in the 1st second and of the relation FEV₁/FVC, were lower on workers with silicosis than on the ones with normal x-rays.

It still follows that the resolution capacity, even at a specialized clinic, is small, being necessary more sophisticated examinations that are not easily obtained.

The possibility of a simplified exam is pointed out, as the 6 minute walk test, to supply this need, and studies in this area will, perhaps allow a quicker and more accurate impairment evaluation.

Key Words: Silicosis, pneumoconiosis, occupational diseases