Given that mental healthcare in Latin America is going through a special transformation, changing the hospital attention towards the community assistance (1), it is essential to know the profile of new potential users.

The Pan American Health Organization (PAHO/WHO) analyzed the situation regarding the attention given to mental health in the region of the Americas identifying that the progress in the provision of services in mental health is not enough (2). In most of the countries there are psychiatric hospitals considered as the basic structure of the mental health system. Chile, Brazil and Cuba are the exceptions. According the PAHO/WHO report, 1 out of 4 people suffers some kind of mental disorders at some stage in their life and, in the next 20 years, mental health disorders will be the second cause in the global burden of disease (2-4).

Prevalence studies in the Primary Health Care centers show high levels of mental and behavioral disorders (5).

Similar studies highlight the need of prioritizing mental health as an issue to resolve with a perspective of mental health depending on the social and economic importance of this problem (6-9). The detection and treatment of mental health and behavioral disorders in the Primary Health Care could also improve the access to care among many patients. Thus, from this perspective, it is indispensable to know the prevalence of mental and behavioral disorders since the health services must establish their priorities according to the local needs and conditions.

In Argentina, there are no epidemiological studies in this matter. Therefore, knowing the prevalence of mental disorders among attendees in Primary Health Care centers and their characteristics is fundamental to design strategies of public health that meet of needs in this population. Thus, the objective of this project is to estimate the prevalence of mental disorders among adults who attend Primary Health Care centers of the public health system, in the province of Cordoba.

For the sample calculation, the population with no health insurance of Cordoba, Villa Maria and Jesus Maria cities was taken into consideration, as well as the organization of the sanitary structure of the public subsector, considering the prevalence of mental and behavioral disorders in the community estimated by the WHO (2, 10). The sample size estimated assuming an alpha error of 0.05 was n=1,500, representing about 30% of all attendees. The sampling
was probabilistic, stratified and multistage. Adults aged 19 to 69 years who attended in the selected Primary Health Care centers were included. The sampling stratification by center includes the socio-economic diversity of the population and the centers were selected within each stratum with a probability proportional to the quantity of attendees. Interviewers were trained by a mental health professional who were certified as CIDI trainers. The instrument used was CIDI 3.0 (8, 9). The translation of the instrument was done according to the recommendations of WHO (9). The CIDI 3.0 contains modules regarding the socio demographic characteristics of those who were interviewed, chronic conditions and disability, pharmacoepidemiology and use of health services.

Currently, the research team is conducting the analysis of the data, which consists in assessing the prevalence of mental disorders, as well as the association with socio demographic factors. The statistical analysis is conducted using logistic regression models to calculate odds ratios adjusting for possible confounders. All analyses are being conducted using a level of significance alpha <0.05. The study complies with national and international regulations on human health research and ethical principles. For all of the above, it is expected that this experience will allow us to know for the first time in the province of Cordoba, Argentina, the frequency and characteristics of the problems of mental health among attendees of first level of care. This information is important for the subsequent development of strategies aimed to improve the detection and management of mental disorders in accordance with the National and Province Mental Health Laws (11, 12).

References