

## CLINICAL-EPIDEMIOLOGICAL PROFILE OF OBSTETRIC INCIDENTS HANDLED BY THE MOBILE EMERGENCY SERVICE (SAMU) IN ANÁPOLIS – GOIÁS

Agnes Vieira Gonçalves de Avelar<sup>1</sup>

Beatriz Rocha Rizzo<sup>2</sup>

Bruna Machado Siqueira<sup>3</sup>

Gabriel Costa de Oliveira Teixeira Alvares<sup>4</sup>

Leandra de Oliveira Castro<sup>5</sup>

Constanza Thaise Xavier Silva<sup>6</sup>

### ABSTRACT

**Objective:** To evaluate the clinical and epidemiological profile of obstetric services provided by the SAMU in Anápolis – Goiás during January, March, and April 2023. **Methodology:** This is an epidemiological, descriptive, cross-sectional, and retrospective study. It was conducted in the municipality of Anápolis – GO, using SAMU-192 incident reports from the first quarter of 2023 as the information source. **Results:** A total of 145 obstetric incidents were recorded. Most occurred in January, involving women aged 25 to 30 years, predominantly in the afternoon and on weekends. The majority of incidents originated at home. Additionally, contractions were the most frequently reported obstetric reason in February and March, while abdominal/pelvic pain predominated in January. **Conclusion:** Obstetric incidents accounted for a small portion of total SAMU cases. The patients were mostly young women aged 25–30, with services occurring mainly in the afternoon, on weekends, and at home, and contractions being the primary reason for calls. The study highlights SAMU's importance in pre-hospital support for pregnant women and its crucial role in obstetric public health.

**Keywords:** Emergency Medical Services; Obstetrics; Epidemiological Studies; Pre-Hospital Services.

### INTRODUCTION

Pre-hospital medical services encompass any medical assistance provided outside hospital settings, aiming to preserve life and prevent sequelae (LOPES; FERNANDES, 1999). SAMU addresses various demands, including pediatric, clinical, psychiatric, surgical, and gynecologic-obstetric emergencies (SILVA et al., 2018).

Although pregnant women represent only 0.4% of SAMU incidents, maternal mortality in Brazil remains a public health concern, with rates below the acceptable

---

<sup>1</sup>Discente da Universidade Evangélica de Goiás – UniEvangélica, [agnesvga@hotmail.com](mailto:agnesvga@hotmail.com)

<sup>2</sup>Discente da Universidade Evangélica de Goiás – UniEvangélica, [beatrizrocharizzo@gmail.com](mailto:beatrizrocharizzo@gmail.com)

<sup>3</sup>Discente da Universidade Evangélica de Goiás – UniEvangélica, [machadosiqueirabruna@gmail.com](mailto:machadosiqueirabruna@gmail.com)

<sup>4</sup>Discente da Universidade Evangélica de Goiás – UniEvangélica, [gabrielcostateixeira7@gmail.com](mailto:gabrielcostateixeira7@gmail.com)

<sup>5</sup>Discente da Universidade Evangélica de Goiás – UniEvangélica, [leaocastro24@gmail.com](mailto:leaocastro24@gmail.com)

<sup>6</sup>Docente da Universidade Evangélica de Goiás – UniEvangélica, [constanzathaise@yahoo.com.br](mailto:constanzathaise@yahoo.com.br)

standards set by the United Nations Sustainable Development Goals (BARRETO, 2021). This is particularly relevant when programs such as the "Stork Network" and "Health Closer to You" emphasize the importance of logistics and regulation in transporting pregnant women within Brazilian public health (SILVA et al., 2018).

Thus, recognizing the need to focus on pre-hospital care for pregnant women, this study aims to evaluate the clinical and epidemiological profile of obstetric services provided by SAMU in Anápolis, Goiás, during January, March, and April 2023.

## METHODOLOGY

This study used an epidemiological, descriptive, cross-sectional, and retrospective approach. It was conducted in Anápolis – GO, using SAMU-192 incident reports from the municipality for the first quarter of 2023. Records with erased or unclear information were excluded. Data were transcribed into spreadsheets and analyzed, with results organized in tables .

The study was submitted and approved by the Research Ethics Committee of UniEVANGÉLICA, according to Resolution 466/2012 of the National Health Council (CNS). Approval number: 6.723.196.

## RESULTS

According to the data obtained from the SAMU service records in Anápolis-GO between January and March 2023, a total of 145 incidents related to obstetric causes were analyzed, excluding records with unclear or insufficient information to support the study.

In January, 59 incidents were recorded, in February 39, and in March 47. Regarding the age range of the pregnant women, the highest number of cases occurred among women aged 25 to 30 years (28.9%), followed by women aged 19 to 24 years (26.9%) (Table 1).

**Tabela 1.** Número de ocorrências obstétricas no SAMU e perfil sociodemográfico das gestantes, em Anápolis – Goiás.

VARIÁVEIS	MESES			Total
	Janeiro	Fevereiro	Março	
	n (%)	n (%)	n (%)	n (%)
Gestantes	59 (40,7)	39 (26,9)	47 (32,4)	145 (100,0)
<b>Faixa etária das gestantes</b>				
13 a 18 anos	9 (15,3)	10 (25,6)	5 (10,6)	24 (16,6)

19 a 24 anos	15 (25,4)	9 (23,1)	15 (31,9)	39 (26,9)
25 a 30 anos	13 (22,0)	14 (35,9)	15 (31,9)	42 (28,9)
31 a 36 anos	14 (23,7)	4 (10,3)	8 (17,0)	26 (17,9)
37 a 42 anos	6 (10,2)	2 (5,1)	4 (8,6)	12 (8,3)
>42 anos	1 (1,7)	0 (0,0)	0 (0,0)	1 (0,7)
Não informado	1 (1,7)	0 (0,0)	0 (0,0)	1 (0,7)

Fonte: Autor

Regarding the most frequent times of obstetric incidents, the majority occurred during the afternoon period (12:00 to 17:59) with 47 cases (32.4%), followed by the morning period with 39 cases (26.9%). Concerning the days of the week, most incidents occurred on weekends (Saturday and Sunday) with 42 cases (28.9%), followed by Tuesday with 25 occurrences (17.2%) (Table 2).

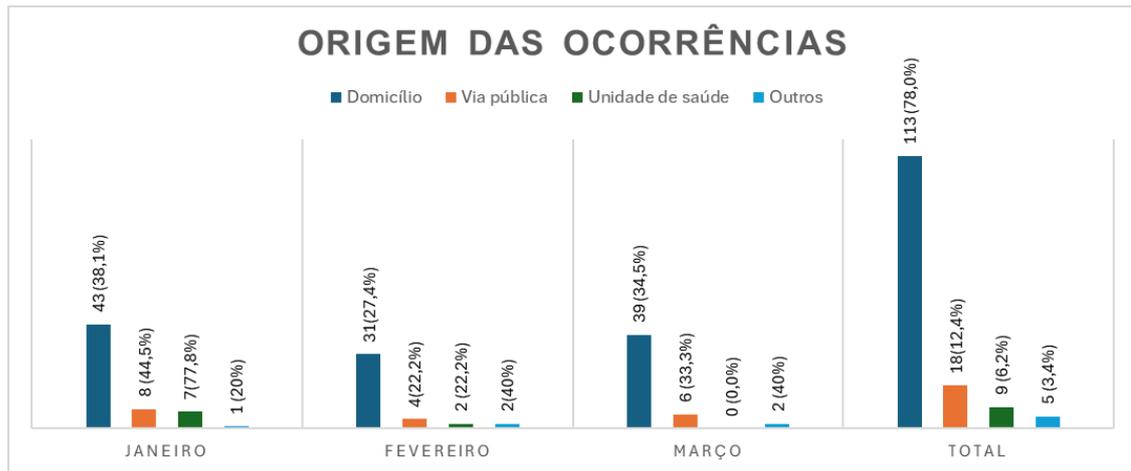
**Tabela 2.** Distribuição das ocorrências do SAMU em Anápolis – Goiás, de acordo com o horário e dia da semana no primeiro trimestre de 2023.

VARIÁVEIS	MESES			
	Janeiro	Fevereiro	Março	Total
<b>Horário</b>	n (%)	n (%)	n (%)	n (%)
Madrugada (00:00 – 05:59)	8 (13,6)	7 (17,9)	12 (25,5)	27 (18,6)
Matutino (06:00 – 11:59)	10 (16,9)	17 (43,6)	12 (25,5)	39 (26,9)
Vespertino (12:00 – 17:59)	23 (39,0)	12 (30,8)	12 (25,5)	47 (32,4)
Noturno (18:00 – 23:59)	18 (30,5)	3 (7,7)	11 (23,5)	32 (22,1)
Ocorrência cancelada	0 (0,0)	0 (0,0)	0 (0,0)	0 (0,0)
<b>Dia da semana</b>				
Final de semana (sábado e domingo)	19 (32,2)	10 (25,6)	13 (27,7)	42 (28,9)
Segunda-feira	15 (25,4)	3 (7,7)	6 (12,8)	24 (16,6)
Terça-feira	8 (13,5)	7 (17,9)	10 (21,3)	25 (17,2)
Quarta-feira	6 (10,2)	9 (23,1)	6 (12,8)	21 (14,5)
Quinta-feira	5 (8,5)	4 (10,3)	5 (10,6)	14 (9,7)
Sexta-feira	6 (10,2)	6 (15,4)	7 (14,9)	19 (13,1)

Fonte: Autor

Regarding the origin of obstetric incidents, across all three months analyzed, the majority occurred at home, totaling 113 incidents (77.9%), followed by public places, with 18 occurrences in total (12.4%) (Figure 1).

**Figura 1.** Distribuição dos números de casos obstétricos realizados pelo SAMU em Anápolis-GO, de acordo com o local de ocorrência no primeiro trimestre de 2023.

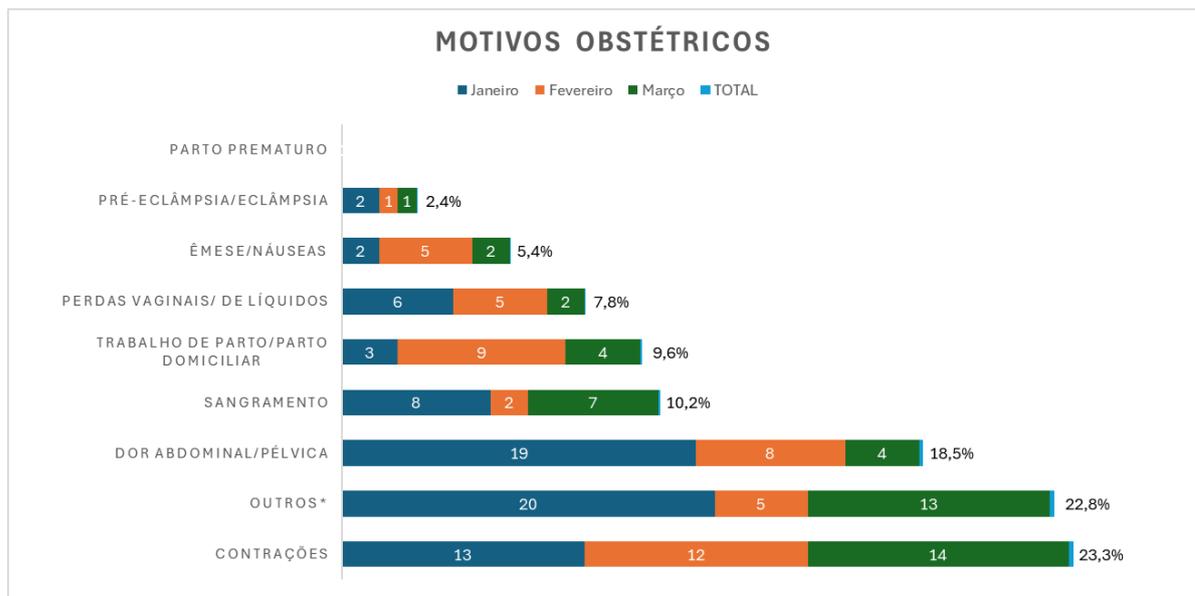


Fonte: Autor

Regarding obstetric reasons, the most significant overall for the quarter were contractions (23.3%). However, in January, “abdominal/pelvic pain” predominated among the cases. In February and March, the main reason was contractions in pregnant women, followed by “labor/home birth” for February and “bleeding” for March.

It is important to note that most incidents involved more than one obstetric reason.

**Figura 2:** Número de ocorrências do SAMU de acordo com o motivo obstétrico, em Anápolis-GO.



Fonte: Autor

\*Aborto, ansiedade, astenia, problemas no puerpério, agressão física, intoxicação exógena, gravidez ectópica, mal-estar, hipertensão arterial, crise convulsiva, febre, dispneia, precordialgia, hematêmese, síncope, pré-síncope, dormência na face, epistaxe, ausência de movimentos fetais, não informado.

## CONCLUSION

The conclusion of the study on the clinical-epidemiological profile of obstetric care provided by SAMU in Anápolis-GO between January and March 2023 highlighted that obstetric incidents represented a small portion of the total calls. The patients attended were predominantly young, aged between 25 and 30 years, and most care occurred in the afternoon and on weekends, primarily at home. The main reason for the calls was contractions. The study emphasizes the importance of SAMU in providing pre-hospital support to pregnant women, highlighting the crucial role of this service in obstetric public health.

## REFERENCES

- BARRETO B. L. Perfil epidemiológico da mortalidade materna no Brasil no período de 2015 a 2019. **Revista Enfermagem Contemporânea**, v. 10, n. 1, p.127-133, 2021.
- LOPES S. L. B.; FERNANDES R. J. A brief review of medical prehospital care. **Medicina, Ribeirão Preto**, v.32, p. 381-387, 1999.
- SILVA, J. G. et al. Ocorrências obstétricas atendidas pelo serviço de atendimento móvel de urgência. **Revista de Enfermagem UFPE online**, v. 12, n. 12, p. 3158-3164, 2018.