CARTAS AL EDITOR

NURSING CHALLENGES TO PROMOTE HEALTHY AGEING AND DECREASE HEPATITIS B AND C BY 2030

DESAFÍOS DE ENFERMERÍA PARA PROMOVER EL ENVEJECIMIENTO SALUDABLE Y DISMINUIR LA HEPATITIS B Y C EN EL 2030

DESAFIOS DA ENFERMAGEM PARA PROMOVER O ENVELHECIMENTO SAUDÁVEL E REDUZIR A HEPATITE B E C ATÉ 2030

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Dear Editor,

The paper published in December 2021, entitled "Quality of life among older people in rural settings: differences between men and women" (1), brought up a relevant theme about gerontological nursing. The authors observed that older people (OP) in a rural setting perceive health as the most crucial domain in assessing their quality of life.

A cross-sectional population study done in India shows the poor quality of life of hepatitis patients compared to control⁽²⁾. Although the prevalence of Viral Hepatitis (VH) is in other age groups, disease progression and incidence are increasing among OP. For example, the incidence of Hepatitis B (HBV) is 9.2 times higher in low-income countries than in high-income countries, and the estimated worldwide incidence for Hepatitis C (HCV) is 23.7/100.000 inhabitants⁽³⁾.

In 2015, 71 million people lived with chronic $HCV^{(3)}$. Compared to HBV, the prevalence of HCV is lower but more heterogeneously distributed, with differences between in the countries and within the regions of the $WHO^{(3)}$. In the Americas, more than half of the countries (57%) have national strategies or plans for preventing, treating, and controlling $VH^{(4)}$. However, only 54% of countries have targets for eliminating $VH^{(4)}$.

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The WHO's goal to control HBV and HCV until 2030 is to reduce 90% of chronic cases, 65% of mortality, and 90% of diagnoses⁽⁵⁾. In this context, nurses have several challenges in the care of OP. Considering community health care and nursing homes, nurses may act from epidemic and respond to HBV and HCV locally. Healthy ageing suggests an essential package of interventions gerontological nursing to HBV e HCV and a plan local hepatitis infection surveillance program for OP.

Some of the nurses' actions can increase community health care and nursing homes by increasing serological screening and rapid HBV, HCV tests, the percentage of OP who received any HBV vaccine, and the percentage of OP vaccinated with three doses HBV vaccine. Also, monitor cases of positive serology for HBV and HCV develop vaccination strategies directed to groups of OP, among others.

The COVID-19 pandemic highlighted many gaps in how health professionals and nurses promote care for OP. The actions reinforce the importance of HBV vaccination, prevention of HIV transmission, and the realization of seroprevalence surveys to measure the impact of the HBV immunization program. In addition, the improvement of the central records of chronic VH, cirrhosis and hepatocellular carcinoma are interventions that can be directed until 2030 to promote the ageing reduction or elimination of VH in the OP.

Reflecting on how nurses help OP in all health services implies the recognition that there are stereotypes (how we think), prejudices (how we feel) and discrimination (how we act) based on age. The Decade of Healthy Ageing 2020-2030 suggests focusing on the needs of OP and age-friendly services⁽⁶⁾. Care without considering patient age promote conflicts. The nurses gained visibility to reorientate their care during the COVID-19 pandemic and improve care for OP to promote healthy ageing and decrease HBV and HCV by 2030.

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