Revista de Enfermagem
do Centro-Oeste Mineiro
2020;10:e3737
DOI:10.19175/recom.v10i0.3737
www.ufsj.edu.br/recom

RECOM
REVISTA DE ENFERMAGEM DO CENTRO OESTE MINEIRO

Original Article

USO DE SUBSTÂNCIAS PSICOATIVAS ENTRE PROFISSIONAIS DA ENFERMAGEM DA ATENÇÃO BÁSICA E INSTITUIÇÃO HOSPITALAR

USE OF PSYCHOACTIVE SUBSTANCES AMONG PRIMARY CARE NURSING PROFESSIONALS AND HOSPITAL INSTITUTION

USO DE SUSTANCIAS PSICOACTIVAS ENTRE LOS PROFESIONALES DE ENFERMERÍA DE ATENCIÓN PRIMARIA Y LOS DE INSTITUCIONES HOSPITALARIAS

Andressa Domingues Silva[1], Emiliana Cristina Melo[2], Júlia Trevisan Martins[3], Camila Dálcol[4], Edivaldo Cremer[5], Alessandro Rolim Scholze[6].

RESUMO

Objetivo: Comparar o uso de substâncias psicoativas em profissionais da enfermagem da atenção básica e de instituição hospitalar**. Método:** Estudo transversal, desenvolvido com profissionais de enfermagem, utilizando-se dois instrumentos: caracterização sociodemográfica e ocupacional e o *Alcohol, Smoking and Substance Involvement Screening Test*. Na análise dos dados, utilizou-se estatística descritiva e o teste qui-quadrado para verificar as associações. **Resultados:** O consumo de álcool e tabaco na vida e, nos três últimos meses, foi, proporcionalmente, maior entre profissionais da atenção básica. O uso de sedativos foi maior nas instituições hospitalares, sobretudo o uso na vida (p=0,05). O forte desejo de álcool e sedativos esteve presente entre profissionais das instituições hospitalares e para o tabaco foi maior nos profissionais da atenção básica. **Conclusão:** Ao comparar, nota-se que houve uso distinto de drogas entre os profissionais das instituições hospitalares e os profissionais da atenção básica.
Descritores: Equipe de Enfermagem; Transtornos Relacionados ao Uso de Substâncias; Bebidas alcoólicas; Saúde do trabalhador; Saúde mental.

ABSTRACT

Objective: To compare the use of psychoactive substances in nursing professionals in primary care and hospital institutions. **Method:** a cross-sectional study developed with nursing professionals, using two instruments: socio-demographic and occupational characterization and the Alcohol, Smoking, and Substance Involvement Screening Test. In the data analysis, descriptive statistics and the chi-square test were used to verify associations. **Results**: the consumption of alcohol and tobacco in life and the last three months was proportionally higher among primary care professionals. The use of sedatives was greater in hospital institutions, especially the use in life (p = 0.05). The strong desire for alcohol and sedatives was observed among professionals in hospital institutions, whereas the need for tobacco was greater among professionals in primary care. **Conclusion:** Different drug uses were observed when comparing professionals from hospital institutions and professionals from primary care.
Descriptors: Nursing;Team; Substance-Related Disorders; Alcoholic Beverages; Occupational Health; Mental Health.

RESUMEN

Objetivo: comparar el uso de sustancias psicoactivas entre los profesionales de enfermería de la atención primaria y los de instituciones hospitalarias**. Método:** estudio transversal, desarrollado con profesionales de enfermería, utilizando dos instrumentos: caracterización sociodemográfica y ocupacional y el *Alcohol, Smoking and Substance Involvement Screening Test*. En el análisis de los datos se utilizó la estadística descriptiva y el test de chi-cuadrado para verificar las asociaciones **Resultados:** el consumo de alcohol y tabaco a lo largo de la vida y en los últimos tres meses fue proporcionalmente mayor entre los profesionales de la atención primaria. El uso de sedantes fue mayor en las instituciones hospitalarias, especialmente el uso a lo largo de la vida (p = 0.05). El fuerte deseo de alcohol y sedantes estaba presente entre los profesionales de las instituciones hospitalarias y el consumo de tabaco fue mayor entre los profesionales de la atención primaria. **Conclusión:** al compararlos se observa que hubo un uso diferente de medicamentos entre los profesionales de instituciones hospitalarias y los profesionales de atención primaria.
Descriptores: Grupo de Enfermería; Trastornos Relacionados con Sustancias; Bebidas Alcohólicas; Salud Laboral; Salud Mental.

[1]Nurse, State University of Northern Paraná. [2]PhD in nursing, Teacher of the nursing course at the State University of Northern Paraná. [3]PhD in nursing, Teacher of the Postgraduate course in nursing at the State University of Londrina. [4]Master in nursing, Teacher of the nursing course at the State University of Northern Paraná. [5]Doctor in health sciences, Teacher of the nursing course at the State University of Northern Paraná.6 Master in nursing, Teacher of the nursing course at the State University of Northern Paraná.

How to cite this article:
Silva AD, Melo EC, Martins JT, et al. Use of psychoactive substances among primary care nursing professionals and hospital institution. Revista de Enfermagem do Centro Oeste Mineiro. 2020;10:e3737. [Access_____]; Available in:_____. DOI: http://doi.org/10.19175/recom.v10i0.3737

INTRODUCTION

The use of Psychoactive Substances (PAS) is a serious public health problem worldwide. It is a factor that generates losses in the social and health areas[1-2]. Data show that the prevalence of PAS use (except alcohol) is 5.2% in the world population, which corresponds to 243 million people who consume some type of substance[3]. In 2015, at least one of every three people in Europe reported an episode of excessive alcohol consumption (consumption of more than five drinks on a single occasion) in the last 30 days, and, one of every five people had daily smoking and 7% used *cannabis* in the last year[2].

PAS consumption, especially licit ones, is a recreational and socially acceptable habit, aimed at promoting relaxation, social interaction, and others[4]. However, when this habit becomes abusive, the individuals become susceptible to negative consequences for their health, including traffic accidents, physical and verbal violence, unprotected sexual intercourse, consumption of other illegal substances, damage to social relationships and the occupational environment, as well as triggering a greater susceptibility to the development of chemical dependence[4,5].

The indiscriminate use of PAS does not have differences among population groups. It is a habit observed in the most different population scenarios, including among nursing professionals[4,6-7]. In the nursing staff, the prevalence of PAS consumption has varied between 6% and 8%, and it may be even higher when analyzing the abusive use of sedatives 20%[3].

When a worker develops the habit of consuming some PAS, this act can generate significant complications in the work environment, such as reduced productivity and perception of activities, greater susceptibility to accidents at work, dissatisfaction with their occupational environment, and higher rates of absenteeism[3].

Nursing is inserted in all levels of health care, including primary and medium care. These environments have similar characteristics such as unhealthy environment, low job satisfaction, precarious work conditions, deficit in interpersonal and multi-professional relationships, structural and organizational aspects, lack of participation, and involvement in service decisions. Therefore, all these factors favor mental illness, and, many times, they resort to the consumption of PAS in the search for alternatives to relieve tensions related to the occupational environment[8].

Although the use of PAS in health professionals has already been the subject of research, there is still a need for studies that compare the use of these substances between professionals in primary care and hospital institutions, since they have different work processes. The findings may provide support to managers and nursing workers in the implementation of preventive actions, harm reduction, and treatment according to different needs. Thus, this study aimed to compare the use of psychoactive substances in nursing professionals in primary care and hospital institutions.

METHOD

This is a cross-sectional study, developed with nursing professionals (nursing assistants, nursing technicians, and nurses) from 13 Basic Health Units (UBS) and two medium complexity hospital institutions in four small cities in the interior of the State of Paraná.

The inclusion criterion adopted was to work in the institutions for at least six months and the exclusion criterion was to be away from their activities, for any reason, during data collection. A total of 70 professionals met these criteria.

Data collection took place from November 2017 to March 2018, by a team with three nursing students previously trained for the collection. The probable participants were approached in up to three attempts. The professionals who agreed to participate in the study were sent to reserved rooms in their workplaces in which they were informed about the purpose of the study, signed the Informed Consent Form (ICF) and answered the data collection instrument available in a sealed individual envelope, to maintain the reliability and confidentiality of the participant.

For data collection, we used two instruments. The first one for socio-demographic and occupational characterization, including the following variables: age, gender, marital status, if they had children; life habits: physical exercise and level of satisfaction with their leisure activity opportunities; and the work and occupational environment: professional training, workplace, shift, number of jobs, weekly hours, level of satisfaction in the relationship with co-workers and the immediate boss, satisfaction with the opportunities for expressing work-related opinions, level of balance between their

professional and personal/family life, level of knowledge/ability to perform tasks and individual monthly income.

The second instrument was the Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST). It investigates alcohol consumption and nine other classes of drugs (tobacco, alcohol, marijuana, cocaine, amphetamines, inhalants, hypnotics/sedatives, hallucinogens, opioids, and others). This is a validated instrument adapted to the Portuguese language, with good levels of reliability, which recommend its use[9]. This instrument includes questions about the frequency of use in life; consumption in the last three months; strong desire/urgency to consume in the past three months; stop doing any activity in the last three months due to the consumption of the substance; problems related to its use, such as health, financial, social, concern about the consumption by people close to the user; and attempts to control/decrease/cease use. However, for this study, we only used the questions of use in life, the last three months, and strong desire.

We used the Statistical Package for the Social Sciences (SPSS) version 20.0 for data analysis. Descriptive statistics describe and summarize the data obtained. We used univariate analysis through the chi-square test, comparing the relationship between the work environment and socio-demographic and occupational characteristics and the consumption of psychoactive substances by nursing professionals.

This research was submitted to the Research Ethics Committee of the State University of Northern Paraná and obtained a favorable opinion under nº 2,211,294. All participants signed the ICF and the study followed the ethical assumptions defined by Resolution 466/2012.

RESULTS AND DISCUSSION

Thirty-five of the 70 nursing professionals worked in primary care and the other 35 in hospital institutions. When comparing socio-demographic and occupational characteristics, we observed that gender ($p = 0.012$), age ($p = 0.036$), food ($p = 0.027$) and education ($p = 0.002$) were statistically different between groups (Table 1).

Nursing professionals, both in the hospital and in primary care, experience workloads with specific characteristics of each environment and occupational routine. These specificities are often associated with excessive demands, precarious working conditions, insufficient number of human and material resources, excessive working hours, low wages, among other factors that negatively interfere with patient care and cause health problems for these professionals[10].

Workloads cause worker dissatisfaction, wear, and illness, in addition to hindering the performance of creative and effective work[10], contributing to the worker using strategies to manage this suffering associated with his work practice such as missing work, abusive food consumption and the use of PAS[6,11].

After the industrial revolution, the man began to seek new ways to maximize pleasure and minimize the suffering experienced in his work environment, highlighting the use of PAS as a quick and effective strategy to achieve well-being, increasing mood, socializing, relaxing and reducing stress whether for their occupational environment or their personal life[12].

Regarding the socio-demographic characteristics of the participants, there was a predominance of females, adults, married people, mostly nursing technicians, and who worked during the day. These data are similar to the national nursing scenario, in which most professionals are female (84.6%) and of the category of nursing technicians (80%)[3,5,13].

In the world, nursing has approximately 19.3 million nurses and, in Brazil, the professional category represents half of the health workforce, representing a total of more than two million professionals. Of these, 24% are nurses, 56% nursing technicians, and 20% nursing assistants[14] who are inserted in all levels of care, developing direct or indirect assistance to the patient.

Regarding marital status, we found that most of the participants in this study were married. Other studies[3,6-7,11,15] show that single individuals have a higher risk of alcohol consumption patterns than married people. Thus, a stable union is a protective factor for alcohol consumption, especially among men, since women, historically, have a greater concern for their health and seek to develop healthier lifestyle habits[15].

Another protective characteristic is having children, that is, when the professional develops an emotional involvement with the children, it is characterized as a factor that protects people from consuming alcohol, tobacco, and other drugs[16].

Also, when analyzing the occupational characteristics of nursing professionals regarding their satisfaction with co-workers and the boss,

the data from this study showed that there is a duality. That is that a significant percentage of professionals in both workplaces are satisfied, but it is still clear that dissatisfaction occurs. We noticed that the nursing work routine, working conditions, difficulties in dealing with suffering, death, and conflicting interpersonal, and interprofessional relationships lead to greater professional dissatisfaction[17]. All of these factors lead to an increase in the consumption of licit and illicit drugs by nursing professionals because the harmful/abusive use of PAS acts as a defense/escape strategy related to the demands and dissatisfactions imposed on daily work[18].

Research carried out with 1,608 workers in Norway showed that those who are at increased risk for alcohol consumption have greater psychological distress and less satisfaction with their work than workers who have harmful alcohol consumption[19].

A study[20] developed in China showed that difficulties in interpersonal relationships between health professionals are experienced daily in the work environment, and the main factors that influence the development of conflicting relationships in these professionals are highlighted by poor communication between teams, excessive stress, and competing task priorities. All these factors negatively influence the health of the professional, which, in turn, favors a reduction in the quality of care, increases adverse events, and, consequently, professional exhaustion, causing occupational stress providing the consumption of PAS whether it is harmful or abusive[11, 19,20-21].

Most participants in the study said they do not exercise and have an inadequate diet. A study carried out with nurses identified that the practice of physical activities (moderate/high or low intensity) decreases by almost half the risk of developing problems related to alcohol consumption than sedentarism[23].

The practice of physical exercises and healthy eating are important habits for the development of a good quality of life when the professional has positive characteristics regarding their lifestyle. Consequently, this habit will reflect in a better performance in the assistance, decrease in occupational stress, and a lower probability of consuming PAS since alcohol consumption is associated with difficulties in managing the demands at work[3].

The relationship between health and the practice of physical activity is positive since this practice acts in the prevention of diseases and the maintenance and recovery of the health of people in all age groups. An active lifestyle by the practice of physical activity contributes to a good physical condition, which is an important factor for the prevention and treatment of diseases, health maintenance, and a precious instrument for improving the quality of life, and consequently, better performance in their work activities[9].

Another risk factor for nursing professionals in the development of Chronic Non-Communicable Diseases (NCD), resulting from the risk factors identified as the lack of physical activity, inadequate diet, obesity, and the use of alcohol and other drugs[1].

Table 1 – Socio-demographic and occupational characteristics of nursing professionals. Paraná, Brazil, 2020. (n=70)

Variables	Basic Care		Hospital institution		p-value
	n	%	N	%	
Gender					
Male	0	0	6	100	0,012
Female	35	54,7	29	45,3	
Age					
18 to 40 years old	17	45,9	20	54,1	0,036
More than 40 years old	15	53,6	13	46,4	
Marital status					
Married	21	56,8	16	43,2	0,169
Other	14	42,4	19	57,6	

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Variables	Basic Care		Hospital institution		p-value
	n	%	N	%	
Income					

Up to 1 minimum wage	7	50	7	50	0,617
More than 1 minimum wage	28	50	28	50	
Food habits					
Bad	24	61.5	15	38.5	0.027
Good	11	35.5	20	64.5	
Exercise					
No	24	53.3	21	46.7	0.309
Yes	11	44	14	56	
Children					
No	6	33.3	12	66.7	0.085
Yes	29	55.8	23	44.2	
Formation					
Technical level	23	47.9	25	52.1	0.002
Graduation	12	54.5	10	45.5	
Shift at work					
Day	35	72.9	13	27.1	0.232
Night	0	0	22	100	
Satisfaction with co-workers					
Low	13	50	13	50	0.598
High	22	50	22	50	
Satisfaction with the boss					
Low	12	42.9	16	57.1	0.232
High	23	54.8	19	45.2	

Source: The author.

When analyzing the consumption of PAS (Table 2) in nursing professionals, a similarity is identified with the general population in which alcohol and tobacco are the most consumed substances. However, the consumption of sedatives was also evident in this population. Studies[3,6,11] developed with the same population also showed the same specificities when analyzing the type of substance consumed in life. Therefore, we can affirm that the PAS is in the most different population groups, with no distinction between gender, age, and education[22, 24-25].

Alcohol consumption stands out as the most consumed substance in life (68.6%), followed by tobacco (48.6%), marijuana (8.6%) and sedative (87.1%). These results are similar to that found in the literature (3), in which, among the general population, alcohol, tobacco and marijuana are the most consumed SPA in the world, representing a major public health problem worldwide. Still, the use of alcohol and tobacco are directly related to the increase in premature mortality and years of life lost due to disease loads related to functional disability[2].

Alcohol consumption stands out as the most consumed substance in life (68.6%), followed by tobacco (48.6%), marijuana (8.6%), and sedative (87.1%). These results are similar to data in the literature[3], in which, alcohol, tobacco, and marijuana are the most consumed PAS worldwide among the general population, representing a major public health problem worldwide. The use of alcohol and tobacco are also directly related to the increase in premature mortality and years of life lost due to diseases causing functional disability[2].

A study developed with nurses in Taiwan that aimed to examine the patterns of benzodiazepine use showed that, in the period of the study, there was an increasing trend for use among these professionals, with nurses over the age of 45 and those with an experience of 5 years or more were more likely to use it, as well as in those with depression, anxiety and sleep disorders[23]. Thus, the use of the sedative observed in this study can be directly related to the occupational characteristics experienced by professionals in their work environment.

Table 2 – Characteristics of psychoactive substance use in life, among nursing professionals. Paraná, Brazil, 2020. (n=70)

Variable	Yes	No

	N	%	N	%
Use in life				
Tobacco	34	48.6	36	51.4
Alcohol	48	68.6	22	31.4
Marijuana	6	8.6	64	91.4
Cocaine	4	5.7	66	94.3
Amphetamines	3	4.3	67	95.7
Inhalants	3	4.3	67	95.7
Hypnotics/Sedatives	9	12.9	61	87.1
Hallucinogens	3	4.3	67	95.7
Opioids	8	11.4	62	88.6
Others	6	8.6	64	91.4

Source: The author.

When comparing the use of PAS among the participants in this study (Table 3), it is evident that the consumption of alcohol and tobacco in life and the last three months was proportionally higher among primary care professionals than in the hospital institution professionals. However, this was not a statistically significant difference. The use of sedatives was higher in those in hospital institutions, especially the use in life (p = 0.05). The strong desire to consume alcohol and sedatives was greater among professionals in hospital institutions and for tobacco it was among professionals in primary care.

Table 3 – Comparison of alcohol, tobacco, and sedatives consumption according to the work environment. Paraná, Brazil, 2020. (n=70)

Variables	Basic Care		Hospital Institution		P
	N	%	N	%	
Use in life					
Alcohol	27	56.2	21	43.8	0.19
Tobacco	15	44.1	19	55.9	0.23
Sedatives	4	44.4	5	55.6	0.05
Last 3 months					
Alcohol	18	58.1	13	41.9	0.16
Tobacco	11	55.0	9	45.0	0.39
Sedatives	1	25.0	3	75.0	0.30
Strong Desire					
Alcohol	7	46.7	8	53.3	0.52
Tobacco	10	62.5	6	37.5	0.19
Sedatives	0	0.0	1	100.0	0.48

Source: The author.

A study showed that factors associated with the nursing work environment such as stress, work overload, dissatisfaction, interpersonal relationships, and communication deficits can contribute to an increase in the consumption of sedatives, hypnotics, and antipsychotics and, consequently, increase the risk of overdose[22].

Corroborating these findings, a study with nurses from public hospital institutions found that alcohol, tobacco, and sedatives were the most consumed substances and that, the more unfavorable the nurse's work environment, especially in the relationship with doctors, organizational support and autonomy, the higher the consumption of PAS[11]. Thus, providing a favorable environment to nursing professionals who work, both in primary care and in the hospital institutions, for their professional practice, is essential since these characteristics reflect positively on their physical and mental health.

We believe that nursing professionals who do not have healthy habits and lifestyles are more likely to use PAS. Research carried out with nursing professionals at a general hospital showed

that inappropriate/unhealthy behaviors are directly related to the practice of harmful/abusive alcohol consumption[3].

The comparison between the two work environments investigated in this study found that being a nursing professional who works in the hospital environment presented a higher frequency for a strong desire to consume alcohol and sedatives. The work process and occupational characteristics between the two occupational environments are different; however, problems can be common, such as lack of materials, high demand from patients, lack of human and material resources in quantity and quality, among others. However, the characteristics inherent to hospital institutions such as working hours, patient complexity, dealing with death, pain, and job insecurity/instability are factors that contribute to alcohol abuse/dependence[7].

Regarding nursing professionals who work in primary care, we can highlight that they are also exposed to risks that can favor the consumption of PAS. These professionals daily experience the excess demand, structural and physical problems, and failure in the care networks, which hinders professional performance and contributes to job dissatisfaction, contributing to a greater possibility for the consumption of PAS[10].

When analyzing a study that approached nursing professionals who work in Family Health Strategy teams, the results showed that 44.6% of professionals consumed alcohol in the binge pattern, 16.2% had symptoms of depression, 15.2% had stress and 23.2% had anxiety, which, the use of alcohol in binge pattern was associated with depression (p =, 035).

Thus, we believe that nursing professionals are becoming physically and mentally ill, and use PAS as a defense strategy, which can be associated with personal problems related to their extra-work environment, as well as problems with the occupational environment such as the lack of autonomy, organizational support and the doctor-nurse relationship, factors that contribute to the consumption of PAS[12].

The easy access to medications controlled by the nursing team may be another aspect associated with the consumption of sedatives. This is a matter of concern in the context of nursing, as the use of psychotropic substances and depression may be related to working conditions, difficulties in dealing with suffering and death, interpersonal and interprofessional relationships, and professional unpreparedness. The consumption of these substances aims to reduce the physical and psychological loads that these professionals are continuously exposed [15].

CONCLUSION

In this study, we observed that the use of PAS occurs among nursing professionals. However, when comparing the institutions studied, we concluded that professionals from hospital institutions predominantly use sedatives and alcohol, and primary care professionals use tobacco more.

Although the study achieved the proposed objective, it presented limitations by the cross-sectional design that does not allow the establishment of the cause and effect relationship because it is a self-reported survey, in which the interviewees may have answered the questionnaire, considering the standards socially acceptable in their environments. Thus, we suggest further studies.

This study brings unique contributions since most of the Brazilian research with nursing professionals is carried out in medium and large cities. Thus, when comparing the use of PAS among professionals in primary care nursing and a hospital in a small city, there are advances since it is a reality still little revealed. It also collaborates so that the managers, together with the nursing professionals, seek actions to eliminate the consumption of these drugs and thus, promote health.

REFERENCES

1- Bardach AE, Alcaras AO, Ciapponi A, Garay OU, Riviere AP, Palacios A, et al. Alcohol consumption's attributable disease burden and cost-effectiveness of targeted public health interventions: A systematic review of mathematical models. BMC Public Health 2019;19:1378. DOI: 10.1186/s12889-019-7771-4

2- Atzendorf J, Rauschert C, Seitz NN, Lochbühler K, Kraus L. The use of alcohol, tobacco, illegal drugs and medicines. Dtsch Arztebl Int. 2019;116(35/36):577–84. DOI: 10.3238/arztebl.2019.0577

3- Junqueira MAB, Ferreira MCM, Soares GT, Brito IE, Pires PLS, Santos MA, et al. Uso de álcool e comportamento de saúde entre profissionais da enfermagem. Rev Esc Enferm USP 2017;51:1-8. DOI: 10.1590/s1980-220x2016046103265

4- Jomar RT, Abreu ÂMM, Griep RH. Padrões de consumo de álcool e fatores associados entre adultos usuários de serviço de atenção básica do

Rio de Janeiro, RJ, Brasil. Ciênc Saúde Coletiva 2014;19(1):27-38. DOI: 10.1590/1413-81232014191.2009

5- Thompson A, Choque JCH, Jorgenson E, Yin J, Kinnunen T. Functional validity, role, and implications of heavy alcohol consumption genetic loci. Sci Adv. 2020;6(3):eaay5034. DOI: 10.1126/sciadv.aay5034

6- Scholze AR, Martins JT, Grandi AL, Galdino MJQ, Robazzi MLCC. Uso de substâncias psicoativas entre trabalhadores da enfermagem. Rev Port Enferm Saúde Mental 2017;18:23-30. DOI: 10.19131/rpesm.0188

7- Diniz CFG, Assunção AÁ, Beinner MA, Pimenta AM. Abuso/dependência de álcool e fatores psicossociais do trabalho em profissionais de saúde. Ciênc Cuid Saúde 2019;18(3):1-9. DOI: 10.4025/cienccuidsaude.v18i3.45023

8- Januário GC, Carvalho PCF, Lemos GC, Gir E, Toffano SEM. Acidentes ocupacionais com material potencialmente contaminado envolvendo trabalhadores de enfermagem. Cogitare Enferm. 2017;22(1):1-9. DOI: 10.5380/ce.v22i1.48893

9- Henrique IFS, De Micheli D, Lacerda RB, Lacerda LA, Formigoni MLOS. Validação da versão brasileira do teste de triagem do envolvimento com álcool, cigarro e outras substâncias (ASSIST). Rev Assoc Med Bras. 2004;50(2):199-206. DOI: 10.1590/S0104-42302004000200030

10- Pires DEP, Machado RR, Soratto J, Scherer MA, Gonçalves ASR, Trindade LL. Cargas de trabalho da enfermagem na saúde da família: Implicações no acesso universal. Rev Latino-Am Enfermagem 2016;24:1-9. DOI: 10.1590/1518-8345.0992.2682

11- Scholze AR, Martins JT, Galdino MJQ, Ribeiro RP. Ambiente ocupacional e o consumo de substâncias psicoativas entre enfermeiros. Acta Paul Enferm. 2017;30(4):404-11. DOI: 10.1590/1518-8345.0992.2682

12- Taggar JS, Lewis S, Docherty G, Bauld L, McEwen A, Coleman T. Do cravings predict smoking cessation in smokers calling a national quit line: Secondary analyses from a randomised trial for the utility of "urges to smoke" measures. Subst Abuse Treat Prev Policy 2015;10:1-10. DOI: 10.1186/s13011-015-0011-8

13- Conselho Federal de Enfermagem. Pesquisa inédita traça o perfil da enfermagem brasileira Brasília: COFEN; 2015. Disponível em: http://www.cofen.gov.br/pesquisa-inedita-traca-perfil-da-enfermagem_31258.html

14- Biff D, Pires DEP, Forte ECN, Trindade LL, Machado RR, Amadigi FR, et al. Cargas de trabalho de enfermeiros: Luzes e sombras na Estratégia Saúde da Família. Ciênc Saúde Coletiva 2020;25(1):147-58. DOI: 10.1590/1413-81232020251.28622019

15- Bertussi VC, Junqueira MABB, Giuliani CD, Calçado RM, Miranda FJS, Santos MA, et al. Substâncias psicoativas e saúde mental em profissionais de enfermagem da Estratégia Saúde da Família. Rev Eletr Enf. 2018;20/21:1-9. DOI: 10.5216/ree.v20.47820

16- Ferro L, Meneses-Gaya C. Resiliência como fator protetor no consumo de drogas entre universitários. Saude e Pesqui. 2015 [citado em 7 fev 2020]; 8(nesp):139-49. Disponível em: https://periodicos.unicesumar.edu.br/index.php/saudpesq/article/view/3774/2519

17- Almazan JU, Albougami AS, Alamri MS. Exploring nurses' work-related stress in an acute care hospital in KSA. J Taibah Univ Med Sci. 2019;14(4):376–82. DOI: 10.1016/j.jtumed.2019.04.006

18- Vieira GCG, De Brida RL, Macuch RS, Massuda EM, Preza GP. Uso de psicotropicos pelo enfermeiro: Sua relação com o trabalho. Cinergis 2016;17(3):191-5. DOI: 10.17058/cinergis.v17i3.8118

19- Nielsen MB, Gjerstad J, Frone M. Alcohol use among Norwegian workers: Associations with health and well-being. Occup Med. 2018;68(2):96-98. DOI: 10.1093/occmed/kqy014

20- Jerng JS, Huang SF, Liang HW, Chen LC, Lin CK, Huang HF, et al. Workplace interpersonal conflicts among the healthcare workers: Retrospective exploration from the institutional incident reporting system of a university-affiliated medical center. PLoS One 2017;12(2):e0171696. DOI: 10.1371/journal.pone.0171696

21- Lin CF, Huang CI, Yang CM, Lu MS. The relationship between work environment satisfaction and retention intention among nursing administrators in Taiwan. J Nurs Res. 2019;27(5):e43. DOI: 10.1097/jnr.0000000000000312

22- Ke Y-T, Feng IJ, Hsu C-C, Wang J-J, Su S-B, Huang C-C, et al. Nurses have a four-fold risk for overdose of sedatives, hypnotics, and antipsychotics than other healthcare providers in Taiwan. PLoS One 2018; 13(8):e0202004. DOI: 10.1371/journal.pone.0202004

23- Sang E, Liao YM, Miao NF, Chou KR, Chung MH. Patterns and correlates of benzodiazepine use in nurses: A nationwide, population-based

study. Int J Ment Health Nurs. 2018;27(1):400-7. DOI: 10.1111/inm.12334

24- Perry L, Xu X, Gallagher R, Nicholls R, Sibbritt D, Duffield C. Lifestyle health behaviors of nurses and midwives: The 'Fit for the Future' Study. Int J Environ Res Public Health 2018;15(5):945. DOI: 10.3390/ijerph15050945

25- Abreu AMM, Parreira PMSD, Souza MHN, Barroso TMMDA. Perfil do consumo de substâncias psicoativas e sua relação com as características sociodemográficas: Uma contribuição para intervenção breve na atenção primária à saúde, Rio de Janeiro, Brasil. Texto Contexto Enferm. 2016;25(4):1-9. DOI: 10.1590/0104-07072016001450015

Note: This article is part of the end-of-course monograph "Use of psychoactive substances among nursing professionals in primary health and hospital care" of the nursing course at the State University of Northern Paraná (UENP)

Received: 16/04/2020
Approved: 05/08/2020

E-mail address:
Alessandro Rolim Scholze
Street Mayor José Mario Junqueira, 393 ap. 01, CEP: 86.360 - 000, Bandeirantes (PR).
E-mail: scholze@uenp.edu.br