



MALIGNANT NEOPLASMS OF THE BRAIN: ANALYSIS OF HOSPITAL ADMISSIONS AND DEATHS IN BRAZIL BETWEEN 2020 AND 2024.

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Introduction/Objective

Malignant neoplasms of the brain have a high morbidity and mortality rate, accounting for an average of 30% of cancer deaths, with headache disorders being the main symptom. The aim of this study was to describe the distribution of hospital admissions and deaths due to malignant neoplasms of the brain in Brazil, from January 2020 to November 2024, as well as to analyze the values related to hospital services.

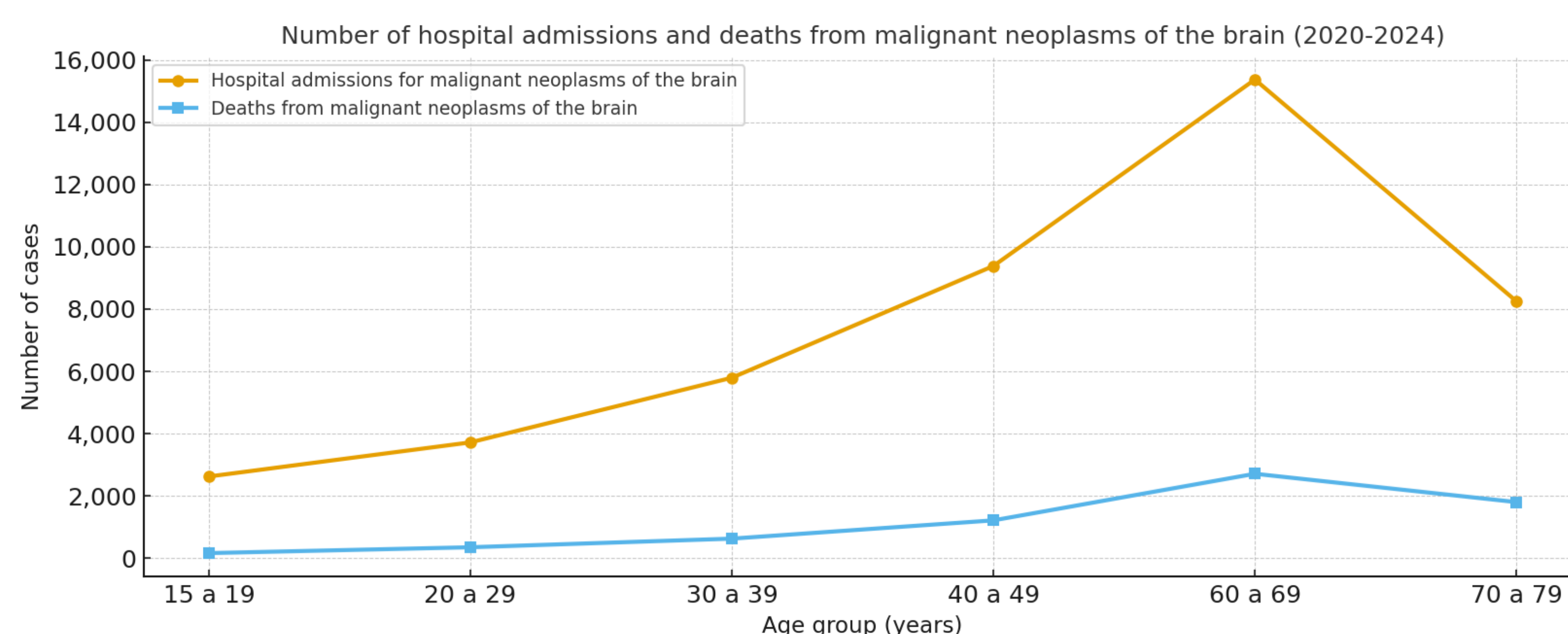
Methods

This is an observational, cross-sectional study based on the analysis of secondary data extracted from the Tabnet system, made available by the Department of Information Technology of the Unified Health System (DATASUS). Malignant neoplasms of the brain (C71) are a group of tumors listed in ICD-10, containing 10 subcategories. In accordance with Resolution 510/2016, submission to the Research Ethics Committee was not necessary, since secondary and non-identifiable information was used.

Results

Of the total of 76,422 hospitalizations for malignant neoplasms of the brain in Brazil, the Southeast region accounts for 43% of cases. In terms of age group, there were 15,375 (20.12%) hospitalizations among patients aged 60 to 69, the largest group affected.

There was also a predominance of males (52%) and white individuals (43.95%). The longest average length of stay was concentrated in the North (n=13.6 days). There were 10,365 deaths over the period in Brazil. The Southeast region stood out with 4,794 deaths (46%). The fatality rate was highest in the North (16%). Deaths were more frequent among individuals aged 60 to 69 (26%) and among those who identified themselves as white (43.5%) or brown (40%). There was little difference between the sexes, with 52% of deaths occurring among men and 48% among women. It is worth mentioning that the cost of hospital services offered to patients by region was highest in the Southeast (R\$89 million), followed by the Northeast (R\$44 million), as opposed to the North (R\$9 million).



Conclusions

Thus, the highest concentration of cases is found in the Southeast, with a higher incidence among males, white people and those aged between 60 and 69. This data corroborates the significant expenditure on hospital services in this region. The North region had the highest average hospital stay and the highest case-fatality rate, suggesting possible difficulties in accessing early diagnosis and specialized treatment, which is in line with the lower financial investment received.