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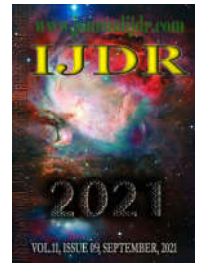
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RESEARCH ARTICLE

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PREVALENCE OF COVID-19 INFECTION IN THE MILITARY FIREFIGHTER TRAINING COURSE

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ABSTRACT

Professionals who work in the area of health and direct care to the community are at greater risk of infection due to occupational exposure to infected patients. Thus, the objective is to determine the prevalence of positive Covid-19 cases among the cadets of the military firefighters training course. This was a cross-sectional study with 64 Age students from the Officer Training Course – Military Firefighter at the State University of Maranhão. Sociodemographic variables, prevalence of positive covid-19 cases and presence of post-infection clinical symptoms were measured. There was a high prevalence 68.8% (n=44) of positive cases of COVID-19 and the majority 82.8% (n=53) were male. Among the post-COVID-19 symptoms among the cadets who tested positive for the disease, most had neuropsychiatric symptoms such as anxiety 25% (n=11) and stress 9.1% (n=4) and headache 25% (n=11) between physical effects, among other symptoms associated with post infection by COVID-19. Thus, such data allows the development of prevention and control measures for this population, as well as others that present the same risk of exposure.

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INTRODUCTION

In 2020, the world suffered the most dramatic and catastrophic experience of the century due to the 2019 coronavirus disease pandemic (COVID-19) caused by SARS-CoV-2 and had unprecedented effects on health systems, economies and society.

In this context, first responders and public safety workers play a critical role in responding to the COVID-19 pandemic. (FERNÁNDEZ-DE-LAS-PEÑAS, 2021, NALLEBALLE et al, 2020, BAKER et al, 2020). The Officer Training Course/Military Firefighter (OTC/MF) course at the State University of Maranhão brings with it a peculiarity: academics already join the military hierarchy as Cadets.

Cadets are not only university students, but also assume the obligations of militarism and military fire service. In addition to academic activities, cadets are exposed to the risks of military training, duties and attributions and the discipline of professional activities (UEMA, 2021). According to decree 35.783, it required the services of military firefighters to organize the queues of caixa econômica federal bank branches in order to ensure safety and reduce large agglomerations in these places, due to the payment of emergency aid to low-income population by the federal government, (UEMA, 2021). In the scientific literature, however, there is still much to be explored about the impact of Covid-19 on work and workers and the implications for management. Assessing the burden of occupational exposure to infections and diseases, including how many workers were potentially exposed and what occupations they work in, allows for the implementation of prevention measures in the workplace that can support a workforce potentially exposed to SARS-CoV-2. (SEGAL *et al.*, 2020, BAKER *et al.*, 2020). Studies aimed at analyzing occupational issues serve as a reminder that the workplace is key to public health interventions that can protect workers and the communities they serve. Thus, the present study intends to assess the prevalence of positive cases of COVID-19 among students of the Officers Training Course - Military Firefighter. The population brings, in addition to the academic load, the experience of working in loco, being exposed to the risks inherent to the profession. Thus, such data allows the development of prevention and control measures for this population, as well as others that present the same risk of exposure. (BAKER *et al.*, 2020)

MATERIAL AND METHODS

This is a cross-sectional study carried out from December/2020 to January/2021, with students from the Officer Training Course – Military Firefighter at the State University of Maranhão, located in the State of Maranhão, Northeastern Brazil. The OTC/MF course has 93 academics with active enrollment, all were invited to participate in the research voluntarily, but only 64 academics consented to participate. Therefore, a total of 64 participants were included in our analysis. The sample included: students with active enrollment of both genders, aged ≥ 18 years; and who were able to answer the questionnaire questions without the help of others. Participants who withdrew from participating in some stage of the study were excluded; the academics already diagnosed psychological and metabolic alterations. Participants who consented to participate in the study filled out an online questionnaire specially developed (APPENDIX A) for this research, where sociodemographic variables, prevalence of positive cases of covid-19, presence of post-infection clinical symptoms were evaluated.

The questions about COVID-19 contamination were:

- Have you been diagnosed with covid-19?
- Did you have any of these psychological effects after COVID - 19?
- Did you have any of these physical effects after COVID - 19?
- Did you have any of these neurocognitive effects after COVID - 19?
- Did you have any of these effects on the heart after COVID - 19?
- Did you have any of these respiratory effects after COVID - 19?
- Did you have any of these gastrointestinal effects after COVID - 19?

According to Ordinance n. 150/2020/DP-1 - Maranhão State Military Fire Brigade - MFBMA, which deals with the Protocol for rapid tests to detect the new Coronavirus-COVID-19, firefighters are submitted to the test within the ideal period of ten days after the onset of the first symptom, being removed from their activities immediately after symptoms. For the data file and statistical analysis, the SPSS software (Statistical Package for the Social Sciences, Inc., Chicago, IL, USA) version 19.0 was used.

Data treated through descriptive procedures: Prevalence (frequency). In the analysis of data related to post-covid symptoms, only positive cases for COVID-19 were considered. Participants included in this research after being informed in detail about the study, understanding its purpose and signing the Informed Consent Form. This study will be conducted in accordance with the resolution of the National Health Council – NHC n°. 466/2012, and was submitted to the ethics committee of the state university of Maranhão according to CAEE n° 42201620.1.0000.5554.

RESULTS AND DISCUSSION

A total of 64 cadets participated in the study and had a mean age of 25.4 ± 5.4 , among which 68.8% (n=44) had COVID-19. Of the total sample, 82.8% (n=53) are male, 32% (n=50) are brown. In line with the results presented, in the work by Segal *et al.* (2020) carried out with military personnel presented a mean age of young adults with 21.29 ± 4.06 years and most participants 81.34% were also male. These data corroborate the study by Lázaro-Perez *et al.* (2020) carried out with the same population, where the majority of the sample was also composed of men (87.5%), reflecting a masculine profile. Brazil, like other countries, uses the military in a series of tasks, ranging from border security, medical care, logistics, policing and crisis management.

In the COVID-19 pandemic, it was no different and the military had a crucial role in the fight against COVID-19, which may explain the high prevalence of infection by COVID-19 in the evaluated sample, since they are a group of workers who had to continue their work in loco in favor of social welfare (PASSOS, ACÁCIO, 2021, GUO, 2020). Discuss the prevalence of Covid-19 with other professional categories in academics from the OTC/MF of Maranhão. Table 2 shows the frequency of symptoms after COVID-19, among which we can highlight that anxiety was among the main psychological symptoms 25% (n=11), headache among the physical effects 25% (n=11), slower reasoning among neurocognitive 13.6% (n=6), chest pain or discomfort among heart effects 13.6% (n=6), tiredness or fatigue among respiratory 25% (n=11) and digestive problems among gastrointestinal effects 9.1% (n=4).

Although clinical attention and research focus have mostly been turned to the treatment of physiological changes caused by the new coronavirus. The psychological effects of the virus on infected patients must also be considered. As evidenced in previous SARS and MERS outbreaks, viral infections with subsequent isolation and quarantine can quickly culminate in sleep disturbances, anxiety, and depressive episodes (DENG *et al.*, 2021). In this context, the evaluated sample showed a high prevalence of anxiety as post-COVID-19 effects. COVID-19 and its spread around the world is strongly impacting global and mental health among the population. Symptoms of insomnia, anxiety, symptoms of post-traumatic stress, among others, are being increasingly evaluated in several studies, reinforcing the importance of mental health, especially in a pandemic context. (TORALES *et al.*, 2020, LIGUORI *et al.*, 2020).

Emerging mental health problems related to this global event can evolve into long-term health problems, isolation and stigma. However, it is important to emphasize that the military is already at greater risk of developing mental problems during non-pandemic periods, and with the increase in workload and stress due to COVID-19, this risk of psychological distress may be increased (AL-JAHDHAMI *et al.*, 2021, LIGUORI *et al.*, 2020). Health services should invest in specialized multidisciplinary rehabilitation services in order to reverse these symptoms. This could prevent a future “tsunami” of chronic disease that will likely drain health resources and negatively affect our economies. (BAKER *et al.*, 2020). Thus, understanding the burden of occupational exposure to infections and diseases, including the number of workers and which occupations they exercise, helps in planning prevention and control measures against COVID-19 and subsequent outbreaks of infectious diseases (BAKER *et al.*, 2020).

CONCLUSION

There was a high prevalence of cases of COVID-19 in the evaluated students, the majority of military personnel had neuropsychiatric symptoms such as anxiety and stress and headache among the physical effects, among other symptoms associated with post infection by COVID-19. Thus, such data allows the development of prevention and control measures for this population, as well as others that present the same risk of exposure.

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APPENDIX QUIZ

Participant: _____ Age: _____

Gender:

- Male
- Female
- Not informed

Race:

- Brown
- Black
- White

Have you been diagnosed with covid-19?

- Negative
- Positive
- Untested

Did you have any of these psychological effects after COVID - 19?

- Anxiety
- Stress
- Memory loss
- Did not feel

Did you have any of these physical effects after COVID - 19?

- Headache
- Hair loss
- ringing in the ear
- Joint pain
- Difficulty in breathing
- Did not feel

Did you have any of these neurocognitive effects after COVID - 19?

- I did not have Covid-19
- Attention difficulty
- Slow reasoning
- Did not feel
- Did you have any of these effects on the heart after COVID - 19?
- Palpitation / Tachycardia
- Chest pain or discomfort
- Did not feel

Did you have any of these respiratory effects after COVID - 19?

Difficulty in breathing
Shortness of breath at rest/effort
Shortness of breath after physical activity
Tiredness/ Fatigue
Did not feel

Did you have any of these gastrointestinal effects after COVID - 19?

Nausea/ Vomit
other digestive problems
Weight loss
Did not feel

Table 1. Prevalence of sociodemographic factors and cases of covid-19 in students from the officer training course for firefighters in the state of Maranhão

Variables	Percentage (frequency) n=64
Gender	
Male	82,8 (53)
Female	15,6 (10)
Not informed	1,6 (1)
Race	
Brown	50 (32)
Black	25 (16)
White	25 (16)
Cases of COVID-19	
Negative	23,4 (15)
Positive	68,8 (44)
Untested	7,8(5)

Source: Prepared by the Authors

Table 2. Frequency of post-COVID-19 symptomatology among students from the officer training course for firefighters in the state of Maranhão

PSYCHOLOGICAL EFFECTS	
VARIABLE	% (n)
Anxiety	25% (11)
Stress	9,1% (4)
Memory loss	6,8% (3)
Did not feel	59,1% (26)
PHYSICAL EFFECTS	
VARIABLE	% (n)
Headache	25% (11)
Hair loss	4,5% (2)
Ringing in the ear	2,3% (1)
Joint pain	4,5% (2)
Difficulty in breathing	6,8% (3)
Did not feel	56,8% (25)
NEUROCOGNITIVE EFFECTS	
VARIABLE	% (n)
I did not have Covid-19	15,9% (7)
Attention difficulty	11,4% (5)
Slow reasoning	13,6% (6)
Did not feel	59,1% (26)
HEART EFFECTS	
VARIABLE	% (n)
Palpitation / Tachycardia	2,3% (1)
Chest pain or discomfort	13,6% (6)
Did not feel	84,1% (37)
RESPIRATORY EFFECTS	
VARIABLE	% (n)
Difficulty in breathing	4,5% (2)
Shortness of breath at rest/effort	6,8% (3)
Shortness of breath after physical activity	6,8% (3)
Tiredness/ Fatigue	25% (11)
Did not feel	56,8% (25)
EFEITOS GASTROINTESTINAIS	
VARIABLE	% (n)
Nausea/ Vomit	2,3% (1)
other digestive problems	9,1% (4)
Weight loss	4,5% (2)
Did not feel	84,1% (37)

Source: Prepared by the Authors.
