

PROFILE OF ONCOLOGICAL UROGENITAL SURGERIES IN BELÉM DO PARÁ: EPIDEMIOLOGICAL ANALYSIS FROM 2019 TO 2024

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Introduction: Urogenital cancers comprise neoplasms of the urinary system, including kidneys, bladder, and ureters, as well as tumors of the male reproductive system, such as prostate, penis, and testicles. Despite their anatomical proximity, gynecological cancers are classified separately in epidemiological analyses. The evaluation of oncological surgical procedures allows assessment of healthcare system capacity, access to treatment, and the organization of care networks, particularly in regions with marked inequalities in specialized services. **Objectives:** To analyze the profile of urogenital oncological surgeries performed in Belém do Pará between 2019 and 2024. **Methods:** This observational, descriptive, and retrospective study was conducted using secondary data extracted from the Hospital Information System of the Unified Health System (SIH/SUS) and the Oncology Monitoring Panel. Hospital admissions recorded between 2019 and 2024 were included. Data were organized into electronic spreadsheets and stratified by scope, including Brazil, the state of Pará, and reference hospitals, as well as by source of registration. Descriptive statistical analysis was performed, calculating absolute and relative frequencies, percentage variations, and annual growth trends. As the study exclusively used publicly available secondary data, ethical review was not required, in accordance with Resolution No. 510/2016 of the Brazilian National Health Council. **Results:** Between 2019 and 2024, the number of urogenital oncological surgeries increased by 19.7% nationwide, while in the state of Pará the variation was limited to 3.8%, indicating relative stability. At the national level, bladder and prostate cancers were the most frequently treated surgically. In Pará, kidney and prostate cancer

surgeries predominated. Notably, bladder cancer surgeries increased by 206.3%, and testicular cancer surgeries rose by 69.2% during the study period. The state of Pará accounted for 1.29% of all urogenital oncological surgeries performed in Brazil and concentrated 31.6% of the procedures carried out in the North Region. Surgical oncology production was highly centralized, with 82.27% of procedures performed in only two public reference hospitals. **Conclusion:** Although urogenital oncological surgeries increased consistently at the national level, surgical production in Pará remained relatively stable over the analyzed period. The observed regional differences highlight challenges related to installed capacity, access to early diagnosis, and adequate recording of oncological procedures. These findings underscore the need to strengthen regional oncology care networks, improve data quality, and expand access to specialized surgical services in the state.

Keywords: Urogenital cancer; oncological surgery; epidemiological analysis; Unified Health System; public health.