The exaggerated success of modern epistemicide' in health'

C D. Tesser

**Objectives:** The purpose of this article is to reflect on and analyze the state of the social medicalization process in the Brazilian National Health System (SUS) from a critical perspective.

**Methodology:** Interpretative analytical.

**Results:** The author begins by defining medicalization as the progressive expansion of biomedical intervention through a redefinition of human experience and behavior as though these were medical problems. He freely summarizes Illich’s critique (1975), analyzing its relevance from the perspective of health care practices in the Brazilian SUS primary health care network. In this context, medicalization places a greater focus on what Illich termed “cultural iatrogeny,” deflecting attention from macropolitical, economic and corporate issues towards health care. The article continues with an analysis of the process of social medicalization from Ludwick Fleck’s (1986) point of view, which enriches the perspective on Illich’s ideas and indicates some of the practical consequences of social medicalization for primary health care in the SUS. Users come to the SUS with a growing number of ailments, real or imaginary, many of which stem from their living and working conditions rather than from organic causes. Health care workers are not equipped with the tools to deal with the pressures on the system that this creates.

**Conclusions:** According to the author, the new closeness and interaction allowed by the SUS, particularly by the Health in the Family Program (PSF in Portuguese) is a double-edged sword. On one hand, it can be an opportunity to redirect medicalization and recover autonomy, but it can also constitute a powerful force for it.