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Introduction: Health demands are the result of a complex interaction between social, economic and cultural factors related to health services and professionals, often surpassing the search for medical attention, limited to health problems. In this context, the health demands could be encompassed in four major sets of needs: good living conditions, access to and use of health technologies, creation of effective relations between patient and staff/professionals and autonomy construction (Cecilio, Merhy 2002, 2003, 2014). Objective: To know the health needs of patients treated at the Hematopoietic Stem Cell Transplantation Assistance Program of a university hospital. Methodology: Qualitative research (CAAE 40328114500005327). The oral history technique was used for data collection. For data collection, we used interviews, through semi-structured script, from March to July 2015, and the subjects were 05 adult patients that met the inclusion criteria in that period. The data were analyzed using the Analysis of Content, based on Bardin (2009). Results and Discussion: The most recurring needs are related to housing-territory, work, issues related to changes in family income, family reorganization, loss of autonomy and affective relationships. The difficulties arise, as the lives of the subjects are interrupted by other processes and by the desire to restore their lives to “normal”, beyond what is prescribed and recommended by the staff. The study showed that, although the concept of “health needs” is not explicit among the subjects, they understand the association between the social status and the health-disease process. The interviews allowed us to apprehend all the constitutive elements of the categories, a priori defined according to the Taxonomy of Health Needs. We identified that the social context where the subjects are included may have a strong influence on their health, and that the autonomy in decision-making is a necessity. The autonomy/self-care needs seem to be closely linked to the association with the health care team, since by reinforcing this relationship of trust, it is possible to strengthen the potential for facing the health-disease process. Final Considerations: The health needs are expressed in the health-disease process and demonstrate that the health conditions of the Brazilian people are disadvantaged and generate a great demand for health care. Regarding the HSCT, the people’s care is often directed to health services in other locations, outside their territory, far from their family and community support groups, which further exposes the need for a close relationship between the comprehensive health care, access to social policies and quality of health actions and services.

Keywords: Needs and demands of health services, Hematopoietic stem cell transplantation, Comprehensive Health Care