

REFERRALS OF PATIENTS WITH BIPOLAR DISORDER TO A CONSULTATION-LIAISON PSYCHIATRY SERVICE

Roberto Sánchez ¹, Eva Baillés ², Anna Bastidas ², Luis Pintor ²

¹ Department of Psychiatry. Institut de Neuropsiquiatria i Addiccions. Parc de Salut Mar. Barcelona. Spain.
² Department of Psychiatry. Institut de Neurociències. Hospital Clínic i Provincial de Barcelona. Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS) Universitat de Barcelona. Barcelona. Spain.

e-mail address: 39639rsg@gmail.com

ISBD-0078

BACKGROUND

Consultation-liaison psychiatry (CLP) refers to the skills and knowledge utilized in evaluating and treating the emotional and behavioural conditions in patients who are referred from medical and surgical settings. There are few studies specifically investigating the acute treatment procedures of bipolar patients in the context of CLP.

PURPOSE

To describe the main clinical features of referrals of a sample of patients with bipolar disorder (DSM-IV-TR criteria) attended within a general hospital CLP service.

METHODS

Retrospective analysis of clinical records of patients treated by CLP service of Hospital Clínic of Barcelona (Spain), over an 11-year period (from January 2005 to December 2015).

RESULTS

Demographics:

During that period, 10,287 psychiatric consultations were requested. 193 of these consultations (1.9%) concerned patients with bipolar disorder. On average, the patients of the sample were aged 56.5 ± 15.3 years and 51.8% were male. A 40.1% of patients had history of suicide attempts and 31.7% presented psychosocial stressors.

Characteristics of referrals:

Referral sources according to medical specialties are shown in Table 1. The major medical conditions for referral were poisonings/overdoses/ injuries (16.6%), infectious diseases (10.4%) and orthopaedic conditions (8.8%). The two most frequent reasons for referral were the assessment of psychopharmacological treatment and/or psychopathological state examination (59.1%) and suicide risk evaluation (13%). Intended destination on discharge after psychiatric consultation was home in a 72.6% of referrals. However, 28 patients (14.5%) were admitted in the psychiatric department.

Table 1: Referral source (n = 193)

Specialty	Number	%	Number/year
General Medicine	49	25.4	4.5
Cardiology	16	8.3	1.5
Surgery	15	7.8	1.4
Respiratory Medicine	14	7.3	1.3
Trauma and Orthopaedics	13	6.7	1.2
Haemato-Oncology	12	6.2	1.1
Hepatology	11	5.7	1
Neurology	9	4.7	0.8
Infectious diseases	9	4.7	0.8
Gastroenterology	8	4.1	0.7
Urology and Nephrology	8	4.1	0.7
Other	29	15	2.6

CONCLUSIONS

In accordance with previous research, only 1.9% of all patients for whom psychiatric consultation was requested had a diagnosis of bipolar disorder. The most common profile of these patients was: male, 56 years old, coming from general medicine department due to poisonings/overdoses/injuries and referred to the CLP service because of psychiatric state and/or medication review.

REFERENCES

- Anderson C, Quante A. Acute interventions and referral of patients with bipolar disorder by the psychiatric consultation liaison service in a general hospital in Germany: a retrospective analysis. Prim Care Companion CNS Disord. 2014;16(2).
- Bourgeois JA, Wegelin JA, Servis ME, Hales RE. Psychiatric diagnoses of 901 inpatients seen by consultation-liaison psychiatrists at an academic medical center in a managed care environment. Psychosomatics. 2005;46(1):47-57.

DISCLOSURE: There are no potential conflicts of interest.

