Describing consultation-liaison psychiatry

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Introduction

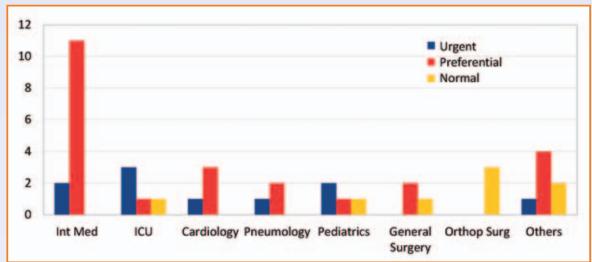
Consultation-liaison (CL) psychiatry is a branch of psychiatry that detects and treats mental health disorders of patients with other medical or surgical conditions, mainly in hospitalisation settings. The assistance between hospitals and health services is heterogeneous and often is not registered. Previous studies have found sociodemographic differencies between patients. These differences indicate a potential need for targeted education and service initiatives to promote better access to psychiatric services and treatment outcomes.

Methods

We made a descriptive analysis of social and demographic variables of the patients who received assistance during 2 months by the CL service of the Hospital del Mar, Barcelona. Previous linkage, consultant department and preference were checked too.

Results

Graphic 1. Distribution of previous linkage



Graphic 2.

Distribution of consultant department and preference

36%

No Follow-up

Psychiatric Follow-up

Mental health follow-up

Table 1. Divided by sex sociodemographic characteristics

	Male (%)	Female (%)	Total (%)
National status	15 (35%)	19 (45%)	34 (80,9%)
Foreign status	1 (2,3%)	7 (16,6%)	8 (19%)
No studies	1 (2,3%)	3 (7,1%)	4 (9,5%)
Primary studies	4 (9,5%)	7 (16,6%)	11 (26,1%)
Secondary studies	8 (19%)	11 (26,1%)	19 (45%)
Unemployed	0 (0%)	2 (4,7%)	2 (4,7%)
Active worker	1 (2,3%)	1 (2,3%)	2 (4,7%)
Disability pension	1 (2,3%)	5 (11,9%)	6 (14,3%)
Retired	9 (21,4%)	9 (21,4%)	18 (42,8%)
Single	7 (16,6%)	12 (28,6%)	19 (45%)
Married	8 (19%)	6 (14,3%)	14 (33,3%)
Widow	0 (0%)	3 (7,1%)	3 (7,1%)
Homeless	1 (2,3%)	0 (0%)	1 (2,3%)
Institutionalized	0 (0%)	2 (4,7%)	2 (4,7%)
Live alone	2 (4,7%)	6 (14,3%)	8 (19%)
cohabiting	9 (21,4%)	11 (26,1%)	20 (47,6%)
Live in family	2 (4,7%)	6 (14,3%)	8 (19%)

Conclusions

It is noticeable the high number of patients were not in psychiatric's outpatient follow-up despite that more of the half of the sample were in an outpatient mental health follow-up, mainly in psychology follow-up.

The consultations had a wide variability between departments, Internal Medicine department was the most active on this regard, being followed by ICU, cardiology and pneumology.

These results have to be interpreted with caution due the small current sample size. More sample size is required in order to show stronger outcomes.

Bibliography

- Conejo J, Sainz E. Aspectos de interés en la psiquiatría de enlace. 1ª ed. Ergon, 2010.
- Juhás, M., & Agyapong, V. I. O. (2016). Patients assessed by the liaison psychiatric team in the emergency department of a regional hospital in Canada general characteristics and gender differences. *International Journal of Psychiatry in Clinical Practice*, 1–8.

