

REFERRALS OF PATIENTS WITH SCHIZOPHRENIA TO A CONSULTATION-LIAISON PSYCHIATRY SERVICE

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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 patients with schizophrenia in the context of CLP.

PURPOSE

Describe the main clinical features of the referrals of patients with schizophrenia,attended by a general hospital CLP service.

METHODS

Longitudinal observational and descriptive study, assessing adult inpatients with schizophrenia (DSM-IV-TR criteria) admitted to non-psychiatric units of Hospital Clínic of Barcelona (Spain), who were consecutively referred to our CLP service over a 10-year period (from January 1, 2005, through December 31, 2014).

RESULTS

Demographics:

During that period, 9,808 psychiatric consultations were requested. 163 of them (1.8%) concerned patients with schizophrenia. On average, the group of patients with schizophrenia were aged 50.9 ± 15.3 years and 65% were male. A 25.9% of patients had history of suicide attempts and 45.6% presented current psychosocial stressors.

Characteristics of referrals:

Referral sources according to medical specialties are shown in Table 1.

The major medical conditions for referral according to ICD-10 categories were: external causes of morbidity (21.5%), infectious diseases (13.5%) and diseases of the digestive system (10.4%).

The two most frequent reasons for referral were the assessment of psychopharmacological treatment and/or psychopathological state examination (62%) and suicidal risk/attempt assessment (8.6%).

Intended destination on discharge after psychiatric consultation was home in a 60.4% of referrals. However, 20 patients (12.7%) were admitted in the psychiatric department.

Table 1: Referral source (n = 163)

Specialty	Number	%	Number/year
General Medicine	42	25.9	4.2
Surgery	13	8	1.3
Trauma and Orthopaedics	13	8	1.3
Intensive Care Unit	12	7.4	1.2
Infectious diseases	10	6.2	1
Haemato-Oncology	10	6.2	1
Respiratory Medicine	9	5.6	0.9
Hepatology	8	4.9	0.8
Cardiology	8	4.9	0.8
Neurology	7	4.3	0.7
Urology and Nephrology	7	4.3	0.7
Gastroenterology	6	3.7	0.6
Other	18	11.1	1.8

CONCLUSIONS

In our sample, only a 1.8% of all patients for whom psychiatric consultation was requested had a diagnosis of schizophrenia. The most common profile of them was: male, 50 years old, coming from general medicine department due external causes of morbidity and referred to the CLP service because of psychiatric state and/or medication review.

REFERENCES

- Wiechers IR, Freudenreich O. The role of consultation-liaison psychiatrists in improving health care of patients with schizophrenia. Psychosomatics. 2013;54(1):22-7.
- 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.

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