



Characteristics of patients admitted to a Psychiatric Home Hospitalization Unit and burden felt by caregivers

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INTRODUCTION

Schizophrenia, bipolar disorder, and recurrent depressive disorder are chronic mental illnesses characterized by periods of relapse that require intensive resource management. Relapse can lead to hospitalization and other poor outcomes. Caregivers of schizophrenia and bipolar disorder patients feel a considerable burden of care (1).

Hospital at home for psychiatric patients is a new emerging resource of delivering acute mental health care in the community. The main objective of this program is to provide intense care to patients with severe mental disorders at home as an alternative to acute admission (2). Psychiatric Home Hospitalization Unit of CAEM (HAD-CAEM) has been running for 3.5 years and takes place in Santa Coloma de Gramenet, a socio-demographically depressed area near Barcelona.

OBJECTIVES

The aim of this study is to describe the characteristics of patients attended at the Psychiatric Home Hospitalization Unit of our hospital and to assess the of burden of care that caregivers feel while giving care to this patients.

RESULTS

Socio-demographic and clinical characteristics of the simple are shown in [table 1](#).

109 patients were included in the study. 49.5% were women. The mean age was 48 years (SD 18.47 years). 44% met criteria for schizophrenia, 25.7% for depressive disorder, and 30.3% for bipolar disorder. Most of them lived with their own (47.7%) and birth (39.4%) family; had secondary education (51.4%) and only 15.6% were employed. 81% had a history of at least one admission to an acute psychiatric unit.

The mean duration of admission in HAD-CAEM was 33.8 days (SD 15.72 days), with a mean follow-up of 8.75 visits (SD 3.58 visits).

The mean CGI severity item at admission was 4.36 (corresponding to moderately-markedly ill) and there was an improvement at the time of discharge according to the CGI improvement item (mean CGI-I=2.43, corresponding to moderate-mild improved).

The GAF scale on admission was 46.74 (SD 11.2) and on discharge 64.24 (SD 13.85), showing an improvement of 17.5 points at discharge ($p<0.001$).

The mean ZCBS of the sample was 48.21 (SD 15.11). In the group of patients with schizophrenia ($n=22$) the mean ZCBS was 46.14 (SD 16.53), in the group of patients with depressive disorder ($n=18$) the mean ZCBS was 43.61 (SD 12.89) and for patients with bipolar disorder ($n=17$) the mean ZCBS was 55.76 (SD 13.19) ([table 2](#)). A statistical test is performed with ANOVA, showing significant differences between groups ($p=0.039$). Post-hoc HSD Tukey analyzes show significant differences between bipolar disorder group and the depressive disorder group ($p=0.04$). No significant differences are found between the other groups.

CONCLUSIONS

Caregivers of schizophrenia, depressive and bipolar disorder patients feel a considerable burden of care. Compared with other studies, in our sample we observed a higher caregiver burden than a study conducted in a similar geographic area (4), but less than one conducted in India (1). To take into account, in our study the ZCBS was administered to the caregivers on the last day of admission, when the patient presented clinical and functional improvement. However, more studies are needed to support these results.

CONFLICT OF INTERESTS: The authors have no conflict of interests to declare.

METHODS

Socio-demographic and clinical data were collected retrospectively at admission and discharge of all patients treated at HAD-CAEM between August 2018 to March 2022. Incomes of patients who met DSM-5 criteria for schizophrenia, bipolar disorder and major depressive disorder. Severity of disease and patient's level of functionality was evaluated with the global assessment of functioning scale (GAF) and the Clinical Global Impression Scale (CGI). Burden Caregivers was evaluated with The Zarit Caregiver Burden Scale (ZCBS). ZCBS was adapted and validated in Spanish (3). It explores the negative emotional, physical, social and economic effects on caregivers. Total scores range from 22–110. Statistical analysis was performed by using SPSS program.

Table 1. Socio-demographic and clinical characteristics of the sample

| | |
|--------------------------|---------------|
| Age, mean (SD) | 48.00 (18.47) |
| Gender, n (%) | |
| Women | 54 (49.5) |
| Male | 55 (50.5) |
| Diagnosis, n (%) | |
| Schizophrenia | 48 (44) |
| Depressive disorder | 28 (25.7) |
| Bipolar disorder | 33 (30.3) |
| Employment status, n (%) | |
| Student | 3 (2.8) |
| Unemployed | 36 (33.0) |
| Employed | 17 (15.6) |
| Pensioner | 29 (26.6) |
| Retired | 18 (16.5) |
| Live with, n (%) | |
| Alone | 12 (11.0) |
| Birth family | 43 (39.4) |
| Own family | 52 (47.7) |
| Study level, n (%) | |
| Primary | 42 (38.5) |
| Secondary | 56 (51.4) |
| University | 7 (6.4) |

Table 2. ZBI score

| | N | Mean | SD |
|---------------------|----|-------|-------|
| Schizophrenia | 22 | 46.14 | 16.53 |
| Depressive disorder | 18 | 43.61 | 12.89 |
| Bipolar disorder | 17 | 55.76 | 13.19 |
| Total | 57 | 48.21 | 15.11 |

SD: standard deviation; ZBI – Zarit burden interview.

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