

P01-395 - **STABILITY OVER TIME OF DIAGNOSES IN A CLINICAL POPULATION OF A PSYCHIATRIC CLINIC. PRELIMINARY FINDINGS**

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Introduction: Stability of psychiatric disorders has increased with the introduction of DSM-III and ICD-9 criteria. A scrutiny of these claims is important so as to ascertain possible disease co-morbidity or fluctuation of symptoms over time.

Objectives: To evaluate the long-term stability of psychiatric diagnoses given in first-time patients of an Acute Mental Ward of a Psychiatric clinic

Methods: We reviewed a total of 918 patients who received psychiatric care in the Acute Mental Ward of our Clinic from 2004 to 2009.

Results: As expected, results varied according to how many years have elapsed since the initial admission. The highest number of readmissions was in the 2004 group, with 61 patients out of 194 being readmitted since then and 20 of those having their initial diagnoses changed in some way. Stability of diagnosis in broad diagnostic categories (psychotic disorders, mood disorders, personality disorders, substance abuse) was generally high. Changes in diagnoses between admissions were mostly in cases with suspected bipolarity of affect, dual diagnosis in Axis I (severe mental illness concurrent with substance abuse) and/or personality disorders in Axis II.

Conclusions: The temporal consistency of mental disorders was moderate. Although initial and subsequent diagnoses tended to remain within the broad diagnostic category, cases with lability of mood, personality disorders, and those receiving dual diagnoses were problematic. The relative stability of diagnoses in the psychotic spectrum is most likely due to them being inpatients. The high number of re-admissions and subsequent changes in diagnosis necessitates further study.