

## PW01-91 - ITALIAN ELDERLY ADMITTED TO AN ACUTE PSYCHIATRIC UNIT: A CASE-CONTROL STUDY

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**Objectives:** Even if medical and psychiatric co-morbidity often overlap, specific combined medical-psychiatric units do not exist in Italy and elderly who need urgent psychiatric care are usually admitted in the Acute Psychiatry Unit of general hospitals despite many difficulties. The aim of this study is to describe this phenomenon.

**Methods:** 55 cases (>65 years) and 120 randomly selected controls (30-60 years), were picked-up among all patients hospitalized between 1<sup>st</sup> January-31<sup>st</sup> December 2008. Socio-demographic and clinical information were collected through the retrospective consultation of the case histories of all participants.

**Results:** Cases were significantly different from controls in terms of psychiatric background, medical history and medical pharmacotherapy: mood disorders (38.2%) and positive medical histories (81.8%) prevailed among elderly as compared to adult controls ( $p < 0.001$ ;  $p < 0.001$  respectively). The use of drugs (other than psychotropic ones) was four-fold more frequent in the elderly (74.5% vs 16.6%;  $p < 0.001$ ). Cases and controls used differently the service: elderly requiring more frequently medical pharmacotherapy (81.8% vs 27.5%;  $p < 0.001$ ), specialist consults (38.2% vs 11.6%;  $p < 0.001$ ), laboratory tests (76.4% vs 60%;  $p = 0.04$ ) and instrumental tests (chest radiography 9% vs 0.8%;  $p = 0.01$ ; brain neuroimaging 12.7% vs 2.5%;  $p = 0.01$ ). The multi-adjusted logistic regression analysis confirmed a different pattern of use of the acute psychiatric service for elderly as compared to adult controls.

**Conclusions:** Elderly have peculiar medical histories and distinguishing management needs, notably in the medical field. Our data suggested the need of a new clinical approach concerning combined psychiatric-medical inpatient acute units in Italy.