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LIAISON PSYCHIATRY: PATHOLOGY MEDICAL-PSYCHIATRIC CONCOMITANT TO THE COGNITIVE IMPAIRMENT

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1. Determine the prevalence of cognitive impairment in the population to study.

2. Determine treatment antidemential more prescribed in the population to study.

3. Determine the drugs more associated with the treatment antidemential.

4. Determine what is the pathology psychiatric more associated with cognitive impairment.

5. Determine the profile patient with cognitive impairment.

Method: A retrospective and observational study. Sample size of 2628 patients. The criterions for inclusion were: persons admitted to the HCUV in 2006-2010, assisted by the service of liaison psychiatry hospitalized and that gave the informed consent. Was carried out valuation neuropsychological (MMS and CDR). Diagnostic as DSM-IV-TR. Results: The prevalence of cognitive impairment was 15.2 %.

The specialties that most requested the service of psychiatry at link were: internal medicine: 31.6%; Traumatology: 11.9%; 83.6% had been hospitalized for somatic reasons 9,6% for psychiatric reasons. The most common psychiatric pathology was Delirium 32.9%; Adaptive Disorder 30.7%, Cognitive Impairment 15.2%. Out of the 15.2% of patients with dementia, 85% receives specific treatment with at least a drug antidemential. The most used was Citicoline85,3%. In 71% observed concomitantly neuropsychiatric symptoms :

Agitation(63,2%), anxiety(6,7%). The main associated treatments were Tiapride(70,1%) and Quetiapina and (21,9%).

Conclusions: The prevalence of cognitive impairment in patients of liaison psychiatry hospitalized in the HCUV is high, 15 %. The frequency grows up with age increases as well as the related medical pathology. In the specific treatment have been used mainly: Donepezilo, Rivastigmine [3] Memantine. The evolution of the patients was favorable in 88,9%.