Article: 1002

Topic: 47 - Emergency Psychiatry

SOCIODEMOGRAPHIC AND PSYCHOPATHOLOGICAL CHARACTERISTICS IN PSYCHIATRY EMERGENCIES: AN OBSERVATIONAL STUDY

M. Martínez Cortés, V. Pérez Maciá, B. Pecino Esquerdo, M.J. Serralta Gomis, A. Calvo Fernández, G. López Pastor, M.J. Bernabeu, E. Tercelan, L. García Fernández, M.A. Oliveras Valenzuela

SERVICIO PSIQUIATRÍA, Hospital San Juan de Alicante, San Juan de Alicante, Spain

Introduction: A psichiatric emergency is a situation where disorders of thought, mood or behavior are so disruptive that require immediate assistance.

Objectives: To analyze clinical and sociodemographic characteristics, predictors of hospitalization, and poli-attendance in patients attended in a reference area psychiatric emergency service.

Methodology: All assistances from 01.12.2011 to 31.01.12 were recorded in a database. Patient poly-attendance was defined by two or more assistances during the study period. Logistic regression analysis was performed to find out hospitalization and poli-attendance predictors.

Results: N = 219. 50.68% male, 49.32% female; 86.75% between 20-64 years. 45.62% finished primary studies. 80.82% owned social support network. 80.73% unemployed. 71.89% voluntary assistances. 58.97% already tracked by mental health, 24.66% first contact. Reason care: anxiety (24.20%), behavioral disorders (22.57%), suicide (20.55%) and psychosis (12.79%). Final diagnoses: psychosis (24.20%), anxiety (15.48%), depression (10.05%), drugs abuse (9.13%), personality disorders (17.35%), mental retardation (8.22%), social issues (16.89%).26.94% were poly-attendance, assisted by: organic mental disorder (OR= 21,10, IC95%), personality disorders (OR=4,313, IC95%), mental retardation (OR=5,545, IC95%), social issues (OR=2,94, IC95%). 24.20% of the patients hospitalized. Factors associated to risk: age range 15-20 (OR 12.10, IC95%); psychosis (OR = 51.03, IC 95%), depression (OR = 14.61, IC95%), bipolar disorder (OR=20,38, IC 95%).

Conclusions: Minor diseases, social issues or stables axis II disorders accomplished most attendances. Hospitalitation was associated with severe mental illness and lower age.Poly-attendance is not associated with axis I patology, but it is with axis II and IV disorders.