

P02-148

HOW DO WE RESTRAINT?

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Introduction: Restraints is the ultimate method of behavior control, which should be used when patients may be harmful to themselves or others, or when they remain agitated and noncompliant, and violence seems imminent. When used with a compassionate, humanistic approach, restraint can achieve a therapeutic outcome for the patient while protecting the safety of others. But how do we use restraints?

Aims: To asses restraint practice in our Clinic.

Methods: We assessed consecutively every restrained patient in period of 92 days (from 9.7. to 7.10. 2009.) and noted age, sex, duration, and time of beginning and ending of restraints, number of restraints, diagnoses, therapy, and reasons for restraints.

Results: We found that male patients were more often restrained. Also age span was pretty wide (from 14 to 70 years of age). Some periods of restraints were very long, the longest were 120 h. We also found interesting results considering time of beginning and ending of restraints.

Conclusions: The practice is different from theory. There are areas, in our restraints practice, that should be improved.