P-596 - INFLUENCE OF CLINICAL AND SOCIO-DEMOGRAPHIC FEATURES AMONG PATIENTS IN PSYCHIATRIC WARDS ON LEVEL OF PERCEIVED COERCION

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Coercion experienced by patients with mental disorders in psychiatric wards represents a controversial and highly debated topic, in which clinical and medico-legal issues coexist. A few studies have analyzed the relationship between socio-demographic and clinical characteristics and perceived coercion during psychiatric hospital admissions. This study, conducted within the EUNOMIA project on the evaluation of coercive measures in psychiatry in twelve European countries (Bulgaria, Czech Republic, Germany, Greece, Israel, Italy, Lithuania, Poland, Slovakia, Spain, Sweden, and United Kingdom), intended to assess:

- 1) the clinical and socio-demographic characteristics most frequently associated with higher levels of perceived coercion at admission:
- 2) the relationship between psychiatric symptoms and levels of perceived coercion.

Two thousand, eight hundred and fifteen patients, admitted in psychiatric wards, were consecutively recruited if they experienced high levels of perceived coercion, according to the McArthur Perceived Coercion Scale; 1997 patients have been re-assessed at three months. Perceived coercion, social functioning and psychiatric symptoms were investigated with previously validated assessment instruments.

In multivariate analyses, high levels of perceived coercion at admission were associated with legally involuntary admission, female sex, lower social functioning and positive symptoms. Perceived coercion significantly decreased at follow up. In particular, the improvement of social functioning and of positive symptoms was associated with a greater reduction of perceived coercion.

The results of this study suggest that pharmacological treatment of positive symptoms and psychosocial interventions are needed in order to improve the outcome of patients admitted to psychiatric wards.