

Figure 1 – Meta-analysis of the whole study.

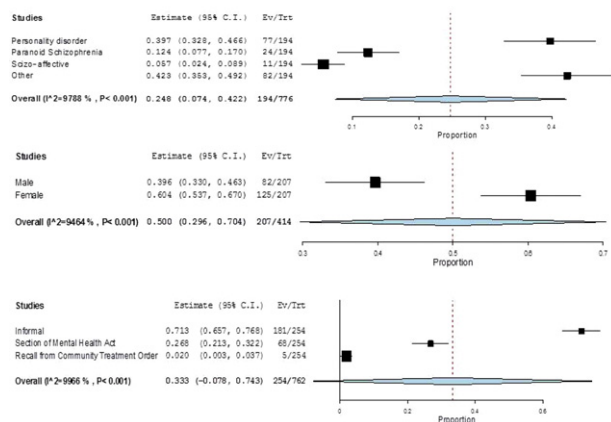


Fig. 1 Meta-analysis of the whole study.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW0422

Length of admission into psychiatric hospitals according to diagnoses

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Introduction In recent years, psychiatry in the United Kingdom has faced an important challenge due to the shortage of beds for patients with increased lengths of stay. Available resources have been saturated due to the reduced capability of psychiatric hospitals to provide spaces for patients needing access to psychiatric care.

Objectives This research provides a figure of length of stay linked to psychiatric pathology at discharge.

Aim To establish the length of admission of psychiatric patients.

Methods The sample comprised 137 discharges from a general adult psychiatric ward distributed over the first 8 months of 2016. Results were analyzed by descriptive statistics and meta-analysis.

Results Overall, longer periods of admission were recorded for psychoses and shorter periods for adjustment disorders. Psychoses had a median length of admission of 28 days (range = 3–374); borderline personality disorders, 10 days (range = 1–249); mood disorders, 14 days (range = 2–74); drug addictions, 6 days (range = 1–222); and adjustment disorders, 5 days (range = 1–55). Meta-analysis (Fig. 1) provided a confidence interval estimate for the whole model of 24.314 days (95% CI = 13.00–35.621) with $P < .001$. Meta-analysis results also provided $t^2 = 101.061$, Cochrane's Q ($df = 4$) = 14.327, $I^2 = 72.081$, with $P = .006$.

Conclusions Psychoses are conditions that require longer admissions, whereas adjustment disorders are more transient pathologies. Borderline personality disorder is somewhat of a hybrid condition. Overall, patients remain in hospital for about a month (24 days).

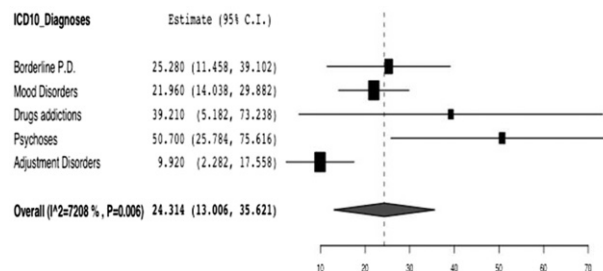


Fig. 1 Meta-analysis of length of admission in hospital according to diagnoses.

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Analysis of hospital admissions for psychiatric care in Portugal: Results from the SMAILE study

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Introduction Evidence shows that the prevalence and severity of mental disorders and the need for psychiatric admission is influenced by socio-demographic and contextual factors.

Objectives To characterize the severity of hospital admissions for psychiatric care due to common mental disorders and psychosis in Portugal.

Aims This retrospective study analyses all acute psychiatric admissions for common mental disorders and psychosis in four Portuguese departments of psychiatry in the metropolitan areas of Lisbon and Porto, and investigates the association of their severity with socio-demographic and clinical factors.

Methods Socio-demographic and clinical variables were obtained from the clinical charts of psychiatric admissions in 2002, 2007 and 2012 ($n = 2621$). The number of hospital admissions per year (>1) and the length of hospital stay (31 days) were defined as measures of hospital admission severity. Logistic regression analysis was used to assess which socio-demographic and clinical factors were associated with both hospital admission severity outcomes.

Results Results showed different predictors for each outcome. Being widowed, low level of education, being retired, having psychiatric co-morbidity, and a compulsory admission were statistically associated ($P < 0.05$) with a higher number of hospital admissions. Being single or widowed, being retired, a diagnosis of psychosis, and a compulsory admission were associated with higher length of hospital stay, while having suicidal ideation was associated with a lower length of hospital stay.

Conclusions Socio-demographic and clinical characteristics of the patients are determinants of hospital admissions for psychiatric care and of their severity.

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