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A Retrospective Study - Demographical, Clinical and Pharmacological Correlate of Seclusion, Self-Discharge, Physical Aggression and Use of PRN Psychotropics Within The First 72 Hours Of Admission in The Acute Psychiatric Unit in Saudi Arabia

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Abstract: Background & Objectives: Psychiatric disorders are common, affecting approximately one of five adults (17.6%) of the population. While most patients can be successfully treated as outpatients, admission to psychiatric wards is required during relapses or as part of crisis intervention. The first 72h of admission could be particularly critical due to increased risk of physical violence, non-medical discharge and absconding. Many patients requiring interventions such as seclusion, physical restrain, PRN psychotropic medications. This study aims to investigate the relationship between demographical, clinical and pharmacological factors in one hand and certain outcomes (physical aggression, use of PRN medications, need for seclusions and non-medical discharges) within the first 72hours of admission to acute psychiatric wards in KKUH/Riyadh Methods: All admissions to psychiatric wards over a 20 month period, between (May 2015- January 2017) were included. Data was collected on demographics, diagnosis, psychotropic medications prescription, documented physical aggression, and seclusion, selfdischarge and absconding. Results: 134 males and 171 females were admitted over the study period. Mean age was 34.2 years (SD 11.96).48.9% (n=149) were single and most patients (n=198) were either unemployed or in educations. Bipolar disorder was the most frequent diagnosis recorded on admission (39.3%, n=120); followed by Schizophrenia and related disorders (34.8%; n=106). Most patients (77.4%, n= 236) received regular psychotropic medications on admission. Vis a vis, 223 patients (73%) received PRN medications. Nominal regression model revealed positive relationship between "no psychotropics prescribed on admission" and self-discharge in women but not in men. No statistically significant relationship was found between age, gender, admission diagnosis and use of regular psychotropic medications on admission and need for seclusion, time spent in seclusion, documented physical aggression and use of PRN medications. Conclusion: Contrary to what is expected, our study does not show association between gender, physical aggression and need for seclusion. This could be due to poor documentation practices by nursing staff in male ward comparing with those in the female ward. Use of PRN psychotropics in the first 72 hours of admission was quite high possibly leading to a "ceiling effect". A limitation of this study is the retrospective data collection.

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