

Study of factors influencing involuntary admissions to a psychiatric department

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The purpose of this study was to compare involuntarily and voluntarily admitted psychiatric patients on demographic data and clinical characteristics. The study was prospective and was conducted in the First Psychiatric Department of Aristotle University of Thessaloniki, a clinic within the Psychiatric Hospital of Thessaloniki. We recorded demographic data (gender, age, marital status, education, occupation, and place of residence), clinical characteristics (diagnosis, duration of illness, number of previous voluntary and involuntary hospitalizations, and comorbid with substance abuse/dependence), and length of hospitalization for the present episode for 204 consecutive admissions (112 involuntary) over the course of 18 months. For the sample as a whole, committed patients were more likely to be single, diagnosed with schizophrenia and other psychotic disorders as well as bipolar disorder, self-employed and skilled or unskilled workers, and had been admitted involuntarily previously. The type of current admission correlated significantly with the number of previous involuntary admissions and marginally with diagnosis and occupation. When we analyzed the subgroup of patients admitted for the first time (48 involuntary and 30 voluntary), there was a trend for involuntarily admitted patients to have a diagnosis of schizophrenia and other psychotic disorders, bipolar disorder, and organic psychiatric disorders; diagnosis was not correlated with the type of admission. Length of hospitalization was significantly longer for involuntarily than for voluntarily admitted patients for the whole sample as well as for the subgroup of first admission patients. Primarily number of previous involuntary hospitalizations, and, to a lesser extent the diagnosis, seem to be two substantial factors that increase the possibility of an involuntary admission. Other factors (e.g., degree of family and social support, socioeconomic level) should be examined in the future in order to better describe those that contribute to a greater extent to the involuntary admission of psychiatric patients.

Key words: *involuntary hospitalization, psychiatric patients, demographic data, clinical characteristics.*

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