

THE ROLE OF LIAISON PSYCHIATRY IN THE GENERAL HOSPITAL

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Introduction: Few data are reported in medical journals about physicians perception in optimal care of mental health disturbed patients accessing emergency departments in general hospitals.

Aims: To investigate the subjective psychological burden and perception of proficiency in managing patients with somatic psychiatric comorbidities between physicians providing emergency care in County Emergency Hospital of Timisoara.

Methods: An anonymous multiple choice questionnaire was distributed to active medical personnel from emergency units in September 2012.

Results: 105 doctors answered- emergency unit 27, ICU 12, neurosurgery 15, trauma and surgical services 51. 38,1% declared at least a lifetime burn-out episode, 19% an episode last year, 69,5% declared they should request professional help. Psychiatric disturbances estimated in emergency care: dementia 1 out of 5 patients, depression 1: 4. Confidence rates in diagnosing dementia(%): very good 7,6, good 35,2, satisfactory 41,9, unsatisfactory 15,2; depression: very good 8,6, good 42,9, satisfactory 41, unsatisfactory 7,6. 78,1 respective 7,6% of the responders declared that mental health issues is insufficiently or not at all addressed in an emergency department. Disturbed mental status in patients was considered responsible for communication 89,5%, and treatment 85,7% difficulties, poor compliance 88,6%, and outcome 66,7%. 80% would appreciate a screening mental health program. 98,1% valued liaison psychiatrist collaboration.

Conclusions: By acknowledging the increasing incidence in mental health disturbances among patients accessing emergency services and their medical care management challenges, as well as their own psychological needs, medical and surgical professionals in SCJUT appreciate the active involvement of the liaison psychiatry department in emergency care.