Prevalence Of Agitation-hostility During Acute Episodes In Patients With Schizophrenia

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BACKGROUND
Prevalence data of aggressive behavior and its management in schizophrenia during acute episodes is scarce in Europe. The available data comes from studies conducted in small samples from single centers and do focus on pharmacological interventions.

OBJECTIVE
To document the prevalence of agitation-hostility among patients and management strategies in Spain.

METHODS
Cross-sectional survey during an hospital admission at specialized acute units. Selection criteria included patients with a diagnosis of Schizophrenia according to DSM-IV-TR criteria, attending the hospital for admission. Information regarding clinical profile, sociodemographic data, work status, severity of the disease by using the Clinical Impression of Severity Scale disease-specific (CGI-SCH) was collected. Aggression and hostility were recorded at admission by using the PANS-EC subscores, and aggressive behaviors during the hospitalization period by the Overt Aggression Scale (OAS). Therapeutically management was also recorded at three time points, at admission during hospitalization and at discharge. Prevalence data was adjusted by constituted communities population.

RESULTS
Fifty & three hundred patients were recruited by 200 clinicians from 120 specialized psychiatric units across the country. Agitation or aggression with aggressivity accounted for the reason for admission for most patients. According to clinicians’ opinion the main reason for the acute episode occurrence was non compliance with prescribed medication. Prevalence data for agitation with aggressivity in Spain was determined in 23.6% of the studied sample at admission and in 20.5% during post acute period. During the post-acute period, the most aggressive common episodes were verbal aggression or aggressivity to others as assessed by the OAS, and at low levels of intensity.

CONCLUSION
Prevalence data of agitation-hostility in patients in acute settings is valuable and represent a less percentage than the theoretical assumption. This comprehensive work could represent a basis for the development of a consensus guideline for clinical practice at specialized acute units.

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REFERENCES