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CLINICAL IMPROVEMENT AT DAY 3 AS FACTOR INFLUENCING LENGTH OF HOSPITAL STAY AND DISCHARGE OF PATIENTS WITH SCHIZOPHRENIA

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Introduction: The type of treatment used for patients with schizophrenia and an improvement at Day 3 can affect the length of stay and symptom outcome.

Objectives: To determine the influence of improvement at Day 3 in the length of hospital stay and hospital discharge in the case of patients with schizophrenia admitted to acute units.

Methods: A multicenter, naturalistic, retrospective study evaluating medical intervention in 1346 patients with schizophrenia in acute units in Spain.

Results: The mean of hospital stay days was 23.3 (range 1 -260 days).49.5% of patients with improvement at Day 3 had a shorter length of hospital stay.78.7% received treatment with antipsychotics prior to admission. The most common drugs were risperidone, olanzapine and quetiapine. 99.8% and 99.7% were treated during hospital stay and on discharge, respectively. The drugs most commonly used were paliperidone ER, risperidone and olanzapine.99.8% of patients with improvement measured by GCI at Day 3 and 100% with improvement at Day 5 had improved at discharge.The percentage of patients requiring use of benzodiazepines or physical / mechanical restriction decreased as the days passed.

Conclusions: The three most commonly used drugs during admission were effective, but the action of paliperidone ER is to be noted (its use increased from 4% prior to admission to 43% and 44% during hospital stay and on discharge, respectively).The results of this study appear to confirm that symptom improvement should be obtained as early as the first week of treatment to achieve a shorter hospital stay.