

**Predictors of Premature Treatment Discontinuation After Discharge in Posttraumatic Stress Disorder**

K. Lee<sup>1</sup>, M. Kim<sup>2</sup>, **W. Bahk**<sup>3</sup>, D. Jon<sup>4</sup>, Y. Kwon<sup>5</sup>, S. Lee<sup>6</sup>, B. Yoon<sup>7</sup>, W. Kim<sup>8</sup>, J. Seo<sup>9</sup>

<sup>1</sup>Psychiatry, College of Medicine Dongguk University, Gyeongju, Korea ; <sup>2</sup>Psychiatry, Jeju National University Hospital, Jeju, Korea ; <sup>3</sup>Psychiatry, Yeouido St. Mary's Hospital, Seoul, Korea ; <sup>4</sup>Psychiatry, Sacred Heart Hospital College of Medicine Hallym University, Anyang, Korea ; <sup>5</sup>Psychiatry, Department of Psychiatry College of Medicine Soonchunghang University, Cheonan, Korea ; <sup>6</sup>Psychiatry, Wonkwang University School of Medicine, Iksan, Korea ; <sup>7</sup>Psychiatry, Naju National Hospital, Naju, Korea ; <sup>8</sup>Psychiatry, Inje University Seoul Paik Hospital, Seoul, Korea ; <sup>9</sup>Psychiatry, Konkuk University Chungju Hospital School of Medicine Konkuk University, Chungju, Korea

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**Introduction:** Despite the advance in pharmacotherapy for posttraumatic stress disorder (PTSD), poor treatment adherence to pharmacotherapy for PTSD is a critical issue.

**Objectives:** We intended to evaluate the predictors of premature discontinuation of psychiatric outpatient treatment after discharge for noncombat-related PTSD.

**Aims:** This study aimed to examine the sociodemographic and disease-related variables associated with the premature discontinuation of psychiatric outpatient treatment after discharge among patients with non-combat-related posttraumatic stress disorder.

**Methods:** We retrospectively reviewed the medical records of patients who were discharged with a diagnosis of posttraumatic stress disorder.

**Results:** Fifty-five percent of subjects prematurely discontinued outpatient treatment within 6 months of discharge. Comparing sociodemographic variables between the 6-month non-follow-up group and 6-month follow-up group, there were no variables that differed between the two groups. However, comparing disease-related variables, the 6-month follow-up group showed a longer hospitalization duration and higher Global Assessment of Function score at discharge. The logistic regression analysis showed that a shorter duration of hospitalization predicted premature discontinuation of outpatient treatment within 6 months of discharge.

**Conclusions:** The duration of psychiatric hospitalization for posttraumatic stress disorder appeared to influence the premature discontinuation of outpatient treatment after discharge.