

## P-1227 - METROPOLITAN ACUTE HOSPITAL CARE IN PSYCHIATRY: MEASURING OUTCOMES

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**Introduction:** There is little, if any, guidance on how to define duration of acute admissions and how to measure their outcomes. The usefulness of widely used multidimensional scales, such as The Health of the Nation Outcome Scale (HoNOS), remains unclear.

**Objectives:** We are conducting this study to assess outcomes through different rating scales and measure their clinical applicability on a busy inner London all-male psychiatric unit.

**Methods:**

Sample: 40 inpatients with a psychotic disorder (F2-F3, ICD10).

Measures: HoNOS, Brief Psychiatric Rating Scale (BPRS) and Global Assessment of Function (GAF), administered both on admission and at 4 weeks or discharge, whichever occurs sooner.

**Results:** 13 male patients (age:  $36.8 \pm 10.1$ , range: 19-49) have already been recruited. On discharge HoNOS ( $8.38 \pm 6.2$ ), BPRS ( $26.9 \pm 10.0$ ) and GAF ( $57.5 \pm 13.3$ ) demonstrate a significant improvement (t test,  $p < 0.01$ ) in comparison with admission,  $13.6 \pm 7.0$ ,  $44.4 \pm 17.4$  and  $36.7 \pm 7.7$ , respectively.

We found no correlations between the scales on discharge.

A significant correlation ( $r=0.636$ ,  $p=0.02$ ) was found between HoNOS improvement and GAF improvement, yet we did not find significant correlations between either BPRS improvement and HoNOS improvement or between BPRS improvement and GAF improvement.

**Conclusions:** These preliminary results demonstrate that our patients improve over the first 4 weeks of admission. Clinical improvement may encompass two separate but related dimensions, psychiatric symptoms and social functioning. Further work is needed to clarify which scale captures these domains to best inform therapeutic and economic decisions such as length of admission.