

Psychiatric Hospitalizations in Times of a Pandemic: A Portuguese Experience

Hospitalizações Psiquiátricas em Tempos de Pandemia: Uma Experiência Portuguesa

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Studies have shown that patients with psychiatric pathology exacerbated their symptoms during the COVID-19 pandemic,¹ which, together with the decrease in programmed medical activity, could lead to a greater influx of patients to psychiatric acute care units.

A retrospective observational study was carried out to assess the impact of the first confinement due to the pandemic (18th March to 2nd May 2020) on psychiatric acute hospitalizations at Médio Tejo Hospital Center (CHMT), comparing with the same period of 2019. Data such as sociodemographic characterization, access to hospitalization, compulsory admissions, length of stay, discharge diagnosis, suicidal ideation, previous suicide attempts and post-discharge destination were extracted.

Regarding the results, there was a 59.5% reduction in the total number of hospitalizations compared to the same period of 2019. No significant variation was found regarding the sex or age of the patients (Table 1). In both years, the most common access route to hospitalization was through the emergency department (ED), with an increase in percentage terms in 2020. The percentage of compulsory admissions increased significantly in 2020, as did the average length of stay. The most common diagnostic category (according to ICD-10) in 2019 was F30-F39 mood disorders (44.3%), while in 2020 it was F20-F29 schizophrenia, schizotypal disorders, delusional disorders, and other psychotic disorders not related to mood (34.4%). The prevalence of suicidal ideation and previous suicide attempts did not vary

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TABLE 1. Sociodemographic and clinical characteristics of patients hospitalized in Médio Tejo Hospital Center between 18th March and 2nd May 2020 and the corresponding period of 2019.

Feature	2019	2020	Total	Test value and p-value (statistically significant for $p < 0.05$)
Number of hospitalizations	79	32	111	_____
Compulsory hospitalizations	9 (11.39%)	10 (31.25%)	19 (17.11%)	Statistically significant (z=-2.516; p=0.01174)
Duration of hospitalizations (average of days)	16.33	28.31	19.78	Statistically significant (t=-1.85412; p=0.033213)
Number of readmissions on the same year after discharge (average)	0.38	0.41	0.39	Not significant (t=-0.13596; p=0.446051)
Feminine	41 (51.89%)	13 (40.63%)	54 (48.65%)	Not significant (z=1.0764; p=0.28014)
Masculine	38 (48.10%)	19 (59.37%)	57 (51.35%)	
Age (average)	49.51	47.63	48.96	Not significant (t=0.53251; p=0.297728)
Suicidal ideation	31 (39.24%)	8 (25.00%)	39 (35.14%)	Not significant (z=1.4236; p=0.1556)
Previous suicide attempts	10 (12.66%)	4 (12.50%)	14 (12.61%)	Not significant (z=0.0227; p=0.98404)

significantly between the two years. Compared to the previous year, in 2020 there was a considerable reduction in the diversity of post-discharge destinations.

An important observation emerges from this study: the COVID-19 pandemic influenced psychiatric hospitalizations in CHMT. Initially, we had hypothesized that there could be a greater influx of patients to psychiatric wards. However, in our study we observed a decrease of 59.5% in the total number of hospitalizations. Possible reasons for this decrease would be: fewer patients referenced by means other than the ED such as outpatient psychiatric services, a decrease in the attendance to the ED by patients who did not seek medical care for fear of the pandemic, among other possible reasons.

The increase, both in the duration of hospitalization episodes and in the percentage of compulsory hospitalizations, leads us to suppose that a higher percentage of more seriously ill patients were hospitalized in 2020 than in the same period of 2019, which is also supported by the predominance of the F20-F29 diagnostic category.

Despite the confinement, the prevalence of suicidal ideation and suicide attempts did not vary significantly. However, we have only examined the period of the onset of the pandemic, so it may be premature to draw conclusions about the evolution of suicidal ideation and suicide attempts during the pandemic. Studies carried out

in developed countries suggest that there is no increase in suicide rates or even a decrease in the first months of the pandemic.²

Concluding, the pandemic had a considerable influence on psychiatric admissions, and the lack of accessibility generated by it led to a significant reduction in the number of admissions.

AUTHORS CONTRIBUTION/ CONTRIBUIÇÃO AUTORA

TA: Data collection, statistical analysis, draft of manuscript

AC: Draft of manuscript

MM: Data collection

TA: Recolha de dados, análise estatística, esboço do manuscrito

AC: Esboço do manuscrito

MM: Recolha de dados

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