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CORRELATION BETWEEN CLINICAL OUTCOME IN THE FIRST 5 DAYS OF TREATMENT AND ON HOSPITAL DISCHARGE IN PATIENTS WITH SCHIZOPHRENIA L. San-Molina<sup>1</sup>, G. Rubio<sup>2</sup>, I. Bernardo-Fernández<sup>3</sup>, S. Miguélez-Fernández<sup>3</sup>

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Introduction: In patients with acute clinical symptoms, a short hospital stay and prevalent therapeutic objectives aimed at controlling symptoms overcome the clinician's concern for the functionality levels that will be even more significant after discharge.

Objectives: To establish the clinical condition of patients admitted to acute/short-stay units in the first five days of hospital stay and on hospital discharge.

Methods: A multicenter, naturalistic, retrospective, observational study to evaluate clinical assessment (CGI) obtained in patients with schizophrenia after treatment at the time of admission and on hospital discharge.

Results: The mean score of the CGI questionnaire decreases from 5.3 recorded on admission to 4.3 on Day 5 and 3 on discharge. On Day 5 of hospital stay, symptoms had improved in 57.3% of cases. In 30.9% of cases there were no changes and in 1.7% symptoms had worsened. In 86.3% of patients symptoms had improved at discharge. 100% of patients with clinical improvement at Day 5 had a clinically significant improvement on hospital discharge.

Conclusions: Clinical improvement in the first five days after hospital admission appears to lead to a better clinical prognosis on hospital discharge. Hospital discharge should be scheduled from admission, so treatment choice should be geared to looking to control symptoms in the first few days and allow for better social and personal functioning after discharge.