

P03-187

IMPACT OF A MENTAL ILLNESS ON DIAGNOSIS AND MANAGEMENT OF COMORBIT MEDICAL CONDITIONS IN HOSPITALIZED PATIENTS WITH SCHIZOPHRENIA AND BIPOLAR DISORDER

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Co-morbid medical conditions such as hyperglycemia, diabetes, hypertension are frequent in psychiatric patients. Tragically, this population is less likely to receive necessary medical care during hospitalization and has higher rates of morbidity and mortality from medical illnesses when compared with nonpsychiatric population. The present study evaluated for diagnosis and management of comorbid medical conditions in hospitalized patients with and without mental illness.

Methods: The study group consisted of 200 hospitalized subjects, including 100 subjects with schizophrenia and bipolar disorder and 100 age-matched controls. All patients were evaluated for a comorbid conditions, concomitant medication, biochemical parameters (glucose, lipids, CRP) and blood pressure.

Results: Two groups were similar in terms of age, gender, blood pressure, glucose and lipids. The overall frequency of previously diagnosed medical conditions such as hypertension, dyslipidemia and diabetes was significantly lower in psychiatric patients compared with nonpsychiatric population, regardless of the similar presence of these conditions according NCEP criteria in two groups. Significantly fewer subjects in psychiatric group received aspirin, statins, antihypertensive and antidiabetic medications. Although more obesity was diagnosed in psychiatric patients; significantly less diet intervention has been performed during hospitalization. While significantly more smokers and more pulmonary hospitalization were in psychiatric group, fewer subjects in this group received instruction for smoking cessation compared with nonpsychiatric population.

Conclusions: Hospitalization is the opportunity to bridge the gap between mental and physical health. However, comorbid medical conditions such as diabetes, hypertension, dyslipidemia and obesity are frequently underdiagnosed and undertreated in hospitalized psychiatric patients compared with nonpsychiatric population.