

PSYCHIATRIC REFORM IN CRETE AND INCREASING TREND OF INVOLUNTARY ADMISSIONS

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Introduction: Deinstitutionalization in Crete, as part of the psychiatric reform, resulted in the closure of the only psychiatric hospital of the island in 2006.

Objectives: To explore the trends of yearly involuntary admissions in the Psychiatric Department of the University Hospital of Crete (PD/UHC) (2008-2011), the only inpatient public unit to receive involuntary admissions in a region of 400,000 residents, and the profile of the patients admitted.

Aims: To find possible associations between the closure of the Psychiatric Hospital in Crete and the number of involuntary admissions.

Methods: We examined the records of total and involuntary admissions in PD/UHC between 2008-2011. In a subset of 400 inpatients admitted between Nov/2011 and Aug/2012, sociodemographic/psychopathology parameters were also examined. Statistical analysis was conducted with chi-square and regression analysis models.

Results: Yearly involuntary admissions have increased by 245 % during a period of 4 years, with the number of total admissions having increased by 22 %.

Within the subset of patients admitted during the last year, involuntary admissions account for the 47 % of total admissions. Mean age of patients was 41.3 ± 1.38 years. Chi-square tests showed that male gender, aggression and positive psychotic symptoms at admission, absence of spouse/children are associated with involuntary admissions. Multivariate analysis revealed significant correlations for male gender and aggression.

Conclusion: Deinstitutionalization, i.e. closure of the only psychiatric hospital in Crete, has resulted in a significant and marked increase of involuntary admissions, a fact that also reflects the lack of community services and infrastructure.