

The “revolving Door Phenomenon” in an Acute Psychiatric Ward: a 5-year Retrospective Analysis

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Introduction

The term 'revolving door (RD) phenomenon' was coined to define recurrent hospitalizations of chronically ill patients after closure of psychiatric hospitals and implementation of community treatments.

Objectives

Continued readmissions require a large portion of Mental Health Departments' resources.

Aims

To analyze the RD phenomenon in an acute psychiatric ward during a 5-year period.

Methods

We retrospectively selected all patients with 3 or more hospitalizations per year from 01/01/ 2009 to 31/12/2013 in SPDC-Modena Centro. From their medical records we collected selected variables, potential predictors of RD phenomenon. Data were statistically analyzed.

Results

In the 5-year period, a sample of 105 patients (47 females, 58 males) with an average age of 40.25 years (\pm 13.47 SD), 5.68 % of all inpatients (n = 1850), realized 778 hospitalizations, 23.94 % of all admissions (n=3250). The most frequent reason for admission was 'worsening of psychiatric symptomatology' (55.27%). The most frequent diagnoses at discharge were 'Schizophrenia' (41.26%) and 'Personality Disorders' (25.32%). Most of RD patients (87%) were Italian, only 15 % were employed and 50 % lived with family. The mean duration of RD hospitalizations (12.23 days \pm 18.37 SD) was statistically significantly different from all others in the 5-year period (10.39 days \pm 11.09 SD, $p=0.0008$, t test) as was the frequency of compulsory admissions (RD hospitalizations 18% vs. 26% all others, χ^2 , $p<0.001$).

Conclusions

Our RD patients represented a small percent of all inpatients but required many and long hospitalizations, probably due to severe and disabling illness.