



# Psychiatric interventions: where are we?

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## INTRODUCTION

Our ambulance service Croce Verde Lugano (CVL) performs 10,000 interventions annually. 8-10% of interventions involve psychiatric patients with pre-hospital diagnoses such as hyperagitation, anxiety, psychosis and depressive states. They are often complicated and delicate cases that require significant time and resources, and require the involvement of various actors in addition to the emergency services, such as psychiatric specialists, family doctors, the police, the Regional Protection Authority (ARP), hospital emergency rooms and the Cantonal Psychiatric Clinic. In order to highlight the criticalities of the process and seek improvements in management, we decided to carry out an in-depth analysis of the case history.

## METHODS

We analyzed health records concerning interventions with a psychiatric case diagnosis in out-of-hospital health records for the first six months of 2019 comparing them with the first six months of 2021. We refrained from evaluating the same case records during 2020 as we believed that the data could be affected by the coronavirus pandemic and subsequent confinement. The choice to collect data only for the first half of the year is do to the workload necessary for the global analysis, incompatible with shiftwork and current resources. It was not possible, however, to refine the diagnostic aspects because this competence is unevenly distributed among the crew members.

LEGEND: A) period 1.1.2019 – 30.6.2019 **YELLOW**  
B) period 1.1.2021 – 30.6.2021 **ORANGE**

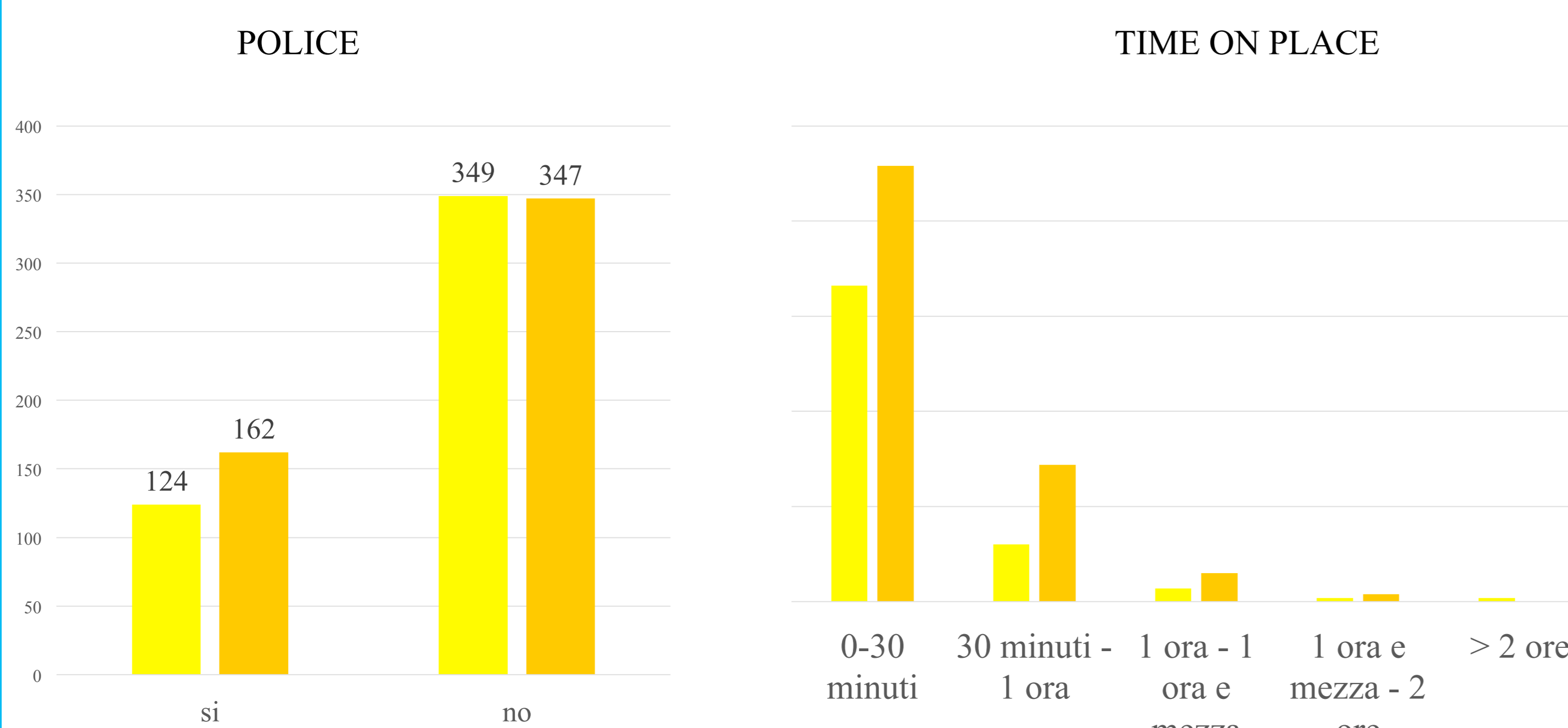
## Discussion & Conclusion

We analyzed the data of two half years and we can say that the two periods are comparable, if we consider 2020, the year of the pandemic, as only atypical year. In fact, although in 2021 we had 509 interventions compared to 473 in 2019 (7.6% more), most of the data, illustrated in percentage, is similar.

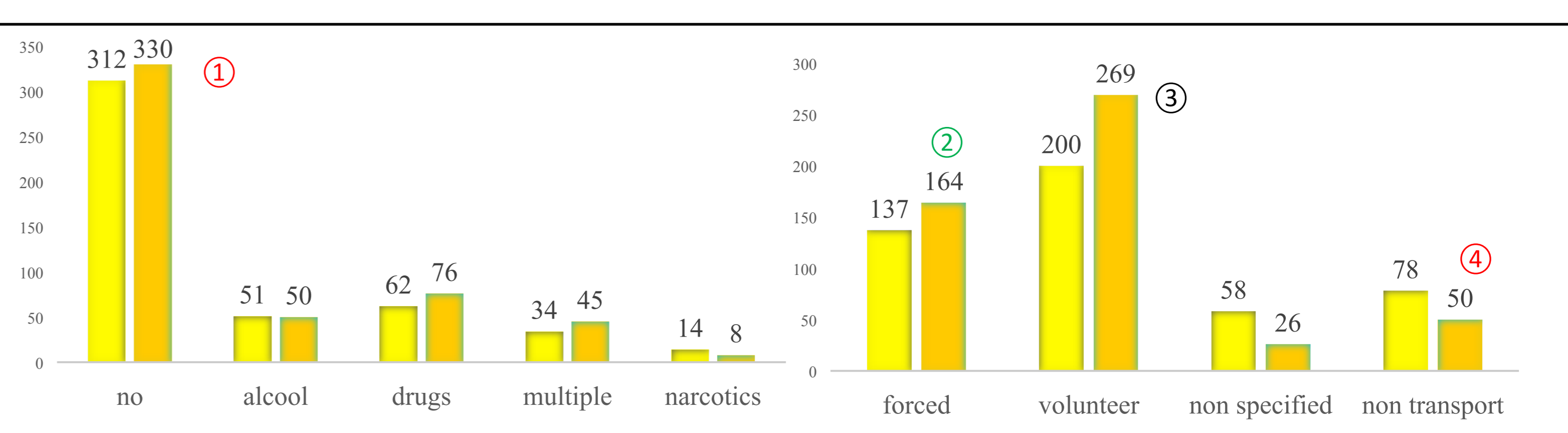
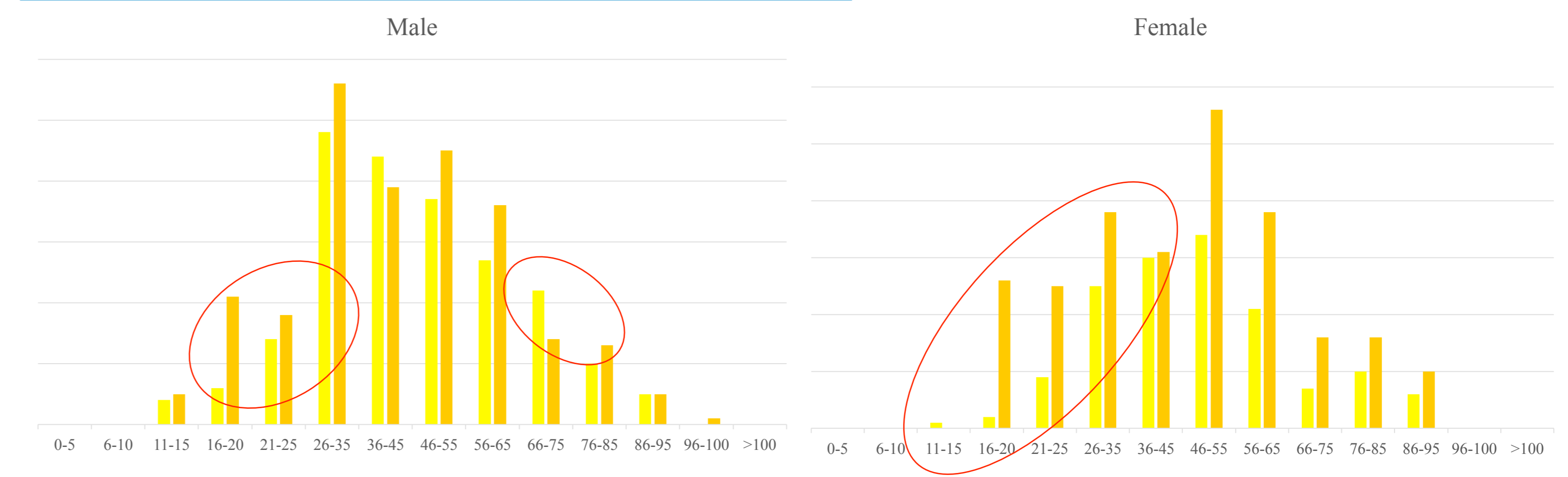
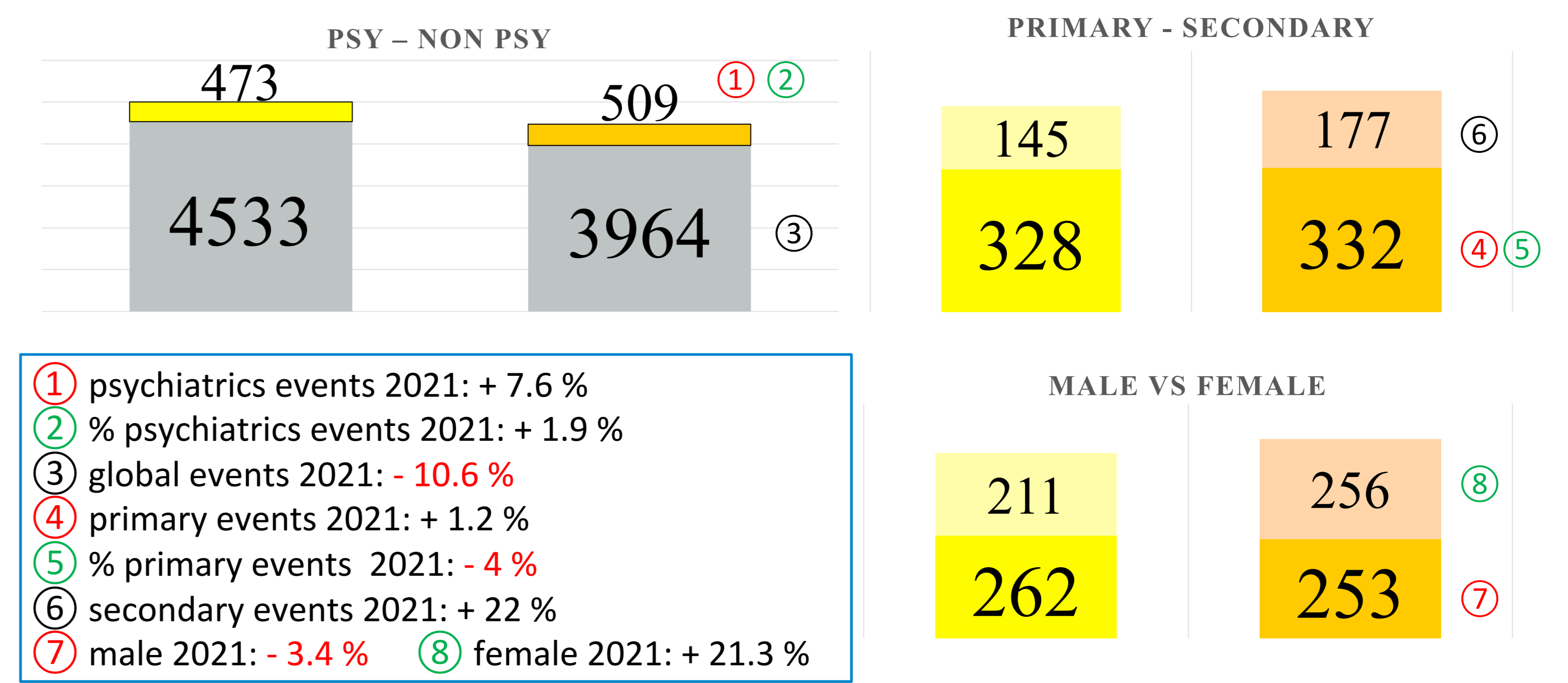
Instead we report the significant changes below:

- There has been an increase of about 20% in the number of female cases, especially referring to the age group 16-20 years old (+ 9%) and to that 21-25 years old (+ 3.5%). Even in the group of men, the 16-20 age group shows an increase (+ 5.5%) while in the 66-75 year-old and 36-45 year olds it decreased by 4.5%.
- The use by the patient of psychotropic substances before the emergency decreases in the series (-5.7%), in particular for alcohol (-1.6%), and narcotics (-42%), but drugs are a little more (+22%) and also multiple consumption (+32%).
- Forced hospitalizations are increasing (+19%), and we observed also a decrease in non-transported patients (-35%).
- As regards the coercion decision (forced hospitalization), that of the hospital doctor (+ 7%) and that of MLuga [ambulance doctor](+ 2.5%) are increasing, while that of the doctor of another structure is decreasing (-6%) and that already present (-4%).
- Restraint decreased by 27% (from 80 to 58), and consequently the use of sedative drugs also decreased.
- Usually we have a good collaboration with the police, and we have noticed an increase in their presence (+5.6%), roughly corresponding to the increase in forced hospitalizations.
- Last extracted data: the number of interventions lasting between half an hour and an hour increased by 8%, but the idea that each psychiatric event lasts a long time is not really exact.

After this analysis of psychiatric events we believe that spending a little more time in theoretical and practical training in the psychiatric sector will be a good investment.



## DATA and graphics



- ① no drugs events 2021: + 5.7 %
- ② % forced hospitalisation events 2021: - 5.5 %
- ③ % volunteer hospitalisation events 2021: - 2.2 %
- ④ % non transported events 2021: + 9 %

