

Analysing Changes in the Pattern of Psychiatric Admissions to Canberra Hospital During COVID-19

Jordan Barrett¹, Drew Richardson¹

¹ANU Medical School, Canberra, Australian Capital Territory

Introduction

- The COVID-19 lockdown period had a significant impact on psychiatric health, altering the pattern of Emergency Department (ED) admissions in the Australian Capital Territory (ACT).
- Lockdown periods have been associated with increased symptoms in patients with psychiatric conditions.¹
- Similar studies have shown a fall in both total ED and psychiatric ED presentations during the COVID-19 lockdown.²⁻⁴
- Despite this, there is little evidence regarding admission rates to psychiatric units during COVID-19.
- This paper sought to analyse and discuss the nature of the changes in these patterns.

Methods

- Total ED, and psychiatric admission numbers were collected on the emergency department information system over a 6-month period beginning 1 January 2020, to 30 June 2020.
- Data was divided into a lockdown (study) and pre-/post-lockdown (control) periods, based upon the period of lockdown within the ACT, spanning from 11 March 2020 to 5 May 2020.
- Data was analysed according to weekly trends in admission numbers during and outside the lockdown period with t-tests used to compare means.

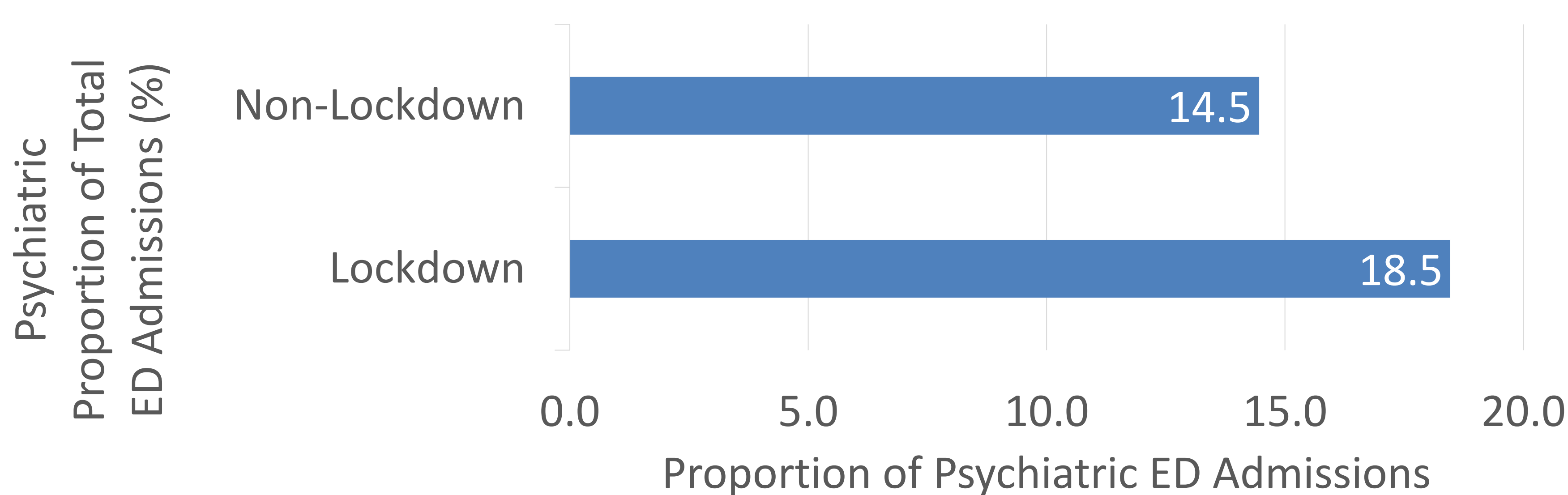


Chart 2. Change in the proportion of psychiatric ED admissions during and outside lockdown

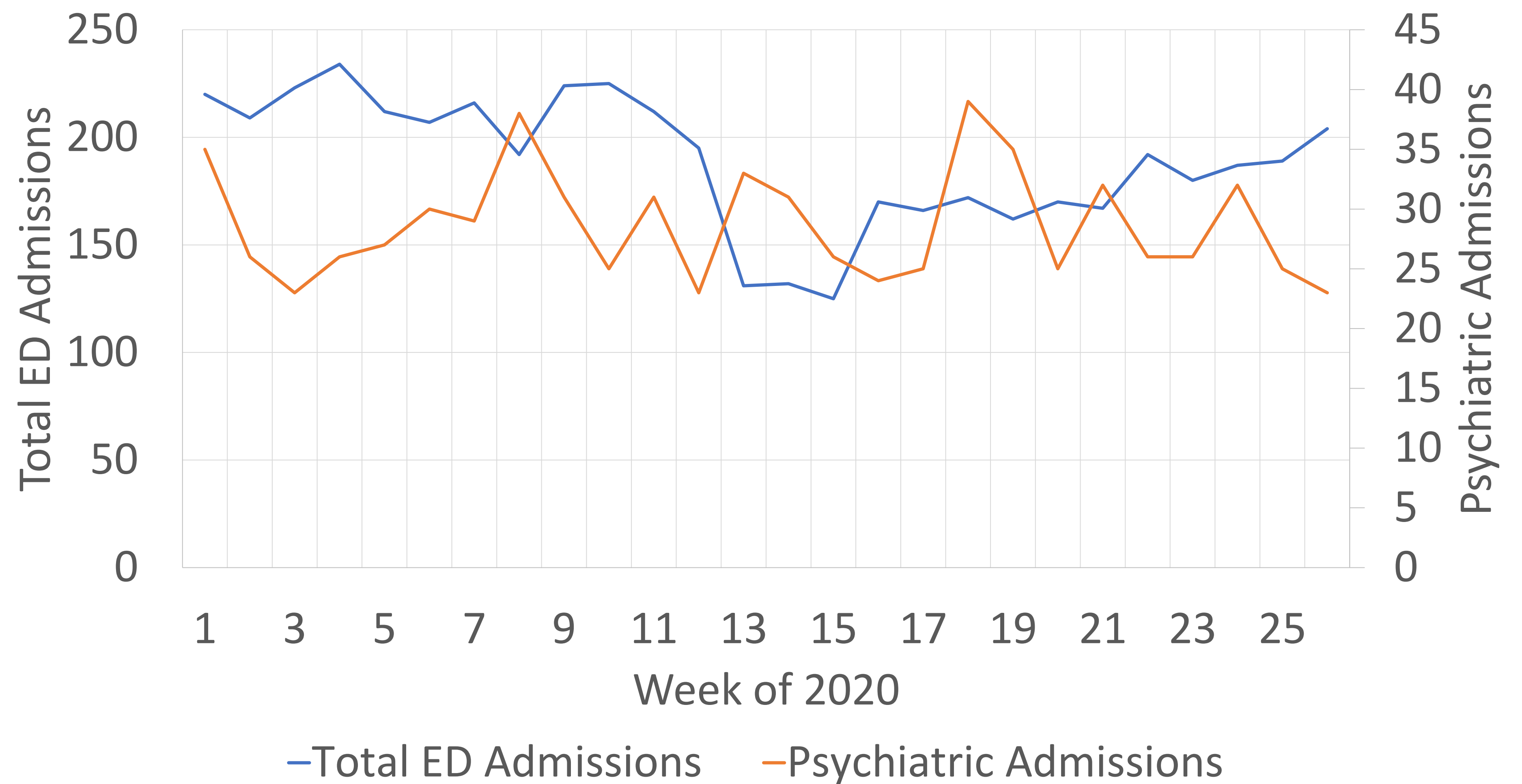


Chart 1. Total ED Admissions vs. Psychiatric Admissions

Results

- During the 6-month study period:
 - 4,916 admissions to the emergency medical unit (EMU) and 9,850 admissions to wards in total.
 - 946 psychiatric presentations booked for admissions, of which 746 patients were admitted from the ED to different psychiatric units.
 - An average of 1,315 presentations per week in the study period, and 1,642 presentations per week in the control period ($p < 0.001$) – 20% decrease in overall presentations.
 - Decrease in the average number of weekly ED admissions during the lockdown period compared to outside this period (200 vs. 163; $p = 0.003$).
 - 4% increase in the proportion of weekly psychiatric admissions compared to overall ED admissions during the lockdown period.

Discussion

- ED admissions fell significantly, but without a similar decrease in psychiatric admissions highlighting the importance of access to mental health services for vulnerable patients with psychiatric conditions during periods of lockdown.
- Fall in overall ED presentation numbers aligns with previous research outlining the effect of lockdowns on total ED visits.
- Further analysis is required to determine if there was any variation in the admission pattern of specific psychiatric conditions or symptoms during the COVID-19 lockdown.

Conclusions

- Emergency department admission rates fell during the COVID-19 lockdown while the number of psychiatric admissions remained the same, resulting in psychiatric admissions comprising a larger proportion of ED admissions.
- These findings suggest that COVID-19 lockdown stressors may contribute to psychiatric admission outcomes in patients.

References

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Australian National University