



Psychiatry department

Beni Suef University

PSYCHIATRIC EMERGENCIES

PSYCHIATRIC EMERGENCIES

- ✗ Psychiatric emergencies include the following conditions:
- ✗ 1- Suicide and parasuicide
- ✗ 2- Violence and excitement
- ✗ 3- Acute Organic Mental Disorders
- ✗ 4- Drug related emergencies
- ✗ 5- Complications of ECT

PATIENT



TRIAGE



**MINOR AND
SERIOUS SYMPTOMS**

**LIFE-THREATENING
SYMPTOMS**



ASSESSMENT

**CRISIS
STABILIZATION**



**DISPOSITIONAL
OPTIONS**



TREATMENT PLANNING

TABLE 1
Conceptual Model of the Emergency Interview of the Family

| Phase | Tasks Needing Attention |
|---------------------------------|---|
| I. Assessment | <p data-bbox="1006 301 1566 344"><i>Opening of the assessment</i></p> <p data-bbox="1051 354 1309 396">Engagement</p> <p data-bbox="1051 406 1416 449">Reducing anxiety</p> <p data-bbox="1051 459 1522 502">Identifying the request</p> <p data-bbox="1006 512 1831 612"><i>Traditional assessment of the identified patient</i></p> <p data-bbox="1051 622 1673 665">Organic differential diagnosis</p> <p data-bbox="1051 675 1870 775">Bizarre behavior and ability to care for self</p> <p data-bbox="1051 785 1605 828">Suicide/homicide potential</p> <p data-bbox="1006 838 1541 881"><i>Social context assessment</i></p> <p data-bbox="1051 891 1348 933">Social systems</p> <p data-bbox="1051 943 1348 986">Family system</p> |
| II. Problem Solving | <p data-bbox="1006 1005 1387 1048">Crisis intervention</p> <p data-bbox="1006 1058 1522 1100">Social-systems brokering</p> <p data-bbox="1006 1110 1450 1153">Therapy consultation</p> |
| III. Negotiation of Disposition | <p data-bbox="1006 1163 1773 1206">Preparing a frame for "the problem"</p> <p data-bbox="1006 1216 1377 1259">Decision to admit</p> <p data-bbox="1006 1269 1547 1312">Compliance with referrals</p> <p data-bbox="1006 1322 1271 1365">Taking leave</p> |

DRUG RELATED EMERGENCIES:

- × -Acute dystonia
- × - Neuroleptic malignant syndrome
- × -Hypertensive crisis
- × -Serotonergic syndrome
- × -Antidepressant overdose
- × -Lithium intoxication
- × - Anticholinergic overdose and delirium.

COMPLICATIONS OF ECT

- ✗ -Apnea
- ✗ -Fracture and dislocation
- ✗ -Arrhythmias and cardiac arrest

SUICIDE

- ✗ Suicide is a successful attempt to kill one self.
- ✗ It is an intentional self-inflicted death.
- ✗ Suicidal persons experience helplessness, hopelessness; and unending stress.
- ✗ Suicide is currently ranked as the 9th overall cause of death in USA

PARASUICIDE

- ✗ Unsuccessful suicide is called parasuicide.
- ✗ Deliberate self harm

ASSOCIATED RISK FACTORS FOR SUICIDE

- ✗ Age
- ✗ Sex
- ✗ Method
- ✗ Race
- ✗ Religion
- ✗ Marrital status
- ✗ Occupation
- ✗ Physical health
- ✗ Mental health
- ✗ Previous suicidal attempt

ASSOCIATED RISK FACTORS (IN USA)

Sex:

- ✗ Males commit successful suicide more than females (3:1)
- ✗ Females attempt suicide more than males (4:1)

Methods:

- ✗ Males use firearms, hanging, and jumping from high places.
- ✗ Females prefer poisons and drug overdose.

ASSOCIATED RISK FACTORS

Age:

- ✗ around the age of 30 years.
- ✗ The rate has increased by 30 %.
- ✗ In USA, suicide is now the third cause of death in the age group 15-44 after accidents and homicide.
- ✗ Older people attempt less frequently but more often successful.
- ✗ In USA, they are only 10% of the total population yet they account for 25% of successful suicides.

ASSOCIATED RISK FACTORS

Race:

- ✗ Whites form 2/3 of the cases. Suicide rate increases in immigrants.

Religion:

- ✗ Rate of Suicide in Catholics is less than in Protestants and Jews.
- ✗ Rate among Moslems is by far less.
- ✗ This reflects the importance of religious faith as a protection against suicide

ASSOCIATED RISK FACTORS

Marital status:

- ✖ Marriage and children lessen the risk of suicide 2:1 to those who are single.

Occupation:

- ✖ Work protects against suicide.
- ✖ The rate of suicide is higher in high socio-economic levels and the rate increases if there is a fall in the social status.

ASSOCIATED RISK FACTORS

Physical health:

- ✗ 32% of all people who commit suicide have been under medical attention.

Diseases in the CNS:

- ✗ epilepsy, multiple sclerosis, head injury, Huntington's disease, dementia & AIDS.

Endocrinal diseases:

- ✗ Cushing's disease, Klinefelter's disease and porphyria.

Gastrointestinal Disorders:

- ✗ Peptic ulcer and liver cirrhosis (may be related to alcohol dependence).

ASSOCIATED RISK FACTORS

Physical health:

✗ Urogenital Disorders:

Prostatic hypertrophy treated by prostatectomy, renal failure treated by dialysis (may be related to associated depression).

✗ Cancer anywhere especially cancer breast

✗ Certain medications as corticosteroids, anticancer drugs and antihypertensive drugs that may cause depression (e.g., serpasil)

ASSOCIATED RISK FACTORS

Physical health:

Medical conditions cause suicide because of the following:

- ✗ -Loss of mobility
- ✗ -Disfigurement
- ✗ -Chronic intractable pain
- ✗ -Disruption of relationships and loss of work

ASSOCIATED RISK FACTORS

- ✗ Previous suicidal attempt:
- ✗ A past suicidal attempt is the best indicator of a next attempt.
- ✗ The risk of a second attempt is highest during the next 3 months after a previous attempt.

ASSOCIATED RISK FACTORS

✖ Mental health:

95% of all people who commit or attempt suicide have a diagnosed mental disorder:

- ✗ depressive disorders 80%,
- ✗ schizophrenia 10%,
- ✗ dementia or delirium 5%,
- ✗ and alcohol or substance dependence 25%.



ASSOCIATED RISK FACTORS

- ✖ Psychiatric patients are at the risk of suicide 3 to 12 times greater than non-psychiatric patients.
- ✖ Hospitalized 5 to 10 times more than outpatients.
- ✖ They tend to be relatively of a young age and with chronic course of disorder.
- ✖ The first week of admission increases the risk of suicide.
- ✖ In the outpatient 3 to 4 times more than the general population

ASSOCIATED RISK FACTORS

- ✗ - Depressive disorders: suicide risk increases particularly early in the illness and during recovery and regaining power (paradoxical suicide). Depression carries a high risk of successful suicide.

ASSOCIATED RISK FACTORS

- ✗ - Schizophrenic patients: suicide may take place during the first years of illness, when accompanied with depressive symptoms, presence of suicidal ideations, and in socially isolated patients.

ASSOCIATED RISK FACTORS

- ✗ - Alcohol dependence: those who are complaining of depressive symptoms; and those who are isolated, single, impulsive, or violent.
- ✗ - Anxiety disorders:
20 % of patients with panic disorder and social phobia attempt suicide.
If depression is associated, the rate of successful suicide increases.

ETIOLOGY OF SUICIDE

Sociological Factors (Durkheim's Theory):

- ✗ Egoistic suicide
- ✗ Altruistic suicide
- ✗ Anomic suicide

Psychological Factors

Biological Factors



Sociological Factors (Durkheim's Theory):

- ✗ Egoistic suicide: applies to those who are not strongly
- ✗ integrated into any social group. Suicide represents a lack of empathy to the feelings of others who may suffer due to committing suicide or the lack of significant others. This explains the reduced risk in married people and in rural areas.

Sociological Factors (Durkheim's Theory):

- ✕ • Altruistic suicide: suicide stems from excessive integration into a group. Suicide is a manifestation of sacrificing oneself for the sake of others, or in response to a sense of guilt toward loved others

Sociological Factors (Durkheim's Theory):

- ✗ Anomic suicide applies to those whose integration into the society is disturbed so that they cannot cope with any drastic stress or socio-economic changes.
- ✗ Suicide is a manifestation of sense of loneliness due to social instability and breakdown of society's standards and values.

ETIOLOGY OF SUICIDE

- ✗ **Psychological Factors:**
- ✗ • **Freud's Theory:** Suicide represents aggression turned inward against an introjected, ambivalent love object.
- ✗ • **Menninger's Theory:** Suicide is an inverted homicide, where the patient's anger towards another one is directed to one's self.
- ✗ • **Aron Beck Theory:** It is hopelessness due to intolerable depression.
- ✗ • **Suicidologists:** It could be a wish of revenge, power, control, punishment, sacrifice, escape, or rebirth.

ETIOLOGY OF SUICIDE

✗ Biological Factors:

- ✗ • Genetics: Suicide runs in families, suicide risk in the 1st degree relatives of suicidal cases is 8 times greater than in the general population.
- ✗ • Neurotransmitters:
- ✗ Serotonin: There is a detectable decrease in the **5-HIAA** in the CSF of suicidal cases, reflecting reduced level of serotonin.
- ✗ There is increase in the ***free cortisol level***. Cortisol is a stress hormone.
- ✗ There is decrease in the ***mono-amine oxidase enzyme*** in neuronal synaptic clefts. This reflects a decrease in the turnover of NE, 5-HT and dopamine.

TREATMENT OF ATTEMPTED SUICIDE

- ✕ • Hospitalization
- ✕ • Pharmacotherapy according to the diagnosis
- ✕ • Electro-convulsive therapy
- ✕ • Psychotherapy
- ✕ • Hot lines for cases in crisis



VIOLENCE AND EXCITEMENT

The causes of violence and excitement are:

- ✗ 1- Delirium due to an acute organic mental disorder
- ✗ 2- Epileptic excitement
- ✗ 3- Acute intoxication with psychoactive stimulants, and withdrawal phase of psychoactive depressant substances
- ✗ 4- Schizophrenic excitement (catatonic, homicidal behavior)



VIOLENCE AND EXCITEMENT

The causes of violence and excitement are:

- ✖ 5- Mood disorders (agitated depression, bipolar disorder)
- ✖ 6- Other psychoses (delusional disorders, puerperal psychosis, infanticide)
- ✖ 7- Anxiety and Dissociative Disorders (panic, grief reaction, post-traumatic stress disorder, group crisis and hysteria)



MANAGEMENT



- ✗ The first priority is to ensure the safety of the patient, the society.
- ✗ This is produced by hospitalization in a secure place.
- ✗ Appropriate parenteral medications and physical restraints are essential.
- ✗ Avoid medications that cause hypotension (e.g., Valium) if acute organic mental disorders are suspected.
- ✗ Exclude organic mental conditions.
- ✗ Exclude substance related disorders.
- ✗ Treat the cause.



ENSURE SAFETY OF TREATING TEAM



THANK YOU

