

Poster presentation

## Depiction of schizophrenia treatment and use of healthcare resources in Greece

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from International Society on Brain and Behaviour: 3rd International Congress on Brain and Behaviour Thessaloniki, Greece. 28 November – 2 December 2007

Published: 17 April 2008

*Annals of General Psychiatry* 2008, **7**(Suppl 1):S224 doi:10.1186/1744-859X-7-S1-S224

This abstract is available from: <http://www.annals-general-psychiatry.com/content/7/S1/S224>

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### Background

Detailed data concerning the distribution of patients with schizophrenia across healthcare settings, their corresponding use of healthcare resources and medication received is limited. In this study, we aim to explore psychiatrists' perceptions of clinical practice across healthcare settings in a sample of Greek psychiatric services.

### Materials and methods

63 Psychiatrists (59 Private Practice, 4 University Hospitals) completed structured anonymous questionnaires between October - December 2006. Outcome measures included disease burden, prescription and treatment patterns for the management of schizophrenia.

### Results

The distribution of patients treated in private practice versus hospital setting differs significantly across the three phases of schizophrenia; acute (12% vs 5,3%), maintenance (68,6% vs 60,42%) and relapse (19% vs 34,24%) phase respectively ( $p < 0.001$ ), with hospitals demonstrating higher case severity ratings and inpatient average length of stay of 52 days for first episode and 30 days for management of relapse. Office-based psychiatrists present a lower rate (17,8%) of dropouts, defined as patients institutionalized / hospitalized within the past year, as opposed to clinic-based psychiatrists (31,2%), independ-

ently of case severity and visit frequency. Stable phase patients on maintenance therapy are monitored more closely in private than hospital practice (32 vs 49 days, respectively). Psychiatrists perceived that conventional and atypical antipsychotics are equally used as first-line choice for acute cases, with a high rate of concomitant antidepressants.

### Conclusions

The distribution of patients and the prescription and treatment patterns seem to be different across various healthcare settings, with prevailing of the private setting in the management of acute phase and patient control, and the hospitals in relapses.