

Poster presentation

## Physiological conditions in chronic schizophrenic patients in relapse on emergency admission

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from International Society on Brain and Behaviour: 1st International Congress on Brain and Behaviour Hyatt Regency Hotel, Thessaloniki, Greece, 20–23 November, 2003

Published: 23 December 2003

Received: 1 November 2003

*Annals of General Hospital Psychiatry* 2003, **2**(Suppl 1):S61

This article is available from: <http://www.general-hospital-psychiatry.com/content/2/S1/S61>

### Background

The purpose of our study was to investigate the varieties, incidence and differences of abnormal physiological conditions in chronic schizophrenic patients with prominent positive and negative symptoms in relapse.

### Materials and Methods

Laboratory data (Na<sup>+</sup>, K<sup>+</sup>, complete blood count, BUN, total protein, SGOT, SGPT) obtained prior to treatment from 76 patients (62 male, 14 female, mean age 36.44 ± 2.29) who were admitted involuntarily in acute psychiatric admission ward "Agia Markella", during a 6 month period (June 2002 to December 2002) were evaluated.

All the patients were diagnosed as suffering from chronic schizophrenia, according to DSM-IV criteria without other concurrent psychiatric or somatic disorders.

After evaluation of psychopathology symptoms using the PANSS scale, patients were classified in Group A (46 patients, 38 male, 8 female) with prominent positive symptoms and Group B (30 patients, 24 male, 6 female) with prominent negative symptoms. Statistical evaluation was performed using chi-square test and t-test.

### Results

Group A patients presented statistically significant higher frequency of dehydration, hypokaliemia and leukocytosis as illustrated in Table 1. Assessment of dehydration was based on laboratory values.

### Discussion

Chronic schizophrenic patients in relapse that require involuntary admission frequently present problems regarding their physical condition. Patients with prominent positive symptoms tend to present with greater degree of abnormalities as dehydration, hypokaliemia and leukocytosis. This is mainly due to physical exhaustion, psychotic excitement, agitation and decrease of water and food intake.

Relevant studies from international literature support our findings and suggest that our drug related therapeutic interventions, should be very cautious and under close surveillance, in order to avoid adverse effects due to drug related pharmacokinetic abnormalities.

**Table 1: Laboratory values in chronic schizophrenic patients in relapse at emergency admission**

	Hypernatremia (Na <sup>+</sup> > 147 mEq/l)	Hb >15.1 g/dl	Total protein >8.3 g/dl	BUN >22 mg/dl	Hypokaliemia (K <sup>+</sup> < 3.6 mEq/l)	Leukocytosis (WBC >10,300)
Group A (positive symptoms)	8.69%*	39.13%*	21.7%	21.7%*	21.73%*	17.39%*
Group B (negative symptoms)	0%*	6.66%*	6.66%*	6.66%*	13.33%*	6.66%*

\*p < 0.001