

First North American study to look at ED use by adults with intellectual disabilities

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In the first North American study to examine population rates of Emergency Department (ED) use for adults with intellectual and developmental disabilities (IDD), researchers from the Institute for Clinical Evaluative Sciences (ICES) and the Centre for Addiction and Mental Health (CAMH) found 55 per cent of adults with IDD and mental illness visited the ED at least once in a 2 year period and 15.6 per cent visited at least 5 times.

"A lot of attention has been paid to emergency department use in adults with [mental health issues](#). Our study shows that those with an intellectual or [developmental disability](#) such as [Down Syndrome](#) or [autism](#), on top of their [mental health](#) issue are even more likely to use the Emergency Department, and that they use it more often. We need to pay more attention to how we serve this vulnerable group both in and out of the hospital," says lead author Yona Lunskey, Clinician Scientist at CAMH and Adjunct Scientist at ICES.

The study of 43,549 adults with IDD done in Ontario between date April 1, 2007 and date March 31, 2009 found:

- Adults with intellectual and developmental disabilities (IDD) are more likely to use an ED than those without IDD
- Adults with IDD and psychiatric disorder ("dual diagnosis") are more likely to use the ED than those with IDD and no psychiatric disorder

- 44 per cent of those with IDD visited an ED at least once in a 2 year period and 8.5 per cent visited at least 5 times
- 55 per cent of those with IDD and [mental illness](#) visited ED at least once in a 2 year period and 15.6 per cent visited at least 5 times.

"The concern with this population is that their health needs are being met in the Emergency Department so they use it more frequently. And this is most unfortunate because the [Emergency Department](#) visits can end up being stressful for everyone. This indicates the need to improve primary care and social services in the community," says Paul Kurdyak, Adjunct Scientist at ICES and psychiatrist in the ED at CAMH.

"My sense is that most often people with IDD will see a family physician in the ED. Family physicians are most likely to focus on urgent physical health issues and, if none is identified, discharge the person to follow-up with his or her community family physician. Cognitive function is not routinely screened, as are vital signs, so the family physician might not even be aware that the person's visit is related to his or her intellectual and developmental disabilities and/or possible psychiatric issues. When these issues are missed, frequent return visits may simply mean that the needs of the person with intellectual and developmental disabilities were unmet. The other concern is the over-use of antipsychotic medications and that these may be started in the context of an ED visit," says Dr. Bill Sullivan, primary care physician at St. Michael's Hospital.

More information: The study "Are adults with developmental disabilities more likely to visit EDs?" is in the May, 2011 edition of *American Journal of Emergency Medicine*.

Provided by Centre for Addiction and Mental Health

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