

ERs often 'safety net' care for people with schizophrenia: CDC

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Report finds more than 380,000 ER visits over 2 years for adults under 65.

(HealthDay)—A new report finds that, too often, under-medicated Americans suffering from schizophrenia end up seeking care in the nation's hospital emergency rooms.

The report, issued Wednesday by the U.S. Centers for Disease Control and Prevention, found that between 2009 and 2011, over 382,000 visits to ERs were recorded for people aged 18 to 64 with schizophrenia.

Many of these cases involved people on Medicaid who were either homeless or living in places such as nursing homes or group homes, the researchers said.

Emergency departments "may serve as a safety net for schizophrenic

patients not otherwise receiving care," said Dr. Michael Albert and Linda McCaig, both of whom work at the CDC's National Center for Health Statistics (NCHS).

Mental health expert Dr. Michael Birnbaum said the new findings were "not surprising."

"Unfortunately many people with mental illness—and in particular individuals with schizophrenia—across the United States receive inadequate psychiatric and physical health care," said Birnbaum, who directs the early treatment program at Zucker Hillside Hospital in Glen Oaks, N.Y.

"Given limited access to quality psychiatric care, as well as limited insurance coverage, individuals who are most at risk, such as individuals with schizophrenia, end up in the emergency room at times of crisis," he said.

According to the U.S. National Institute of Mental Health (NIMH), schizophrenia is a "chronic, severe and disabling" disorder affecting about 1 percent of Americans. Often, the condition involves sensations such as "hearing voices," paranoia and other effects that "terrify people with the illness and make them withdrawn or extremely agitated," the NIMH said.

The new study used 2009-2011 hospital visits data from medical centers across the United States. It found that, for patients aged 18 to 64, men had double the rate of visits to an ER for schizophrenia compared to women.

The rate of homelessness in this patient population was also high. According to the report, 7.5 percent of visits to emergency rooms for schizophrenia were made by homeless people, compared to less than 1

percent of visits made for other conditions.

The percentage of ER visits linked to schizophrenia that involved people living in non-private residences—places such as [nursing homes](#), psychiatric hospitals, group homes, prisons and assisted-living centers—was also much higher when compared to ER visits for conditions other than schizophrenia, the researchers said.

Also, people who suffered a schizophrenia-linked crisis who were cared for in an emergency room were much less likely to have that care paid for by private insurance, Albert and McCaig found.

For example, Medicaid was the method of payment in more than 40 percent of such cases, compared to about 23 percent of ER visits that did not involve schizophrenia, according to the report published in the September issue of the CDC's *NCHS Data Brief*.

The CDC report found that a schizophrenia-linked visit to the ER often meant at least temporary institutionalization. For example, nearly one-third of such cases were admitted to the hospital, and nearly 17 percent of patients were transferred to a psychiatric hospital—rates that were much higher than ER visits for other causes.

Dr. Jeffrey Borenstein is president of the Brain & Behavior Research Foundation in New York City, which supports research into illnesses such as schizophrenia.

Borenstein believes that a multipronged approach can curb the use of hospital ERs as a last-resort "safety net" for people with the illness.

First, "we need to improve our [health care] system so that people with schizophrenia have appropriate access to outpatient care on an ongoing basis," he said. "We also need to improve the availability of housing,

including supportive housing, to reduce the number of homeless people with schizophrenia who end up in the ER," he added.

"Finally," Borenstein said, "we need to continue working to develop new and improved forms of treatment, including medicines and other therapy to help people with schizophrenia lead productive lives."

Birnbaum agreed.

"Mental and physical health care for individuals with [schizophrenia](#) must be easily accessed and affordable to all," he said. "They must be integrated to ensure that individuals most at risk receive quality [health care](#)."

More information: For more on schizophrenia, head to the [U.S. National Institute of Mental Health](#).

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