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## BACKGROUND

US psychiatric emergency visits account for 4.3 million annual emergency department (ED) visits.<sup>1</sup>

Agitation is a common presenting feature in the emergency setting. Data suggest more than a million annual ED visits for agitation in patients with schizophrenia or bipolar disorder.<sup>2,3</sup>

Agitation complicates as many as 2.3% of ED visits.<sup>4</sup>

Claims data demonstrate that 12% of patients account for 54% of agitation episodes.<sup>5</sup>

ED visits in patients with schizophrenia or bipolar disorder who require treatment for acute agitation have not been characterized previously.

## OBJECTIVE

To characterize ED visits by patients with schizophrenia or bipolar disorder where acute agitation required treatment

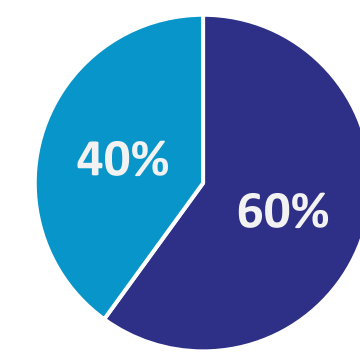
	Schizophrenia (n = 121)	Bipolar Disorder (n = 81)
202 patient records were abstracted from 4 sites		
Male	63%	51%
Mean Age (years)	41	38

## METHODS

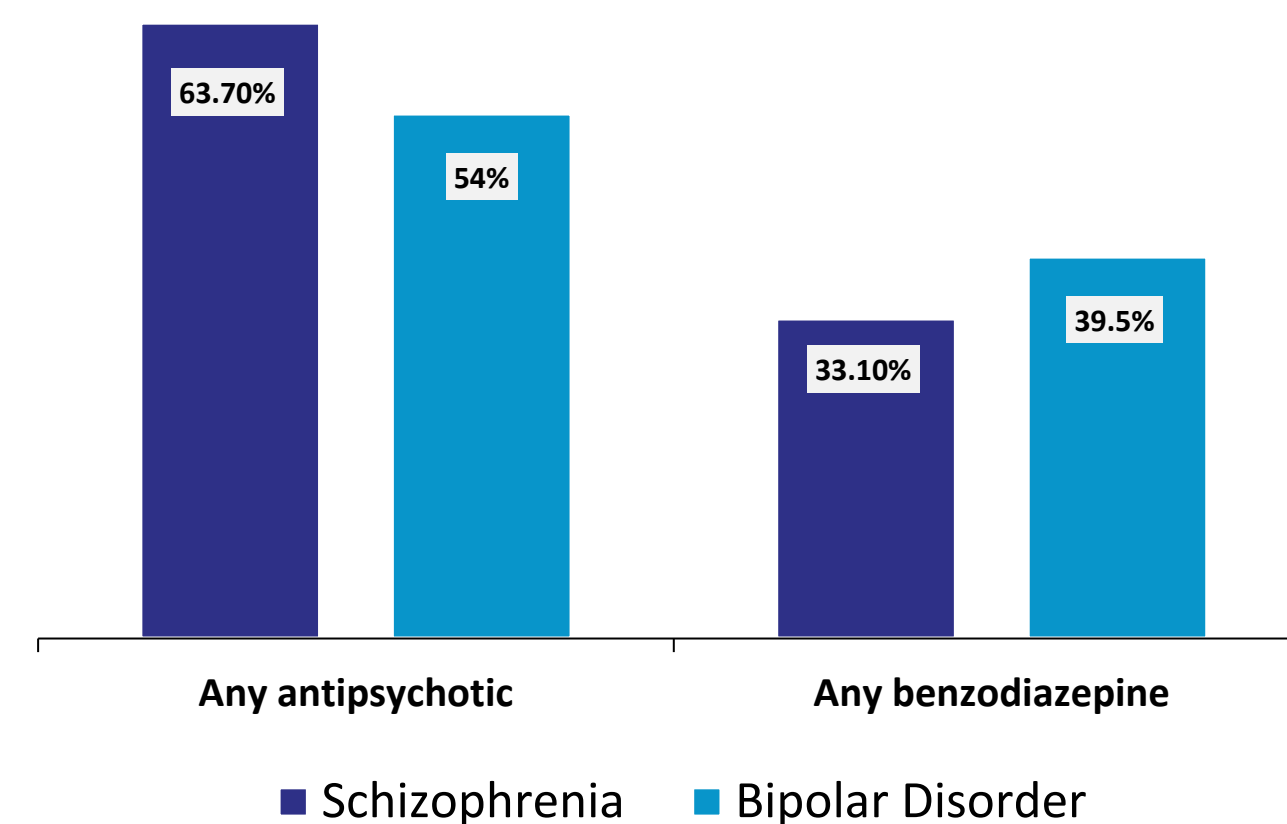


- Retrospective chart review.<sup>6</sup>
- 2 Year Span: January 2019 - December 2020
- Patients 18 to 75 years presenting to hospital-based EDs
- 4 US research sites in the Southwest, Southeast, and Midwest
- Individuals diagnosed with acute agitation and either schizophrenia or bipolar disorder who require intervention
- Data extracted from EPIC Electronic Health Record (EHR).
- Medication use, physical restraint, and patient disposition data abstracted
- Data separated into 2 cohorts by diagnosis
- Descriptive statistics generated for extracted data

### Diagnoses



■ Schizophrenia ■ Bipolar Disorder



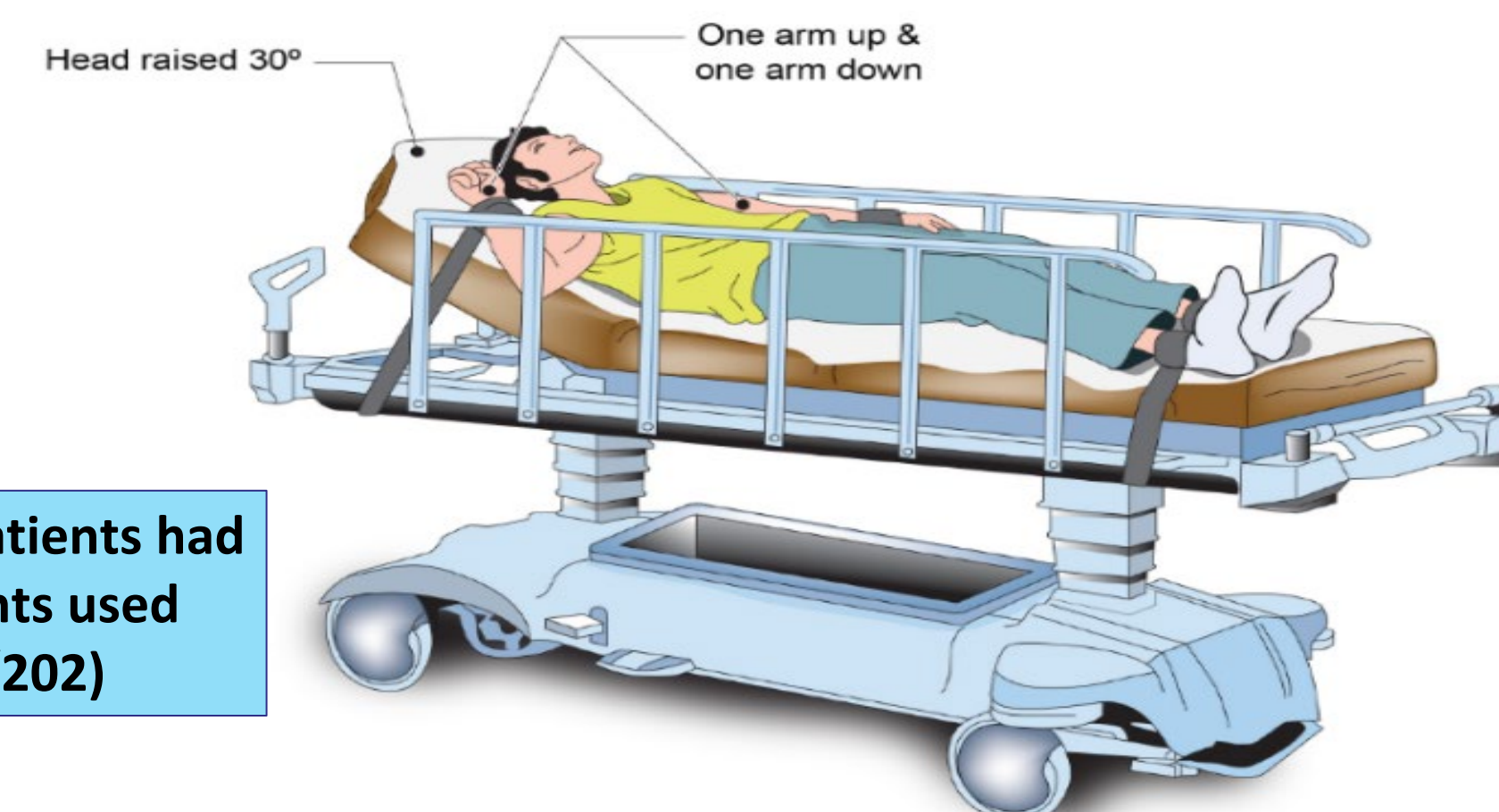
■ Schizophrenia ■ Bipolar Disorder

## RESULTS

Pharmacologic Treatments With >10% Rate of Administration	SCZ n (%)	BPD n (%)
lorazepam IM	20 (16.5%)	21 (25.9%)
haloperidol IM	19 (15.7%)	16 (19.7%)
olanzapine IM	18 (14.9%)	16 (19.7%)
lorazepam oral	19 (15.7%)	13 (16.0%)
olanzapine ODT	19 (15.7%)	12 (14.8%)
Mode of Administration of All Pharmacologic Treatments*		
Oral	60 (49.6%)	29 (35.8%)
IM	44 (36.4%)	47 (58.0%)
Intravenous/IV Push	5 (4.1%)	1 (1.2%)
Restraints		
Restraint Use	34 (28.1%)	21 (25.9%)
Patient Disposition (N=202)		
Home	75 (62%)	46 (56.8%)
Admitted	27 (22.3%)	29 (35.8%)
Transfer to Different Hospital	10 (8.3%)	3 (3.7%)
Observation or Crisis Center	6 (5%)	2 (2.5%)
Discharged AMA	2 (1.6%)	1 (1.2%)
Prison	1 (0.8%)	0

\* Patients who were administered multiple medications by the same mode were counted once in each mode. Patients who received medications by multiple modes were counted once in each mode.

27% of patients had restraints used (55/202)



## KEY POINTS

- ❖ Individuals with schizophrenia made up a larger percentage of agitated ED patients (60% v 40%) than those with bipolar disorder.
- ❖ In the schizophrenia cohort, the oral route of administration appeared to be preferred over IM and IV. Within the bipolar disorder cohort, the preference appeared to be for IM.
- ❖ 38% (77/202) required admission or further hospital treatment.
- ❖ Restraints were used in over 25% of patients in both diagnostic groups.
- ❖ Data from these 4 centers in the US (SW, SE, and Midwest) may be representative of acute agitation management in other US EDs.
- ❖ Improved management strategies for acute agitation in patients with schizophrenia or bipolar disorder should be sought to reduce invasive treatment, physical restraint use, and hospital admissions.

### References

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