The role of inpatient care in the treatment of people with a severe mental disorder has changed considerably throughout the past decades. This development has been driven primarily by psychiatric reforms intended to prevent long-term residential care and to integrate the mentally ill into the community at large. As acute inpatient care commonly absorbs the biggest share of the mental health care budget, these changes in care provision might also be understood as a result of the growing pressure to cut health care costs. As a consequence, the number of psychiatric beds has markedly declined in many European countries – since 1980 in Switzerland it has declined by almost half. Long-term studies on the impact of these health care changes for the severely mentally ill, however, are still scarce and few attempts have been made to examine which patient groups were most affected.

This epidemiological study investigates the use of inpatient psychiatric services by people with schizophrenia, compared to people with other mental disorders. The study includes all patients aged 15 to 80 years residing in the Canton of Zurich, Switzerland, who had been admitted to a psychiatric hospital between January 1977 and December 2004. Data is drawn from the central psychiatric register (PSYREC) that covers all mental health services in the Canton of Zurich, a catchment area of about 1.2 million people. In total, this sample comprises 141'360 inpatient episodes.

Data is analysed in terms of (1) the number of inpatient admissions per year, (2) the median length of individual inpatient episodes and (3) the patient-years in treatment. To relate this indicator to the reference population, (4) treatment prevalence is calculated by dividing the annual number of patient-years for each diagnostic group by the number of the population at risk. Time trends of treatment prevalence are compared across seven diagnostic categories accounting for effects of age and gender.

Trends in psychiatric hospitalisation of people with schizophrenia: a register-based investigation over the last three decades

Summary / Zusammenfassung

The role of inpatient care in the treatment of people with a severe mental disorder has changed considerably throughout the past decades. This development has been driven primarily by psychiatric reforms intended to prevent long-term residential care and to integrate the mentally ill into the community at large. As acute inpatient care commonly absorbs the biggest share of the mental health care budget, these changes in care provision might also be understood as a result of the growing pressure to cut health care costs. As a consequence, the number of psychiatric beds has markedly declined in many European countries – since 1980 in Switzerland it has declined by almost half. Long-term studies on the impact of these health care changes for the severely mentally ill, however, are still scarce and few attempts have been made to examine which patient groups were most affected.

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Publications / Publikationen


Keywords / Suchbegriffe

Psychosis, Schizophrenia, Epidemiology, Treatment prevalence, Hospitalisation, Mental health services

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