Factors Predicting the Presence of Impaired Insight in Liaison Psychiatric Patients Presenting to the Emergency Room

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Objective

To examine the factors that can predict the likelihood that a patient presenting to the Emergency Room will have impaired insight.

Methods

Twenty-two independent demographic and clinical factors contained on data assessment tools for 337 patients assessed by the crisis team in the ER over 6 months were compiled and analysed using SPSS Version 20 with univariate analyses and logistic regression.

Results

Only four (employment status, history of self-harm, reason for presenting to the ER and psychotic symptoms present) of the twelfth-predictor variables on univariate analysis made unique statistically significant contributions to a logistic regression model. Patients who were unemployed or had a history of self-harm were about two and three times respectively more likely to have impaired insight compared with those who were employed or had no history of self-harm, controlling for other factors in the model. Patients who had psychotic symptoms on mental state examination were about six times more likely to have impaired insight compared to those who did not have psychotic symptoms, controlling for other factors in the model. Patients presenting to the ER with psychotic symptoms or drug/alcohol problems as chief complaints were 25 times and four times respectively more likely to present with impaired insight compared to patients presenting with a medical complaint, controlling for other factors in the model.

Conclusion

Patients presenting to the ER with a psychotic symptom and those with psychotic symptoms on metal state examination as well as those presenting with drug/alcohol problems are candidates for an insight-oriented psychotherapy.