

SOCIODEMOGRAPHIC AND CLINICAL CHARACTERISTICS OF SCHIZOPHRENIA OR PSYCHOTIC DISORDER CASES REFERRED FOR INPATIENT TREATMENT FROM A COMMUNITY MENTAL HEALTH CENTER

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BACKGROUND AND AIM: This study aimed to investigate the sociodemographic and clinical characteristics of patients with Schizophrenia or Psychotic Disorders who were monitored for at least six months at the SBÜ İzmir Bozyaka Training and Research Hospital Community Mental Health Center (CMHC) and referred for inpatient treatment at İzmir City Hospital.

METHODS: [For our current research, ethical approval has been obtained from İzmir Bozyaka Training and Research Hospital with the decision number 2025/10.] The study included 30 patients aged 18-65 years who were followed at the CMHC for at least six months. Data from patients hospitalized between May 1, 2024, and November 1, 2024, were retrospectively analyzed using a structured form. Positive and Negative Syndrome Scale (PANSS) scores were assessed during the first and last weeks of hospitalization. Data were analyzed using SPSS 25.0, and paired sample t-tests evaluated PANSS scores ($p < 0.05$).

RESULTS: The mean age of patients was 41.4 ± 10.63 years, with an average CMHC follow-up of 2.16 ± 2.59 years and illness duration of 8.21 ± 8.56 years. Most patients (90%)

lived with family, while 10% lived alone. Diagnoses included Schizophrenia (53.3%) and Psychotic Disorders (46.7%). Before hospitalization, 73.3% discontinued medication, and 93.3% were on polypharmacy. Long-acting injectable antipsychotics were used by 76.7% during hospitalization. PANSS positive symptom scores significantly decreased from 23.33 at admission to 20.23 at discharge ($t = 3.046$, $p = 0.005$). General psychopathology scores improved ($t = 2.223$, $p = 0.034$), but negative symptom scores showed no significant change ($t = 1.383$, $p = 0.177$). Total PANSS scores dropped from 86.66 to 76.53 ($t = 2.564$, $p = 0.016$).

CONCLUSIONS: Since 2009, CMHCs have been established in our country for the treatment of mental illnesses and psychosocial support. The aim of these centers is to improve the treatment processes by enhancing patients' psychosocial support. CMHCs are essential for post-discharge follow-up and addressing caregiver needs. Limitations include the retrospective design and lack of data on the frequency of CMHC service utilization.

Keywords: Community mental health center, schizophrenia, psychotic disorder, psychosocial support