OP-019 https://doi.org/10.5080/61upk.ozt438

RETROSPECTIVE EVALUATION OF NEUROLOGY CONSULTATIONS, NEUROLOGICAL DIAGNOSES, INVESTIGATIONS, AND TREATMENTS IN ADULT INPATIENTS HOSPITALIZED IN THE PSYCHIATRY SERVICE OF PAMUKKALE UNIVERSITY HOSPITAL

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BACKGROUND AND AIM: Neurological findings and investigations in patients hospitalized in psychiatry services are important for differential diagnosis and treatment. This study aims to examine the demographic characteristics, psychiatric and neurological diagnoses, neurological investigations, and their results in psychiatric inpatients.

METHODS: (Ethics Committee Approval must be obtained and the number should be specified). Sociodemographic and medical information of patients hospitalized in the Psychiatry Service of Pamukkale University between October 1, 2024 and September 30, 2025 were retrospectively reviewed. Approval for the study was obtained from the university ethics committee (E-60116787-020-767207).

RESULTS: Of the 211 patients included in the study, 97 (46%) were female, with a mean age of 38.5±16.96 years.

Known neurological comorbidity was present in 18 patients (8.5%), most commonly epilepsy (5.2%). Neurology consultation was requested for 17.5% of the patients.

Neurological investigations were requested for 19.4% of all patients,with pathological findings in 48.8% of investigated patients.

The mean age of patients referred for organic exclusion was 58.6±14.55 years, while the mean age of those referred for treatment regulation was 41.8±14.15 years. A statistically significant difference was found between the two groups ($Z = -3.35$; $p = 0.001$).

Psychotic disorder was the most common diagnosis among patients who required neurology consultation (19.4%). Neurology consultation for organic exclusion was more common among patients with psychotic and bipolar disorders.

CONCLUSIONS: Neurology consultations and investigations were common among psychiatric inpatients. The higher mean age and increased rate of imaging abnormalities in patients consulted for organic exclusion are consistent with neurological disorders being more common in advanced age. Although abnormalities were detected in approximately half of the patients, most findings were chronic or nonspecific.

Consultation indications differed according to psychiatric diagnosis. The findings highlight the importance of integrating neurological and psychiatric approaches in the clinical evaluation of psychiatric patients. Collaboration between psychiatry and neurology supports differential diagnosis and clinical decision-making.

Keywords: Neurology consultation, psychiatric inpatients, neurological investigations