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Inpatient psychiatry

February 2025

This monthly current awareness bulletin aims to highlight relevant reports and peer-reviewed literature in emergency and unscheduled care. The bulletin focuses on efforts to improve patient flow, reduce waiting times and alternative care models.

If you require specific information, please [contact us via email](#).

References

Adwok N., et al. (2025) ['Epilepsy in Acute Psychiatric Inpatient Settings: Prevalence, Treatment Gaps, and Mortality.'](#) *Epilepsy and Behavior* 163(pagination), Article Number: 110245. Date of Publication: 01 Feb 2025.

Background: The underrepresentation of acute psychiatric settings in epilepsy research presents a barrier to delivering equitable healthcare for people with comorbid epilepsy and severe mental illness. We aimed to report the prevalence of epilepsy among people receiving acute psychiatric inpatient care and examine the sociodemographic and clinical characteristics influencing their treatment outcomes.

Berlan E.D., et al. (2025) ['Implementation of Contraception Care for Psychiatrically Hospitalized Adolescents: A Hybrid Type 2 Effectiveness-Implementation Study.'](#) *Journal of Adolescent Health* 76(2), 265–273.

Purpose: To examine the implementation and effectiveness of a contraception care intervention for adolescents hospitalized with psychiatric disorders.

Sourander, A. (1996) ['Short-Term Child Psychiatric Inpatient Treatment. Place of Residence as One-Year Outcome Measure.'](#) *European Child and Adolescent Psychiatry* 5(1), 38–43.

In this study, 100 patients consecutively admitted to four child psychiatric inpatient wards in Finland were prospectively followed 12 months after discharge from short-term inpatient treatment. It turned out that 50 patients were discharged back to their previous residence and to outpatient treatment, 40 patients were admitted to long-term inpatient treatment and 10 patients were placed in some institution. The child's

antisocial behaviour on admission was the strongest determinant for long-term treatment or placement at the 12 month follow-up. Other predictors of long-term treatment or placement in an institution included a high total score in teacher's behaviour ratings, being referred by a psychiatric agency and living in a semi-rural area. No statistically significant relationship was found in the child's age, gender, parents' education level or occupation, family characteristics, total life events, parent's ratings of total behaviour, total life events, parent's ratings of total behaviour, CGAS ratings by a clinician or a wide range of treatment variables.

Toshi K., et al. (2025) '[Association between Self-Stigma and Self-Compassion in Patients with Schizophrenia: A Longitudinal Study from Hospital Admission to First Follow-Up After Discharge.](#)' *Japan Journal of Nursing Science* : *JJNS 22(1)*, e12648.

AIM: Self-stigma is a major factor preventing the recovery of individuals with schizophrenia. Psychosocial interventions can reduce self-stigma, and mental health nurses may play a crucial role in leading them, but little is known about the modifiable factors that should be targeted. We aimed to investigate the association between self-stigma and self-compassion in patients with schizophrenia from admission to the first follow-up after discharge.

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