LETTER

Gender differences among schizophrenic patients admitted to the psychiatric emergency room

Diferenças entre sexos de pacientes esquizofrênicos atendidos na emergência psiquiátrica

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Keywords

Schizophrenia, gender, psychiatric emergency services.

To the Editors,

Schizophrenia and related psychoses represent the main cause of psychiatric hospitalizations in the state of Minas Gerais, Brazil¹. This prevalence is sustained despite the National Ministry of Health's strategies for reforming the public assistance to mental health, in which the outpatient assistance of severe and persistent mental disorders is explicitly prioritized². Recent systematic reviews of worldwide results have estimated the community lifetime prevalence of schizophrenia as 1.6-12.1/1,000 inhabitants³, and the incidence as 7.7 to 43.0/100,000.⁴ Male gender has been reported as a risk factor for developing schizophrenia (RR~1.4), for higher admission rates, and for worst prognosis^{4,5}. However, similar incidences between genders were reported when analyzing solely developing countries⁵.

In order to verify gender associated differences in the occurrence of schizophrenia emergency visits, we analyzed the registries of the psychiatric emergency room of Hospital Galba Velloso. This is a 145-bed public institution which assists patients from all the state of Minas Gerais, but mainly from the metropolitan region (circa 5,500,000 inhabitants), in 2002 and 2007. Contrasting with the literature, we have found a much higher prevalence (70.1%) of males among schizophrenia admissions (1,163 males vs. 497 females), in 2002. This represented a 2.34:1 male-female ratio, which increased to 3.37:1 in 2007 (77.1% males out of 1,798 admissions). To rule out the unspecific effect of genders, we also analyzed the distribution of non-schizophrenia admissions to the emergency room by genders: although males were overrepresented, figures did not change significantly between 2002 (56.6% out of 8,900 admissions) and 2007 (57.0% of 7,934 admissions).

A "hospital bias" effect has been previously proposed to explain for the higher prevalence of schizophrenia among males in psychiatric services. Schizophrenic males are more prone to substance abuse, impulsive and aggressive behavior, and also less adherent to treatment regimens⁵. All those features result in higher probabilities of psychiatric emergencies and admissions.

Gender differences among schizophrenics should be considered when developing public mental health plans. If, on one hand, the current public mental health policy (installation of psychosocial attention centers, concurrently with the maturing of the family health strategy and the provision of second generation antipsychotics to drug-resistant patients) may be associated with the retention of schizophrenic patients in the community, on the other hand, these strategies may not show the same effectiveness in males than in females, due to their particular clinical characteristics and comorbidities.

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