

RESUMEN Y CRÍTICA DE LIBROS

“CRISIS Y CONTENCIÓN: DEL ESTRÉS AL EQUILIBRIO PSÍQUICO”

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This book compiles the papers presented at a Symposium on “Crisis and Contention” meeting organised by the Emergency Psychiatry section of the Association of European Psychiatrists in Bilbao on 18th June 2007.

Epidemiological, clinical and therapeutic aspects of psychiatric crisis were discussed at four Roundtables and with the participation of 25 speakers from five European countries and 200 professionals from Spain.

The roundtable on aetiology showed that emotional crisis following private events (frustrations, failures, emotional loss) or public events (natural disasters, wars, attacks) assume significant importance in our times. Between birth and reaching 60 years old 57% of males and 72% of females in the West will show signs of a marked mental imbalance and 6% and 15% respectively will show signs of a serious mental disorder.

It became clear that the patients go to psychiatric emergency units as a result of the breakdown in the psychological homeostasis, following an attempt to adapt to the stressful circumstances. The community support mechanisms help to control the effects of stress and avoid imbalances.

The clinical roundtable showed that at times the crisis occurs in patients with prior serious psychiatric pathologies. However, in a great many number of cases the crisis affect persons without any prior pathology who become imbalanced due to grave

life situations which they can not overcome due to a lack of support from the vicinity or due to fragility in their personality which prevents them from putting mechanisms into action in order to adapt.

These imbalances are seen in Spain both at the primary healthcare centres and at the specialised centres and from where they are sent to other services. Too commonly they end up being concentrated at the emergency services of the general hospitals where they receive momentary help, frequently only medication, and then return home. The result is often that the patient and their families do not go back to the help system and thus lose a unique opportunity to comprehend the predisposing factors and the events leading to the crisis, and as such it repeats with the same or with difference characteristics.

On other occasions the crisis are dealt with at the hospital although a not insignificant percentage of cases do not remain long enough in order to obtain the desirable benefit.

The experiences provided by the Bilbao, Barcelona, Paris and Geneva teams show that other types of approach are preferable. More time (and space) is needed than that which is available at the normal emergency services so that the manifestations subside (e.g. one or two days) and to give some respite to the patient's environment. It is necessary to create mobile emergency centres, extra-hospital crisis units or units next to the general hospital's emergency services (such as the unit in Geneva) with specific, well-trained personnel and with the participation of the patient's environment. Various programmes were discussed which includes observation beds in the emergency departments, day centres (such as those in Bilbao), telephone service (such as those in the U.K.), home visits, etc. These are creative mechanisms which can not be copied from those already existing and must be adapted in each of our health systems with differential guidelines in the various countries.

It was discussed how the psychological imbalances can evolve towards chronicity or, on the other hand, can present an exceptional opportunity to review a life with fragilities which can be improved with the right treatment. Experiences were presented with patients with serious somatic disorders, suicide-risk patients and violent patients.

It concluded that progress towards recovery or not depends to a large extent on the attention that they are offered. But in order for this it is essential to improve the training currently being offered at the Universities for health professionals working in primary care in order to deal with these situations, which includes in some cases properly referring them to the specialists. In any event, the awareness experiences with interventions performed according to the model of the Balint groups (such as those in Bilbao's University) were extremely valuable.