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Characteristics of absconders from a general health service, Rasoul Akram Hospital in 2013

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ABSTRACT

Introduction: Absconding is an important health and security concern because of its adverse effect on patients, care providers, and the community. Studies are limited.

Aim: This study aimed to describe the characteristics of absconding events in Tehran.

Material and methods: In this analytical cross-sectional study, 334 absconders from 34 192 patients who were admitted to the Rasoul Akram Hospital in 2013 and escaped from the hospital were recruited. These patients were evaluated based on variables that included age, sex, marital status, hospitalization duration, smoking, alcohol use, addiction, psychiatric disorders or underlying disease, type of insurance, cause of hospitalization, time of scape, and cost of treatment.

Results and discussion: The study group consisted of 260 (77.8%) males and 74 (22.2%) females, with a mean age of 37.4 (SD = 17.1). Mean duration of hospitalization was 99 h (SD = 14.8). A total of 70 (21%) patients were smokers, 14 (4.2%) consumed alcohol, and 65 (19.5%) were drug addicts. Psychiatric disorders were observed in 18 (5.4%) patients, and underlying diseases were detected in 87 (26%). Higher rates of escape were observed in single men (N = 162; 62.30%) as well as married women (N = 52; 70.27%). The most common time of escape was 12:00 PM. The highest number of escapes was observed in the month of July.

Conclusions: The present study identified single males, younger patients, psychiatric disease, underlying illness, and addiction as common features of escapees. Particular attention in observing, improvement in observation methods, and staff focusing on engagement could be helpful in decreasing the number of absconding events.

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1.   Introduction

Absconding, which define as going absent without leave and conventionally named ''escape'' is an important health and security concern especially for psychiatric patients who are legally mandated to remain in a secure setting. Absconding of patients from hospital is raised as an issue which can causes important concern in community and hospital. Patients, their family, doctors and also community are involved in this event.[1] Based on various definitions and measurement of this behavior, frequency of absconding is difficult to distill from the literature. In some published study rate of this problem was determines about 34%–39% between forensic patients.[2,3] Studies from the secure forensic hospitals in the UK report lower prevalence rates of between 1%–4% of all admissions.[4] This issue had an adverse effect on patients, their relatives, care providers and community[3] and they experience a decreased sense of confidence in psychiatric services.[5] Some of these adverse effects are consists of loss of treatment, self-neglect, violence to others, self-harm, and suicide.[3,6,7] Many previous studies presented absconding as a risk factor for suicide among psychiatric patients. In a recent review rate of suicide among in-patient psychiatric patients who had absconded from the ward over a 10-year period in England was reported as 25%.[8]

Many predictors have been identified as contributory factors of absconding from psychiatric hospitals including personal or conventional characteristics.[9] A number of factors which categorized as endemic or trigger factors have been reported that can facilitate absconding in the third world setting. Some of these factors are overcrowding, staff shortage care, poor conditions, long stay of patients, abandonment, rejection of visits by relatives and the lack of therapeutic and occupational activities.[10,11]

There is evidence to show that absconding occur in those with a history of absconding.[12] Studies describing characteristics of patients who absconded from hospitals are limited.

2.   Aim

This study aimed to describe the characteristics of absconders in Tehran.

3.   Material and methods

In this analytical cross-sectional study, we studied 334 absconders from 34 192 patients who were admitted in various wards of the Rasoul Akram Hospital in 2013 and escaped during their hospital stay. Rasoul Akram Hospital is one of the biggest general centers in Tehran, the capital city of Iran, consisting of different wards, including a psychiatry ward. Several patients from different cities of Iran are referred to this hospital.

The patients included in the present study were evaluated based on the following variables: age, sex, marital status, hospitalization duration, smoking, alcohol use, addiction, having psychiatric disorders or underlying disease, type of insurance, cause of hospitalization, time of scape, and cost of treatment. Data were analyzed by SPSS v.16. The mean or frequency of variables was reported. Student's t-test and χ^2 test were used for analytical evaluation.

Patients' information was maintained and adhered to all ethical guidelines of the institution.

4.   Results

A total of 334 patients were evaluated, of whom 260 (77.8%) were male and 74 (22.2%) were female. The mean age of the patients was 37.4 years (SD = 17.1 years), within the range of 1–90 years. There were significant differences in mean age between men and women (35.5 years, SD = 16.0 years in men vs. 44 years, SD = 19.4 years in females; $P < 0.001$), whereas women escapees were older. Of these patients, 183 (54.8%) were single, 149 (44.6%) were married, and 2 (0.6%) were divorced. No one had lost his or her spouse. The mean age of single patients was 28.5 years (SD = 12 years) and that in married patients was 48.3 years (SD = 16.3 years), $P < 0.001$.

Mean duration of hospitalization was 99 h (SD = 14.8 h). The shortest duration was 0.5 h, whereas the longest was 2.7 h. Mean of hospitalization was 110 h (SD = 57.3 h) in men and 59.5 h (SD = 32.3 h) in women ($P < 0.05$).

Of the 334 evaluated patients, 70 (20.9%) were smokers, 14 (4.2%) consumed alcohol, and 65 (19.5%) were drug addicts. Psychiatric disorders were observed in 18 (5.4%) patients, whereas underlying diseases were reported in 87 (26.0%) patients.

In total, 119 (35.6%) patients had insurance: social security insurance was reported in 39 (32.8%) patients, traffic insurance in 32 (26.9%) patients, health insurance in 25 (21%) patients, armed forces insurance in 13 (10.9%) patients, rural insurance in 8 (6.7%) patients, and relief committee insurance in 2 (1.7%) patients. A 144 (43.1%) patients possessed a discharge order.

Purpose of hospital admission was trauma in 145 (43.4%) patients, surgery in 45 (13.5%), internal in 37 (11.1%), cardiovascular disease in 34 (10.2%), and neurology problem in 31 (9.3%) patients. Approximately 12.6% of the patients were admitted due to ENT, urology, toxicology and other problems.

A significant relationship was observed between marital status and attempt to escape in both sexes ($P < 0.001$), whereas escape was more frequent in single men (N = 162; 62.30%) and married women (N = 52; 70.27%).

The most common time of escape was 12:00 PM (N = 96; 28.7%), followed by 11:00 AM and 1:00 PM. Lowest incidence of escape (N = 1; 0.6%) was reported at 6:00 AM, 4:00 AM, and 5:00 AM. The highest number of escapes also was reported in the month of July, with 35 (10.5%) patients, whereas the lowest incidence was observed in November, which involved 20 (8.1%) patients.

No significant differences in mean age, marriage status, alcohol consumption, drug addiction, underlying disease, and having insurance with duration of hospitalization was observed ($P > 0.05$), whereas a significant difference was detected between smoking, psychiatric disease, and cause of hospitalization with length of stay in hospital ($P < 0.05$). (Table 1).

Cost of treatment for men was 16 684 230 rial ($503.3), whereas in the same for women was 6 210 780 rial ($187.4), indicating a significantly higher value for men ($P = 0.01$).