A survey of psychostimulant and cannabis use among acute psychiatric patients presenting to an Australian teaching hospital Emergency Department

Chief Investigator Name: Dr Noeline Latt

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Other Investigators: S Jurd, C Tenant, J Lewis, L Macken, A Joseph, A Grochulski and L Long

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Lay Description
Use of substances such as cannabis and psychostimulants are known to cause psychotic illnesses in vulnerable individuals while patients with mental illness are particularly vulnerable and prone to substance use. The study aimed to determine the incidence of alcohol and substance use in patients presenting to the emergency department with psychotic illnesses and to compare the results obtained from history taking from result of urine drug screens to determine whether urine drug screens should be conducted on all patients who present to hospital with a psychotic illness.

Research achievements
A major limitation of the study was that only 83 of the 196 patients with acute psychosis had urine drug screens performed. Overall, results of urine drug screens were consistent with self reported use of drugs and identified and additional 5% of patients who did not give a history of drug use. Use of cannabis, the most commonly used substance, was obtained by history in nearly half of the patients with either acute psychosis or schizophrenia. It was detected in the urine in approximately 40% of cases. Use of amphetamine type stimulants especially methamphetamines, the second most common substance, was obtained by history in 48.9% of patients with acute psychosis and 24.3% of cases with schizophrenia. 41.7% of urine drug screens taken from patients with a definitive diagnosis of drug induced psychosis were positive for cannabis and 22.9% positive for psychostimulants. Young males used substances more commonly than females and were more likely to present with aggression, agitation, paranoia, violence and psychosis.

Expected future outcomes
This pilot study had limitations as not all patients had urine drug screens. A large scale prospective study with a full time research assistant is necessary to give more definitive results and to enable appropriate follow up of patients. Confirmation of the benefits of appropriate history taking and urine drug screens for correct diagnosis followed by concurrent and comprehensive treatment programs for both the substance use disorder and mental health illness compared with similar patients who did not receive this treatment is required. Further funding is necessary for such a study.

Publications & Key Presentations
Initial submission rejected by MJA. Paper is currently being revised.

Name of contact: Dr Noeline Latt

Email of contact: nlatt@mail.usyd.edu.au