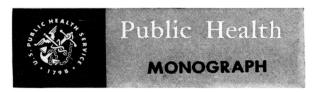
Disposition of First Admissions to a State Mental Hospital

This study of the experience of the Warren State Hospital, Warren, Pa., during the period 1916-50 has several purposes. The first is to acquaint epidemiologists, health officers, and other public health workers with some of the complex problems faced by mental hospital administrators in treating the increasing number of patients admitted to and resident in mental hospitals and in determining what happens to patients following admission. The second is to demonstrate a method for studying the flow of patients through the mental hospital and to apply this method to a study of changes in the rates at which first admissions to Warren State Hospital have been returned to the community or have died in the hospital. The third is to dispel the idea that the prognosis of patients committed to mental hospitals is hopeless. fourth is to use the results of this historical study as a background for discussion of some basic epidemiological and clinical research needed to assist in the interpretation of the findings and in the formulation of public mental health programs directed toward care, treatment, and prevention of mental illness and disability.

A statistical analysis was made of the records of 15,472 first admissions to Warren State Hospital during the period 1916-50 to obtain an answer to the question, What has been the trend in the probabilities of separation from the hospital, either alive or dead, within specified periods following first admission for patients of specific age, sex, and diagnosis?

Patients were followed from the date of their first admission to the date of their first significant movement out of the hospital, defined as follows: the date of first release to the community on direct discharge or to convalescent care, whichever came first, or the date of death in the hospital. The date of placement on con-

valescent care was selected as an end point for this study because it represents a critical point in the life of the patient, when the staff agrees that once again he is ready to return to the community and to live outside the environs of the hospital.



No. 32

The accompanying summary covers the principal findings presented in Public Health Monograph No. 32, published concurrently with this issue of Public Health Reports. The authors are with the National Institute of Mental Health, Public Health Service, Bethesda, Md., and the Warren State Hospital, Warren, Pa.

Readers wishing the data in full may purchase copies of the monograph from the Superintendent of Documents, United States Government Printing Office, Washington 25, D. C. A limited number of free copies are available to official agencies and others directly concerned on specific request to the Public Inquiries Branch of the Public Health Service. Copies will be found also in the libraries of professional schools and major universities and in selected public libraries.

Kramer, Morton; Goldstein, Hyman; Israel, Robert H.; and Johnson, Nelson A.: A historical study of the disposition of first admissions to a State mental hospital. Public Health Monograph No. 32 (Public Health Service Publication No. 445). 25 pages. Illustrated. U. S. Government Printing Office, Washington, D. C., 1955.

Four periods were selected in which to describe the movement of patients: 1916-25, a period before the introduction of any major treatment program; 1926-35, when Warren State Hospital began to lay heavy stress on industrial and occupational therapy for all patients; 1936-45, a period in which some of the therapies in use were standardized and other new therapies were introduced; and 1946-50, when the medical staff was enlarged considerably, and when there was intensified use of electroshock and group and individual psychotherapy.

Some of the conclusions of this study and the questions they lead to are:

- 1. Of patients admitted to the hospital during 1946-50, a larger proportion were released within 1 year following admission than the proportion admitted during 1916-25 who were released within 5 years following admission. In all periods, at least 50 percent of the patients were released within 5 years following admission. The youngest patients, those aged 15-34 years, have extremely high probabilities of release. Patients 75 years old and over have small chance of ever leaving the hospital.
- 2. For patients with functional psychoses, the probability of release in the first year following admission in the period 1946-50 was considerably in excess of the probability of release for patients admitted in each of the earlier periods.

Does this mean that the various therapies used in increasing volume in the most recent period—electroconvulsive therapy, insulin, group psychotherapy, and occupational therapy—have been responsible for this increase in release rates, or have other factors been responsible?

3. Patients with senile and cerebral arteriosclerotic psychoses have low probabilities of return to the community. Their death rates, particularly in the first few weeks and months following admission, are exceedingly high.

What are the social, economic, and familial factors responsible for bringing a high proportion of moribund patients into the mental hospital?

4. Functional psychotics, as well as other categories of patients not released in the first year of hospitalization, experience considerably reduced probabilities of release in the second and subsequent years of hospitalization. Also, patients admitted during 1946–50, who have attained their second and third years of hospital life, have approximately the same chances of being released in the following year as had similar groups of patients in the earlier cohorts of admission.

What are the etiological and other factors responsible for long-term hospitalization? What treatment methods can be developed to make it possible to return more of these individuals to the community? What can be done to improve the lot of the patient who cannot be returned to society?

