

Acute Psychiatric Emergencies

A PRACTICAL APPROACH

Second Edition

Edited by
Mark Buchanan
Damien Longson

Acute Psychiatric Emergencies

SECOND EDITION

Acute Psychiatric Emergencies

A Practical Approach

SECOND EDITION

Advanced Life Support Group

EDITED BY

Mark Buchanan

Consultant in Adult and Paediatric Emergency Medicine,
Arrowe Park Hospital,
Wirral University Teaching Hospital NHS Trust;
Honorary Clinical Senior Lecturer,
University of Liverpool

Damien Longson

Consultant Liaison Psychiatrist,
Greater Manchester Mental Health NHS Foundation Trust;
Honorary Professor of Psychiatry,
University of Manchester



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Dedication

We would like to acknowledge and dedicate this manual to ALSG's former Chair of Trustees (1990–2024), Professor Kevin Mackway-Jones, in bringing the Acute Psychiatric Emergencies (APEX) course to fruition. By bringing together colleagues from across the acute and mental healthcare sectors, his vision, inspiration and beliefs turned the thought-provoking idea of essential mental health training that covers emergency management, wherever the setting, into reality.

Contents

Contributors to second edition	ix
Preface to second edition	x
Preface to first edition	xii
Acknowledgments	xiii
Contact details and website information	xiv
How to use your textbook	xv
PART 1	1
1 Structured approach to acute psychiatric emergencies	3
2 Primary unified assessment and immediate psychiatric management	9
3 Secondary physical and psychosocial assessment	23
4 Mental state examination	29
5 Commonly encountered psychiatric presentations	37
PART 2	41
6 The patient who has harmed themselves	43
7 Organic causes for behavioural disturbances	67
8 The apparently intoxicated patient	81
9 The acutely confused patient	93
10 The aggressive patient	109
11 Special considerations	131

PART 3	143
12 Legal aspects of emergency psychiatry	145
13 Getting it right: non-technical skills	153
14 The patient experience	169
Working group for second edition	173
Working group for first edition	174
Contributors to first edition	176
References and further reading	177
Index	183

Contributors to second edition

Roger Alcock MBChB, BSc(Hons), FRCP Edin, DCH, FRCER, FRGS, Consultant in Emergency Medicine and Paediatric Emergency Medicine, Victoria Hospital, NHS Fife

Sally Arnold MBChB, MRCPsych, DRCOG, MA. Consultant Perinatal Psychiatrist, Midlands Partnership NHS Foundation Trust

Mark Buchanan FCEM, Consultant in Adult and Paediatric Emergency Medicine, Arrowe Park Hospital, Wirral University Teaching Hospital NHS Trust; Honorary Clinical Senior Lecturer, University of Liverpool

Rebecca Chubb MRCPsych, Locum Consultant Psychiatrist, North Staffordshire Combined Healthcare NHS Trust

Alys Cole-King MB, BCh, DGM, MSc, FRCPsych, Clinical Director, 4 Mental Health/retired Consultant Liaison Psychiatrist

Sandrine Dénéréaz Paramedic, Master in Public Administration, Paramedic School Director, Lausanne, Switzerland

James Ferguson FRCSEd, FRCS(A&E), FRCER, FRCPE, FRSM, Consultant Surgeon in Emergency Medicine, NHS Grampian

Damien Longson PhD, FRCPsych, Consultant Liaison Psychiatrist, Greater Manchester Mental Health NHS Foundation Trust; Honorary Professor of Psychiatry, University of Manchester

Aaron McMeekin MBChB, LLB(Hons), MSc(Oxon), MRCPsych, PGCertMedEd, FHEA, Consultant Perinatal Psychiatrist, Greater Manchester Mental Health NHS Foundation Trust; Honorary Senior Clinical Teacher, Academic Unit of Medical Education, University of Sheffield

Andrew M. Russell MBChB, MRCS, FRCER, Consultant in Emergency Medicine, University Hospital Monklands, Lanarkshire

Murray Smith MRCPsych, Consultant Liaison Psychiatrist, Department of Psychological Medicine, Aberdeen Royal Infirmary, NHS Grampian

Preface to second edition

The prevalence of mental health distress is increasing and is thought to account for up to 5% of presentations to Emergency Departments (EDs) in England. In 2023–24 there were over 200 000 ED attendances in England where the chief complaint could be identified as a definite or possible mental health issues. The two main reasons for presentation were suicidal thoughts or self-injurious behaviours. Other diagnoses included depression, anxiety, psychotic disorders and, although not necessarily mental health-related, substance misuse disorders.

In August 2024 there were 31 328 new referrals to psychiatric liaison teams in ED. Distress associated with the emergency situation is compounded by additional factors. For example, in the same time period more than 80 000 people experiencing a mental health crisis waited in an ED for more than 12 hours with 26 000 spending more than 24 hours in that setting.

Mental health emergencies present in many settings: prehospital in the patient's home or in the community, out-patient departments, emergency departments, acute wards and mental health wards; the response to patients in crisis is best seen as being multiagency: including general practitioners, ED staff, psychiatrist trained staff, paramedics, police and social services to name a few.

The new edition of the Acute Psychiatric Emergencies (APEX) course builds on our experience of running the course in several nations for the past 5 years. We wanted to strengthen the collaborative approach, review acronyms, update key principles and include emerging concepts of pivotal importance in supporting a patient in crisis. This book, with its 2-day hands on experiential course has been designed to bring teams together to work towards providing safe effective care to patients presenting with acute mental health symptoms in any setting. In the spirit of the collaboration taught on the course, the revised course and book has been completely revised by emergency and psychiatric physicians experienced in dealing with mental health emergencies.

The fundamental principles of the course have not changed. APEX is a structured, flexible and systematic approach for staff supporting patients in mental health crisis, whatever the setting. The APEX approach facilitates safe effective management and promotes joint, parallel working between specialities.

As before, APEx considers both mental and non-mental health-related behavioural disturbances with topics varying from organic presentations, de-escalation and mental health assessments. Into this second edition we have added sections on specific circumstances such as eating disorder emergencies and safety plans. We have introduced important new tools such as the SMART screening tool for triage, and refined the mental state acronyms to improve communication between acute and mental health specialities. The section on human factors has been updated and as always the course places the patient experience and patient safety at the heart of the clinical pathway.

Patients in a mental health crisis deserve better care. A caring, systematic and communicating approach is the start to making this happen.

Mark Buchanan and Damien Longson
January 2025

Preface to first edition

Emergency departments offer open access healthcare 24 hours a day, 7 days a week, 365 days a year. The number of patients attending these departments in England increased by 7.4% between 2010–11 and 2016–17 and is currently at an all-time high. It is unsurprising that a significant proportion of the patients attending emergency departments present with mental health problems, and the number of patients in crisis is increasing at 10% per year and now make up more than 5% (one in 20) of all attenders.

Despite the high numbers of patients attending in mental health crisis (more attend with this presentation than attend with chest pain), the vast majority of emergency department staff are not trained specifically to deal with patients with mental health emergencies or, indeed, to deal with mental illness at all. A value clarification exercise that looked into emergency mental healthcare in one emergency department in London established that the work most valued by the staff was trauma 'because of the excitement and drama it provided'. The environmental values for good mental healthcare (privacy, quietness, safety, calmness and having time) were noted to be the 'antithesis' of the environment found in the emergency department. Experienced emergency department nurses noted a 'deficit in mental health knowledge' but were unable to further identify the deficits. A key theme emerged of 'a perceived conflict between two cultures' which gives mental health a low status.

The course that this book supports (APEX) is designed to fill some of the gap and more closely align the cultures of care. The content has been designed jointly by psychiatrists and emergency physicians and is presented in a structured manner. Recognisable presentations (such as 'overdose and poisoning', 'aggression' and 'behaving strangely') are dealt with rather than focusing on diagnoses. Primary assessment is achieved with a new bespoke structured approach (ABCD AEIO U) that is similar to the more familiar ABCD emergency care approach to physical emergencies. Secondary assessment consists of parallel physical and psychosocial history and examinations. Throughout the text close co-operation between emergency and mental health teams is emphasised as is the value of joint working.

Patients in mental health crisis clearly deserve better than they currently get. This book, and the APEX course it supports, is for them.

Kevin Mackway-Jones
Manchester 2019

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Manchester Triage Group
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Contact details and website information

ALSG: www.alsg.org

For details on ALSG courses visit the website or contact:

Advanced Life Support Group
ALSG Centre for Training and Development
29–31 Ellesmere Street
Swinton, Manchester
M27 0LA
Tel: +44 (0) 161 794 1999
Email: enquiries@alsg.org

Updates

The material contained within this book is updated on approximately a 4-yearly cycle. However, practice may change in the interim period. We will post any changes on the ALSG website, so we advise you to visit the website regularly to check for updates (www.alsg.org).

On-line feedback

It is important to ALSG that the contact with our providers continues after a course is completed. We now contact everyone 6 months after their course has taken place asking for on-line feedback on the course. This information is then used whenever the course is updated to ensure that the course provides optimum training to its participants.

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PART 1

