The workforce comprises one full-time and 268 part-time members. Three main streams of research are recognized.

PREVIOUS RESEARCH

It has been observed that the Reform Law 180, approved in Italy in 1978, had – and still has – great national and international significance for its dramatic consequences on both clinical and health organisational aspects of psychiatry: the law, in short, had the great effect of bringing psychiatry back to medicine, to the community and to the general hospital. This was the starting point of other relevant events, one of which was the establishment of the specialty of consultation–liaison psychiatry in Italy (Cazzullo et al., 1984). Since then, consultation–liaison psychiatry has gradually developed worldwide and in Italy as a super-specialised branch of psychiatry, able to put into practice – to operationalise – the great psychosomatic tradition in its three interrelated strands of clinical, teaching and research activities. The report that follows is strongly influenced by this historical background.

CLINICAL WORK PERFORMED

Founded in 1989, the Consultation–Liaison Psychiatry service of Modena University Hospital is one of the services of that hospital’s psychiatric department, which also includes a psychiatric ward (for both voluntary and compulsorily admitted patients), a day hospital, an out-patient clinic and a rehabilitation unit. With its consultation–liaison activities and out-patient clinic, the Modena service now provides about 1200 first consultations a year, corresponding to around 3% of all patients admitted to non-psychiatric hospital departments in the same period – twice the European average of 1.4% (Huyse et al., 2001a; Table 1). The workforce comprises one full-time and one half-time consultation–liaison psychiatry consultants, four or five psychiatry residents, two consultant psychiatrists who are also PhD students and a clinical psychologist.

Table 1 Modena University Hospital Consultation–Liaison Psychiatry Service: activity data

<table>
<thead>
<tr>
<th>Year</th>
<th>Days of activity</th>
<th>Beds n</th>
<th>First consultations n</th>
<th>Consultations/admissions (%)</th>
<th>Out-patient consultations n</th>
<th>(% of time of request/consultation</th>
<th>Concordance (% of time of request/consultation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1989</td>
<td>232</td>
<td>–</td>
<td>507</td>
<td>1.48</td>
<td>77</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1990</td>
<td>215</td>
<td>–</td>
<td>467</td>
<td>1.35</td>
<td>86</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1991</td>
<td>245</td>
<td>–</td>
<td>589</td>
<td>1.6</td>
<td>28</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1992</td>
<td>243</td>
<td>–</td>
<td>695</td>
<td>1.88</td>
<td>9</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1993</td>
<td>233</td>
<td>993</td>
<td>756</td>
<td>2.06</td>
<td>47</td>
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<td>–</td>
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<tr>
<td>1994</td>
<td>252</td>
<td>1018</td>
<td>878</td>
<td>2.23</td>
<td>74</td>
<td>–</td>
<td>–</td>
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<tr>
<td>1995</td>
<td>250</td>
<td>1025</td>
<td>771</td>
<td>2.14</td>
<td>123</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1996</td>
<td>262</td>
<td>911</td>
<td>814</td>
<td>2.25</td>
<td>127</td>
<td>100</td>
<td>–</td>
</tr>
<tr>
<td>1997</td>
<td>247</td>
<td>891</td>
<td>847</td>
<td>2.29</td>
<td>115</td>
<td>100</td>
<td>–</td>
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<tr>
<td>1998</td>
<td>255</td>
<td>891</td>
<td>949</td>
<td>2.8</td>
<td>98</td>
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<tr>
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<td>255</td>
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<td>868</td>
<td>2.34</td>
<td>410</td>
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<td>–</td>
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<tr>
<td>2000</td>
<td>251</td>
<td>921</td>
<td>935</td>
<td>2.11</td>
<td>845</td>
<td>100</td>
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<tr>
<td>2001</td>
<td>253</td>
<td>928</td>
<td>1247</td>
<td>2.52</td>
<td>677</td>
<td>100</td>
<td>–</td>
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<tr>
<td>2002</td>
<td>250</td>
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<td>1136</td>
<td>3.66</td>
<td>719</td>
<td>100</td>
<td>–</td>
</tr>
</tbody>
</table>

1. Data to August 2003.
NEW INITIATIVES

Work is in progress in all of the three areas described above. As a contribution to the operationalisation of psychosomatic constructs, a recent study on interrater reliability of the Diagnostic Criteria for use in Psychosomatic Research, first conceived by Fava et al. (1995), is shortly to be published in Psichosomatics (Galeazzi et al., 2004).

The Modena Consultation–Liaison Psychiatry service is one of thirty centres involved in the second national multicentre inquiry into consultation–liaison psychiatry activity in Italy, recently conducted by the Società Italiana di Psichiatria di Consultazione (Italian Society of Consultation Psychiatry; www.sipc.it), which collected data on more than 10,000 patients referred to a consultation–liaison psychiatry service. In another analysis of service management and organisation, the team has conducted a study on levels of satisfaction among the Modena University Hospital ward physicians, surgeons and head nurses about the quality of consultation–liaison activities.

Increasing interest is being focused on consultation–liaison psychiatry in the setting of primary care or general medicine outside the hospital. This is still a pioneer field in Italy. A study is in progress to characterise features of frequent attenders at primary care clinics, and possibly to identify higher rates of psychic distress in these patients compared with normal attenders.

The recent opening of an active transplant unit at Modena University Hospital and the consequent increase in psychiatric referrals, both arising from pre-transplant assessment procedures and after surgery, were the stimulus to initiating research in this area, including psychopathological evaluation, evaluation of psychosocial and familial variables, and investigation of adaptive and compliance abilities.

REFERENCES


The Modena Consultation–Liaison Psychiatry Service, Italy
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