Abstract

Background: The link between psychiatric disorders and smoking is a topic that has only begun the past few years ago. Many studies have shown a high prevalence of smokers among patients with psychiatric disorders which is roughly two or three times higher than in the general population. Despite this phenomenon, the smoking of patients with this diagnosis in the Czech Republic, especially in institutional care, is rather overlooked and often even encouraged. So far, there has been no uniform approach by staff to introduce the necessary, systematic programs, interventions, and smoking cessation training. Staff in these institutions often rely on the belief that these patients are not interested in professional help.

Objective: The main objective of the research was to determine the prevalence of smoking in Bohnice Psychiatric Hospital in patients with schizophrenia and depression. The partial objective was to find out whether, and what intervention is provided by staff and what is the interest of patients in quitting smoking. Another aim of the work was to find access of healthcare professionals and patients to smoking cessation intervention in the hospital and then to check the current use of smoking cessation help at Bohnice Psychiatric Hospital.

Methodology: A questionnaire survey was conducted between patients with schizophrenia and depression. In addition, structured interviews with healthcare professionals and patients in income and after-care departments were conducted. Questionnaires in the anamnesis sheets were completed with all 538 admitted patients for the period from September 2017 to January 2018. The interviews were conducted in 3 acute care departments and 4 aftercare departments with 12 healthcare professionals and 8 patients. Before the interviews, everyone was informed of the anonymity and purpose of the poll. In the first case, this is quantitative research and data analysis was carried out in the MS Excel spreadsheet. In the latter case, this is a qualitative research in the form of structured interviews where the results were presented as text.

Results: The prevalence of regular and occasional smoking among respondents was 44.79 %. Those interested in quitting smoking were 15 %. Interventions from healthcare professionals were not at 29.64 % none; 5.3 % of patients were given a leaflet with information on smoking hazards, and nicotine replacement therapy was offered in 2.6 %. In 43 %, no type of intervention was entered into by the medical staff, so it is only possible to consider whether or not the intervention took place and, if so, what type, because no field was ticked by the medical staff. In 18 % of patients, short education was performed and 0.4 % of patients were advised to visit the Ameta ambulance. The interviews were to provide information on the attitude of health professionals and patients to the smoking intervention at Bohnice Psychiatric Hospital. Facts that complicate intervention here have been identified. These are translations of patients from the Revenue Department to the aftercare department. High benevolence from hospitals and executives. The large amount of leisure time that patients fill in smoking instead of paying for more complete therapeutic activities. Little awareness of the existence and focus of Amet's ambulance.

Conclusion: The work has been able to map the prevalence of smoking among patients with schizophrenia and depression during the given period and the current occupation and use of the Amet ambulance. In view of the information found, possible changes were proposed, especially in the approach of persons involved in smoking intervention. Given the proven high number of smokers among these patients, it was clear that the real availability of care does not meet its high need. In the future, it would be advisable to reflect on the changes for better feasibility of the intervention, with the consequent reduction in the number of smokers with psychiatric diagnoses.

Keywords: tobacco dependence, schizophrenia, depression, smoking intervention, treatment