

CME COURSE TITLE	New directions and guides lines in the emergency treatment of psychiatric disorders
COURSE DIRECTORS	Prof. Cristian Damsa, SWITZERLAND/ UNITES STATES
COURSE LEVEL	Basic
EDUCATIONAL OBJECTIVES	The participant should be able to recognize the critical points about quality of care in emergency psychiatry: rapid diagnose, application of validated clinical guidelines for emergencies, and focus on therapeutic alliance.
COURSE DESCRIPTION	The newest literature data about the interest of the combining treatments (psychotherapy and pharmacology) in emergency psychiatry will be discussed focusing about the symbiosis between clinical practice and evidence based medicine. Then, the presentation of some preliminary research experiences of our research group, will be followed by the discussion of recent publications (2006-2011) and new unpublished data. This communication focus also on the critical points about the quality of care in emergency psychiatry: rapid diagnose, management of the psychotherapeutic and pharmacologic treatments effective in emergency. The interest of an international research network in emergency psychiatry is emphasized starting from several clinical experiences and exchanges (United States, Switzerland, Belgium, France, Luxembourg, Romania).
COURSE METHODS AND MATERIAL	Interactive sessions (a version of this course was presented in Denmark in March 2009) 90 minutes x 2
RECOMMENDED READINGS	<ol style="list-style-type: none"> 1. Allen MH, Debanné M, Lazignac C, Adam E, Dickinson LM, Damsa C. Effect of nicotine replacement therapy on agitation in smokers with schizophrenia: a double-blind, randomized, placebo-controlled study. <i>Am J Psychiatry</i>. 2011 Apr;168:395-9. 2. Damsa C, Bryois C, Morelli D, Cailhol L, Adam E, Coman A, Stamatoiu D, Lazignac C, Freymann JR. Are psychiatric residents still interested in psychoanalysis? A brief report. <i>Am J Psychoanal</i>. 2010 Dec;70(4):386-91. 3. Damsa C, Ruether K, Adam E, Moussaly J, Vaney C, Berclaz O. Greater evidence of dissociative symptoms noted in general practitioners attending an educational session on dissociation. <i>Am J Psychiatry</i>. 2009 Oct;166(10):1190-1. 4. Mihai A, Allen MH, Beezhold J, Rosu C, Nirestean A, Damsa C. Are female psychiatry residents better to propose in emergency a voluntary hospitalization? <i>Psychiatr Q</i>. 2009 Dec;80(4):233-9. 5. Damsa C, Adam E, Lazignac C, Mihai A, De Gregorio F, Lejeune J, Maris S, Clivaz E, Allen MH. A naturalistic study of consecutive agitated emergency department patients treated with intramuscular olanzapine prior to consent. <i>American Journal Psychiatry</i> 2008; 165: 535-536. 6. Damsa C, Zullino D, Andreoli A, Adam E, Mihai A, Maris S, Cailhol L, Lazignac C, Allen MH. Quality of care in Emergency Psychiatry: Developing an international network. <i>European Psychiatry</i>, 2007; 22: 411-412. 7. Damsa C, Ikelheimer D, Maris S, Lazignac C, Andreoli A, Allen MH. Heisenberg in the ER: observation appears to reduce involuntary intramuscular injections in a psychiatric emergency service. <i>Gen Hosp Psychiatry</i>, 2006; 28: 431-433.
TARGET AUDIENCE	Psychiatrists in private practice and institutions or general practitioners
LANGUAGES	English, French