Evidence based Psychiatric Care

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Editorial

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Massimo di Giannantonio¹, Enrico Zanalda²

¹ Presidente SIP; ² Past President SIP

This volume is entirely devoted to an in-depth examination of aspects of the COVID-19 pandemic in psychiatry. It deals with psychopathology, suicide, Post Traumatic Stress Disorder, Delirium, the field of addiction, child neuropsychiatry and psychogeriatrics. I would like to remind you that the 2021 national congress will be held in virtual mode from 23 to 25 November and will deal with the changes brought about by the COVID-19 pandemic in psychiatry.

At the same time, thanks to the widespread use of the vaccine in Italy, we are returning to normal and have finally been able to schedule our 49th congress in Genoa. This congress, which should have been held in October 2020, is now scheduled for May 2022, so we are confident that we will be able to meet as many members as possible, given that we will be able to use the congress facilities in full by then. The desire to be able to meet in safety and in the presence of members can finally be realised in a city like Genoa, which has shown that if a bridge is quickly rebuilt, the country and of course our society can quickly restart.

We are going through a complicated period because of the difficulty in finding psychiatrists in the Mental Health Departments. On the one hand, there is an increase in both ordinary and complex requests for the ever-increasing number of patients who have committed crimes, while at the same time it is difficult to find staff willing to be employed in mental health departments. The COVID pandemic has further highlighted the criticality of community services, which require significant economic and cultural investments. Our scientific society has contributed to bringing together the directors of the Italian Mental Health Departments and with them has prepared a draft "Progetto Obiettivo Tutela della Salute Mentale" for the period 2021-2130. The Department of Mental Health must be an inclusive, technologically advanced, non-rigid organisation capable of attracting also young people in order to prevent mental illness as much as possible. The inclusion of addiction services and child neuropsychiatry in the Departments of Mental Health makes it possible to better manage young people in the 16-28 age group, when psychotic disorders are more likely to occur and must be intercepted at an early stage if they are to be treated successfully. In addition to this situation, it should be remembered that COVID-19 has led to an increase of about a third in depressive and anxious disorders, with the need to involve psychology services and General Practitioners in order to intervene early when therapy is most effective.

In the next few years there will be the economic investments of the Recovery Plan and it will be crucial for mental health to be adequately considered. For example, it has been shown that some SPDCs can no longer physiologically contain any patients. This is possible, however, if there are adequate spaces and wards with a large number of staff who are well trained in emotional reduction techniques. Even the opening hours of the community services will only become more flexible if there are more staff working there. Personally, I believe that for a mental health centre, 8 hours every weekday is a timetable that allows to visit a sufficient number of patients and to collaborate as a team,





Massimo di Giannantonio



Enrico Zanalda

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Correspondence:

Massimo di Giannantonio digiannantonio@unich.it

Enrico Zanalda enrico.zanalda@yahoo.it

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because it does not oblige to work in shifts. This organisation provides for the 24-hour presence of an emergency service at the Emergency and Acceptance Department, which also has the Psychiatric Diagnosis and Treatment Service (SPDC).

The recent increase in the number of psychiatric trainees should overcome the current difficulty in finding psychiatrists in mental health services over the next three years. Our scientific society is made up of both professions and can help formulate hypotheses for integration between the Ministry of Health and the Ministry of Scientific Research and Universities in the field of mental health. Greater integration in the training of Mental Health Departments and greater use of advanced technologies such as tele-psychiatry are possible solutions to the current operational difficulties of the services.