

PERSPECTIVE SUR L'ORIENTATION DES PATIENTS MÉDICO-LÉGAUX EN BELGIQUE

PERSPECTIVES ON TRIAGE OF MENTALLY DISORDERED OFFENDERS IN BELGIUM

Louis DE PAGE(a), Marie BOULANGER(b), Bénédicte DE VILLERS(b), Angélique DUGAUQUIER(b), Thierry PHAM(c), Xavier SALOPPÉ(d) et Benjamin THIRY(e)

(a) Centre hospitalier Jean Titeca, Bruxelles

(b) Centre neuropsychiatrique Saint-Martin, Dave

(c) Centre de Recherche en Défense sociale, Université de Mons

(d) Centre de Recherche en Défense sociale, CRDS - SCALab, CNRS UMR 9193, Université de Lille (France) - Service de Psychiatrie, Centre hospitalier de Saint-Amand-Les-Eaux (France)

(e) Prison de Bruxelles

Summary

Triage of forensic patients is a concern with growing interest. The present study focuses on the tri-aging of mentally disordered offenders in Belgium. Psychiatric prevalences and lengths of stay of high and medium risk facilities reported in publications and reports were analysed. It appears that forensic patients are triaged according to their diagnostic and risk profile. Lengths of stay increase with the risk level of institutions. Higher comorbidity and personality disorder rates were found in high risk settings, more primary diagnoses of psychotic disorders were found in medium risk facilities. Mental retardation and substance abuse were found to be transnosographic and were found in every risk level.

Key words : forensic, personality disorder, psychosis, triage, length of stay

Résumé

Le triage des patients médico-légaux est une préoccupation internationalement reconnue. Cette étude porte sur le triage des patients ayant commis des délits ou crimes dans un état de déséquilibre mental au moment des faits en Belgique. Nous avons étudié les prévalences psychiatriques et les durées de séjour sur base des données recueillies dans des rapports/publications des institutions high et medium risk. Nous constatons que le triage des patients à travers les différentes institutions, correspond au profil de risque et diagnostique. Les durées de séjours augmentent avec le niveau de sécurité de l'institution. Nous retrouvons plus de comorbidité et de troubles de la personnalité dans les structures high risk, les troubles psychotiques primaires sont plus prévalent dans les structures medium risk, et le retard mental et les troubles liés aux substances sont transnosographiques.

Mots-clés : médico-légal, trouble de la personnalité, psychose, triage, durée d'hospitalisation

Samenvatting

Bij personen met intellectuele deficiëntie zijn agressiviteit en problematische gedragingen belangrijke oorzaken van medische interventies en hospitalisaties. Teneinde het hoofd te bieden aan deze moeilijkheden, is het gebruik van psychotrope stoffen een courant antwoord. Betreffend het gebruik van psychotrope stoffen in het beheer van agressiviteit en problematische gedragingen bestaat er echter geen consensus in de literatuur. De stigmatisatie van deze problemen, de lacunes in het etiologisch onderzoek en de identificatie van de psychiatrische co-morbiditeit schijnen het misbruik van psychotrope stoffen te verergeren en tevens de levenskwaliteit en verwachting van de patiënten te verminderen.

Trefwoorden : forensische psychiatrie, persoonlijkheidsstoornis, psychose, triage, opnameduur

INTRODUCTION

Belgium law has two different systems of compulsory care. The first is a civil commitment measure and is considered to be a "preventive" measure for someone who poses an imminent threat to himself or to others, and rejects voluntary care¹. The second is a legal sanction to an offense committed by an individual in a "mental state that renders him incapable of controlling his/hers actions"². The latter law has been revised a few years ago³, but has only been enacted by fall 2016. The gross of the patients currently resorting under this law have been sentenced, treated, and oriented through the former version of this law.

In medical environments, the process of determining the patient's treatment is referred to as "triage". This term has also been implemented in forensic psychiatry for a pragmatic use of available resources⁴. In Belgium, the triage between both forensic measures discards risk and pathology, is dependent on

whether a complaint has been filed, the perceived seriousness of the committed offense, and the appreciation of the prosecutor who initiates the first determining legal actions. After this legal triage, both populations are oriented to distinct health care systems. The aim of this article is to assess whether this legal response results in adequate pathology and security triage.

The preventive compulsory care is applied to individuals posing a serious threat to themselves or to others. For example, someone who is delusional and aggressive in the streets, gets reported to the police, and brought to an Emergency Department, found to have a psychiatric pathology who renders him dangerous to himself and others, and is brought to a secure psychiatric ward for treatment. This measure last from 8 to 40 days, and can be prolonged by a judge until the individual is fit to regain the community. Figures are unclear, but about 7000 individuals appear to be resorting under this measures⁵. The majority of this population has diagnoses of psychotic disorders because one cannot be committed under this regime for