Most general hospitals in the country have a psychiatric department. According to the Malaysia Mental Health Regulations 2010, “a psychiatric facility shall ensure that each patient has a care plan for the management of the patient during the treatment and upon discharge of the patient”. However not every psychiatric department has a trained consultation-liaison psychiatrist. In Malaysia there are only a few numbers of psychiatrists that have undergone a formal sub-specialty training in Consultation-Liaison Psychiatry.

On the other hand, about 30% to 60% of hospital patients have diagnosable psychiatric disorders. The proportion is even higher if taking into account of those patients who have normal reaction like feeling depressed or anxious as a result of the physical illness. The service is highly needed as a major contribution to patient’s quality of life. A minimal service should have input from psychiatric nursing, psychiatric social worker, occupational therapy and clinical psychology. However due to the limitation of resources and without an in-house consultation-liaison psychiatrist, the general psychiatrist available in each psychiatric facility in the hospital must play a major role in offering the service.

It is emphasized that each patient to be managed in biopsychosocial approach. Patients should be assessed and managed by combining biological, psychological and social predispositions, precipitants and support. There are many reasons why physician refer a patient to psychiatrist. It can be due to mental status examination abnormalities, depression, anxiety, adjustment difficulties and unexplained physical symptoms. The patient may need emotional support or evaluation for transfer to psychiatric services. The physician may need advice on the use of psychopharmacological medications or assistance to determine patient’s mental competency or assistance with patient disposition.

To provide an effective psychiatric consultation, one is recommended to:

- perform a complete mental status examination and relevant portion of a physical exam.
- completely reviews the case notes.
- recommend radiologic and laboratory tests that are diagnostically helpful.
- consider a differential diagnosis among medical, neurologic and psychiatric disorders.
- arrive at a diagnosis based on signs, symptoms, laboratory values and epidemiologic knowledge.
- consider longitudinal and cross-sectional biological, psychological and social aspects of the patient
- make treatment recommendations.
prescribes and conducts the appropriate psychotherapy when needed.
- follow the patient during the entire hospitalization.
- make appropriate post-discharge recommendations.
- communicate with the primary doctor.

Therefore in country like Malaysia where sub-specialty in consultation-liaison psychiatry is limited, the general psychiatrist can still provide the service in the general hospital.

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