Introduction:
Managing the special needs of patients who present with agitation or psychosis can pose a greater challenge to an already busy emergency department as their symptoms can escalate rapidly. Traditional antipsychotics used in the ED, such as haloperidol or ziprasidone often do not fully relieve patient’s symptoms and may require administration of repeat doses or additional medications such as benzodiazepines to achieve effective results. This can induce excess sedation which can lead to longer length of stay in the ED and requires additional time at the bedside by the ED physicians and staff to manage these patients. Adasuve® is an antipsychotic drug that works in a single-use device providing an aerosol form of Loxapine that is rapidly absorbed by the lungs which may offer faster symptom relief, allowing subsequent earlier psychiatric evaluation and disposition.

Methods:
To test this hypothesis, data including time of physician assignment and time physician documented discharge disposition and number of hours physician was assigned to the patients was retrospectively collected from 407 patients who arrived to the emergency department presenting with agitation or psychosis that received Adasuve or other types of antipsychotic medication such as ziprasidone, haloperidol and benzodiazepines or a combination of the three.

Results:
We found that physicians who administered Adasuve spent an average of 8.30 hours assigned to their patient compared to 11.42 hours when the physician administered any other type of antipsychotic medication. This resulted in a significant 3.12-hour difference (p < 0.002) between the two groups.

Conclusion:
In conclusion, less time spent assigned to a patient that received Adasuve can be attributed to faster symptom relief which allowed the physicians to complete their psychological evaluations and develop dispositions more rapidly than with patients that received other antipsychotic agents.