TABLE OF CONTENTS

Understanding Psychosis	1
What is psychosis?	1
Who develops psychosis?	1
What are the signs and symptoms of psychosis?	2
What causes psychosis?	3
How is psychosis treated?	4
NIMH research on coordinated specialty care	5
Clinical trials studying psychosis and related disorders	7
How can I find help?	7
Reprints	8
For more information	9
Disclaimer	9
NIMH Resources	9
Policies and Notices	9
Federal Resources	9

Because of a lapse in government funding, the information on this website may not be up to date, transactions submitted via the website may not be processed, and the agency may not be able to respond to inquiries until appropriations are enacted.

The NIH Clinical Center (the research hospital of NIH) is open. For more details about its operating status, please visit cc.nih.gov.

Updates regarding government operating status and resumption of normal operations can be found at OPM.gov.





(!) In Crisis? Call or Text 988 >>>

Home > Mental Health Information > Brochures and Fact Sheets > Understanding Psychosis

What is psychosis?

Who develops psychosis?

What are the signs and symptoms of psychosis?

What causes psychosis?

How is psychosis treated?

NIMH research on coordinated specialty care

Clinical trials studying psychosis and related disorders

How can I find help?

Reprints

For more information

Understanding Psychosis

What is psychosis?

Psychosis refers to a collection of symptoms that affect the mind, where there has been some loss of contact with reality. During an episode of psychosis, a person's thoughts and perceptions are disrupted and they may have difficulty recognizing what is real and









Who develops psychosis?

It is difficult to know the number of people who experience psychosis. Studies estimate that between





what is not.





15 and 100 people out of 100,000 develop psychosis each year.

Psychosis often begins in young adulthood when a person is in their late teens to mid-20s. However, people can experience a psychotic episode at younger and older ages and as a part of many disorders and illnesses. For instance, older adults with neurological disorders may be at higher risk for psychosis.

What are the signs and symptoms of psychosis?

People with psychosis typically experience delusions (false beliefs, for example, that people on television are sending them special messages or that others are trying to hurt them) and hallucinations (seeing or hearing things that others do not, such as hearing voices telling them to do something or criticizing them). Other symptoms can include incoherent or nonsense speech and behavior that is inappropriate for the situation.

However, a person will often show changes in their behavior before psychosis develops. Behavioral warning signs for psychosis include:

- Suspiciousness, paranoid ideas, or uneasiness with others
- Trouble thinking clearly and logically
- Withdrawing socially and spending a lot more time alone
- Unusual or overly intense ideas, strange feelings, or a lack of feelings
- Decline in self-care or personal hygiene
- Disruption of sleep, including difficulty falling asleep and reduced sleep time
- Difficulty telling reality from fantasy







• Sudden drop in grades or job performance

Alongside these symptoms, a person with psychosis may also experience more general changes in behavior that include:

- Emotional disruption
- Anxiety
- Lack of motivation
- Difficulty functioning overall

In some cases, a person experiencing a psychotic episode may behave in confusing and unpredictable ways and may harm themselves or become threatening or violent toward others. The risk of violence and suicide decreases with treatment for psychosis, so it is important to seek help. If you find that you are experiencing these changes in behavior or notice them in a friend or family member and they begin to intensify or do not go away, reach out to a health care provider.

The National Institute of Mental Health (NIMH)
has information on ways to get help and find a
health care provider or access treatment. If you or
someone you know is struggling or having
thoughts of suicide, call or text the 988 Suicide
and Crisis Lifeline 2 at 988 or chat at
988lifeline.org 2. In life-threatening situations, call
911.

What causes psychosis?

There is no one cause of psychosis. Psychosis appears to result from a complex combination of genetic risk, differences in brain development, and exposure to stressors or trauma. Psychosis may be a symptom of a







or severe depression. However, a person can experience psychosis and never be diagnosed with schizophrenia or any other disorder.

For older adults, psychosis symptoms can be part of a physical or mental illness that emerges later in life. Psychosis can also be a symptom of some diseases of older age, including Parkinson's disease, Alzheimer's disease, and related dementias.

Other possible causes of psychosis include sleep deprivation, certain prescription medications, and the misuse of alcohol or drugs. A mental illness, such as schizophrenia, is typically diagnosed by excluding these other causes.

A qualified mental health professional (such as a psychologist, psychiatrist, or social worker) can provide a thorough assessment and accurate diagnosis. Find tips to help prepare for and get the most out of your visit. For additional resources, including questions to ask your health care provider, visit the Agency for Healthcare Research and Quality .

How is psychosis treated?

Studies have shown that it is common for a person to have psychotic symptoms for more than a year before receiving treatment. Reducing this duration of untreated psychosis is critical because early treatment often means better recovery. A qualified psychologist, psychiatrist, or social worker can make a diagnosis and help develop a treatment plan.

Treatment of psychosis usually includes antipsychotic medication. There are several different types of antipsychotic medications, and they have different side effects, so it is important to work with a health









care provider to determine the medication that is most effective with the fewest side effects.

Treatment also often includes other elements. There is substantial research support for coordinated specialty care, which is a multi-element, recovery-oriented team approach to treating psychosis that promotes easy access to care and shared decision-making among specialists, the person experiencing psychosis, and family members. People experience better outcomes from coordinated specialty care if they begin treatment as soon as possible after psychotic symptoms emerge.

Coordinated specialty care is now the standard of care for early psychosis, according to "The American

Psychiatric Association Practice Guideline for the

Treatment of Patients With Schizophrenia 2."

NIMH research on coordinated specialty care

The Recovery After an Initial Schizophrenia Episode (RAISE) research project, supported by NIMH, established coordinated specialty care as an effective treatment for early psychosis and identified important elements for helping people lead productive, independent lives. Learn more about the RAISE studies.

NIMH continues to prioritize research on and expansion of treatments for early psychosis with the launch of the Early Psychosis Intervention Network (EPINET) in 2019. Through EPINET, NIMH funded awards to establish a national data coordinating center and regional scientific hubs connected to more than 100 coordinated specialty care programs that provide early psychosis treatment in 17 states. The EPINET







website 2 provides resources for researchers, health care providers, administrators, and people experiencing psychosis and their families.

Coordinated specialty care consists of multiple components:

- Individual or group psychotherapy is tailored to a person's recovery goals. Cognitive and behavioral therapies focus on developing the knowledge and skills necessary to build resilience and cope with aspects of psychosis while maintaining and achieving personal goals.
- Family support and education programs teach family members about psychosis as well as coping, communication, and problem-solving skills. Family members who are informed and involved are more prepared to help loved ones through the recovery process.
- Medication management (also called pharmacotherapy) means tailoring medication to a person's specific needs by selecting the appropriate type and dose of medication to help reduce psychosis symptoms. Like all medications, antipsychotic medications have risks and benefits. People should talk with a health care provider about side effects, medication costs, and dosage preferences (daily pill or monthly injection).
- Supported employment and education services focus on return to work or school, using the support of a coach to help people achieve their goals.
- Case management provides opportunities for people with psychosis to work with a case manager to address practical problems and improve access to needed support services.

Learn more about the <u>components of coordinated</u> specialty care.

People with psychosis should be involved in their treatment planning and consulted in making decisions about their care. Their needs and goals should drive







the treatment programs, which will help them stay engaged throughout the recovery process.

It is important to find a mental health professional who is trained in psychosis treatment and who makes the person feel comfortable. With early diagnosis and appropriate treatment, it is possible to recover from psychosis. Some people who receive early treatment never have another psychotic episode. For other people, recovery means the ability to lead a fulfilling and productive life, even if psychotic symptoms sometimes return.

Clinical trials studying psychosis and related disorders

NIMH supports a wide range of research, including clinical trials that look at new ways to prevent, detect, or treat diseases and conditions, such as psychosis and disorders that involve psychosis (like schizophrenia). The goal of a clinical trial is to determine if a new test or treatment works and is safe. Although people may benefit from being part of a clinical trial, they should know that the primary purpose of a clinical trial is to gain new scientific knowledge so that others can be better helped in the future.

Researchers at NIMH and around the country conduct clinical trials with people experiencing psychosis and healthy volunteers. Talk to a health care provider about clinical trials, their benefits and risks, and whether one is right for you. Learn more about participating in clinical trials.

How can I find help?









NIMH does not endorse specific psychosis clinics or evaluate individual practitioners' professional qualifications or competencies. However, several organizations are available to assist in finding a treatment program in your area. The following is not a comprehensive list of all programs, and a program's inclusion on the list does not constitute an endorsement by NIMH.

- Early Psychosis Intervention Network

 (EPINET) ☑: EPINET's Early Psychosis Intervention

 Network Clinics ☑ provide treatment and services
 to individuals with early psychosis across 17

 states.
- National Alliance on Mental Illness (NAMI) 2: The NAMI HelpLine 2 can connect you with the NAMI office in your state and help you find programs close to home. Also, you can talk with someone at the NAMI HelpLine, Monday–Friday, 10:00 a.m.–10:00 p.m. ET, by:
 - o Calling 1-800-950-NAMI (6264)
 - Texting "HelpLine" to 62640
 - Emailing helpline@nami.org
- Psychosis-Risk and Early Psychosis Program
 Network (PEPPNET) ☑: PEPPNET supports an
 Early Psychosis Program Directory ☑ that provides
 services to people at risk for or experiencing early psychosis.
- Substance Abuse and Mental Health Services

 Administration (SAMHSA) ☑: SAMHSA has an

 Early Serious Mental Illness Treatment Locator ☑

 for finding mental health treatment facilities and programs.

Reprints

The information in this publication is in the public domain and may be reused or copied without permission. However, you may not reuse or copy images. Please cite the National Institute of Mental









learn more about our guidelines for reusing NIMH content.

For more information

MedlinePlus ☑ (National Library of Medicine) (en español ☑)

ClinicalTrials.gov 업 (en español 업)

National Institutes of Health

NIH Publication No. 23-MH-8110

Disclaimer

We link to external websites for informational purposes only, but we do not endorse or guarantee their accuracy. Once you leave our site, you will be subject to the new website's privacy policy. Read NIMH's <u>full</u> external linking policy for more information.

NIMH Resources

Health Topics

Brochures and Fact Sheets

Contact Us

Información en español

Policies and Notices

Privacy Policy

Website Policies

FOIA 🗗

Accessibility

HHS Vulnerability Disclosure **조**

Federal Resources

National Institutes of Health

(NIH) 앱

NIH Virtual Tour @

U.S. Department of Health and

Human Services 🗗

USA.gov ♂

The National Institute of Mental Health (NIMH) is part of NIH, a component of the U.S. Department of Health and Human Services.







