

Schizophrenia

Schizophrenia is a serious mental disorder in which people interpret reality abnormally. Schizophrenia may result in some combination of hallucinations, delusions, and extremely disordered thinking and behaviour that impairs daily functioning, and can be disabling. People with schizophrenia require lifelong treatment.

Undifferentiated Schizophrenia:

Undifferentiated schizophrenia is a type of schizophrenia that is diagnosed when an individual meets the criteria for diagnosis of schizophrenia but cannot be classified into any of the five defined subtypes. People who are diagnosed with undifferentiated schizophrenia exhibit symptoms of more than one type of schizophrenia.

Case Study 1

Introduction

Paul is a 17-year-old boy who came to a psychiatric unit of a hospital with a complaint of schizophrenia. He reported himself that the symptoms have affected his relationship with his family particularly mother and his step-father.

Paul reported that his symptoms increased at the age of 16 and has negatively impacted his life. The psychiatric unit diagnosed him undifferentiated schizophrenia.

Presenting Complaints

Paul's self-reported symptoms were also observed by his parents and are consistent with a diagnosis of schizophrenia. Paul experienced

- Lack of interest in activities
- Severe difficulty with empathizing people
- Feeling of isolation

- Suspiciousness and distorted perceptions

Paul's symptoms have been consistent and have encompassed his daily life for years.

For example, he was preoccupied with oversleeping and running late to school, and feeling severely stressed that he would start hearing voices again that tell him to hurt himself. He reported that he had struggled with delusions since his high school.

Paul reported difficulty in forming meaningful relationships with parents and peers. Due to his medication, he had a low libido and had no interest in a romantic relationship.

He also described feeling powerless over handling his own affairs and had difficulty trusting that his parents would not commit him to a hospital again. He had difficulty expressing his feelings and would act out as a bid for attention.

History

The client's family is composed of mother (Sue), 35 years old; stepfather (Jack), 48 years old; and Paul, 18 years old. On the telephone, the mother reported that Paul is very aggressive, throws things, and yells for no apparent motive. Historically, Paul grew up as an only child in a family with his mother and stepfather, in a middle-class, rural community. He excelled in school and participated in sports and Boy Scouts until he began hearing voices at age 13.

He refused to attend school reporting that he was concerned that his teachers were "out to get him" and that there was a plot to discredit him around his peers. He stopped bathing, brushing his teeth, and failed to show any emotional expressions when around his parents.

He became impulsive and took action without thinking about the consequences. He reports being arrested for hitting a pizza delivery boy on the head with a frying pan because voices instructed him to steal the delivery boy's pizzas and his car. After this incident, Paul was

committed by his parents to a psychiatric hospital for 6 weeks. After returning to home Paul became totally emotionless and expressionless. Paul lost many friends and relations due to his aggression stated by his other.

Paul's mother also reported that the real father of Paul had symptoms of schizophrenia, he used to hear voices and used to think that there is someone who is planning to stab him. At the extreme level he started to think that his wife is planning to kill him and run away with all his wealth. Paul's mother reported that this was the main cause of her divorce and Paul never agreed to it and never accepted his step father as his father and never accepted the relationship in fact became quiet after all this happened. The mother also reported that

Paul's mother also reported that Paul was an aggressive child in her childhood. He used to throw tantrums and used to fight with his classmates. He even hit a delivery boy with a frying pan because he thought that the delivery boy is going to kill him.

Stating about his academic performance the mother reported that he was not an easy-going child in school. He used to have low grades in school as well and he wasn't interested in studies as well.

Paul himself reported that his step father was abusive towards him at the start of the marriage. He used to punish him brutally for small things. He told his mother about him but she didn't do anything about him which made him lose feelings for his mother. Moreover, he stated that his father also loses contacts with him and he never talked to him after the divorce.

Many of the symptoms described in this case study are consistent with Diagnostic and Statistical Manual of Mental Disorders (4th ed., text rev.; DSM-IV-TR; American Psychiatric Association; 2000) criteria. Paul demonstrates at least two characteristic symptoms, including delusions (e.g., his beliefs about his teachers) and negative symptoms (e.g., poor personal hygiene and flat facial expression). He experienced clear impairments in social and academic

functioning at the time of the diagnosis; he was no longer able to care for himself or to go to school. Duration criteria of the diagnosis were met because these difficulties lasted longer than 6 months. In addition, other diagnoses were ruled out (e.g., mood disorders, substance abuse, and developmental disorders).

Etiological Consideration

There is a genetic (biological) cause of the disorder. The disorder of schizophrenia runs in his family i.e., his father was a patient of schizophrenia. He used to have hallucinations and Paul used to have same symptoms as his father.

In behavioral perspective, Paul's step father was abusive towards him and he used to have fights with him. The stress from the abusive relationship might trigger the onset of the disorder.

Models related to disorder

Psychoanalytical model

According to psychoanalysis, past experiences and traumas can prove to be a hurdle in life and can lead to serious disorder. In case of Paul the divorce of her parents and the abusive relationship of him with his father can cause the onset of the disease.

Diathesis Stress model

According to this model, the vulnerability towards stress can cause the onset of the disorder and the stress of losing his father and abusive relationship of his step father made Paul vulnerable to stress and this can be one of the causes of the onset of the disorder.

Social selection Theory

When you are vulnerable to a disorder you are selected to drift downward socially and Paul after the onset of the disorder became quiet and expressionless. He lost his friends and

companions. He lost the support of his family. He became aggressive towards things and people started to avoid him because of his attitude.

Conclusion

It can be concluded that with proper medication and intensive care Paul can recover from the disorder. Paul was conceptualized as developmentally delayed, struggling to regain his natural progression into independent, autonomous adolescent. It can be said that he might have a chance of improvement, provided that he was willing to actively participate in family therapy.