Schizophrenia

Overview

Schizophrenia is a serious mental health condition that affects how people think, feel and behave. It may result in a mix of hallucinations, delusions, and disorganized thinking and behavior. Hallucinations involve seeing things or hearing voices that aren't observed by others. Delusions involve firm beliefs about things that are not true. People with schizophrenia can seem to lose touch with reality, which can make daily living very hard.

People with schizophrenia need lifelong treatment. This includes medicine, talk therapy and help in learning how to manage daily life activities.

Because many people with schizophrenia don't know they have a mental health condition and may not believe they need treatment, many research studies have examined the results of untreated psychosis. People who have psychosis that is not treated often have more-severe symptoms, more stays in a hospital, poorer thinking and processing skills and social outcomes, injuries, and even death. On the other hand, early treatment often helps control symptoms before serious complications arise, making the long-term outlook better.

Symptoms

Schizophrenia involves a range of problems in how people think, feel and behave. Symptoms may include:

- **Delusions.** This is when people believe in things that aren't real or true. For example, people with schizophrenia could think that they're being harmed or harassed when they aren't. They could think that they're the target for certain gestures or comments when they aren't. They may think they're very famous or have great ability when that's not the case. Or they could feel that a major disaster is about to occur when that's not true. Most people with schizophrenia have delusions.
- Hallucinations. These usually involve seeing or hearing things that other people
 don't observe. For people with schizophrenia, these things seem real.
 Hallucinations can occur with any of the senses, but hearing voices is most
 common.
- **Disorganized speech and thinking.** Disorganized speech causes disorganized thinking. It can be hard for people with schizophrenia to talk with other people. The answers people with schizophrenia give to questions may not be related to what's being asked. Or questions may not be answered fully. Rarely, speech may

include putting together unrelated words in a way that can't be understood. Sometimes this is called word salad.

- Extremely disorganized or unusual motor behavior. This may show in several ways, from childlike silliness to being agitated for no reason. Behavior isn't focused on a goal, so it's hard to do tasks. People with schizophrenia may not want to follow instructions. They may move in ways that are not typical or not appropriate to the social setting. Or they may not move much or respond at all.
- **Negative symptoms.** People with schizophrenia may not be able to function in the way they could before their illness started. For example, they may not bathe, make eye contact or show emotions. They may speak in a monotone voice and not be able to feel pleasure. Also, they may lose interest in everyday activities, socially withdraw and have a hard time planning ahead.

Symptoms can vary in type and how severe they are. At times, symptoms may get better or worse. Some symptoms may be present at all times.

People with schizophrenia usually are diagnosed in the late teen years to early 30s. In men, schizophrenia symptoms usually start in the late teens to early 20s. In women, symptoms usually begin in the late 20s to early 30s. There also is a group of people — usually women — who are diagnosed later in life. It isn't common for children to be diagnosed with schizophrenia.

Symptoms in teenagers

Schizophrenia symptoms in teenagers are like those in adults, but the condition may be harder to pinpoint. That's because some early symptoms of schizophrenia — those that occur before hallucinations, delusions and disorganization — are commonly seen in many teens, such as:

- Withdrawing from friends and family.
- Not doing well in school.
- Having trouble sleeping.
- Feeling irritable or depressed.
- Lacking motivation.

Also, the use of recreational drugs, such as marijuana, stimulants like cocaine and methamphetamines, or hallucinogens, can cause similar symptoms. Compared with adults with schizophrenia, teens with the condition may be less likely to have delusions and more likely to have hallucinations.

When to see a doctor

People with schizophrenia often don't know that they have a mental condition that needs medical attention. As a result, family or friends often need to get them help.

Helping someone who may have schizophrenia

If people you know have symptoms of schizophrenia, talk to them about your concerns. While you can't force them to seek help, you can offer encouragement and support. You also can help them find a healthcare professional or mental health professional.

Causes

It isn't known what causes schizophrenia. But researchers believe that a mix of genetics, brain chemistry and environment can play a part.

Changes in certain naturally occurring brain chemicals, including neurotransmitters called dopamine and glutamate, may play a part in schizophrenia. Neuroimaging studies show changes in the brain structure and central nervous systems of people with schizophrenia. While researchers haven't yet been able to apply these findings to new treatments, the findings show that schizophrenia is a brain disease.

Risk factors

Although the cause of schizophrenia is not known, these factors seem to make schizophrenia more likely:

- · A family history of schizophrenia.
- Life experiences, such as living in poverty, stress or danger.
- Some pregnancy and birth issues, such as not getting enough nutrition before or after birth, low birth weight, or exposure to toxins or viruses before birth that may affect brain development.
- Taking mind-altering also called psychoactive or psychotropic drugs as a teen or young adult.

Complications

Left untreated, schizophrenia can lead to severe problems that affect every area of life.

Complications that schizophrenia may cause or be related to include:

- Suicide, suicide attempts and thoughts of suicide.
- Anxiety disorders and obsessive-compulsive disorder, also known as OCD.
- · Depression.
- Misuse of alcohol or other drugs, including nicotine.
- Not being able to work or attend school.

- Money problems and homelessness.
- Social isolation.
- Health and medical problems.
- Being victimized.
- Aggressive or violent behavior, though people with schizophrenia are more likely to be assaulted rather than assault others.

Prevention

There's no sure way to prevent schizophrenia. But staying with your treatment plan can help stop symptoms from returning or getting worse. Researchers hope that learning more about risk factors for schizophrenia may lead to earlier diagnosis and treatment.

Diagnosis

Diagnosis of schizophrenia involves ruling out other mental health conditions and making sure that symptoms aren't due to substance misuse, medicine or a medical condition.

Finding a diagnosis of schizophrenia may include:

- **Physical exam.** This may be done to rule out other problems that could cause similar symptoms and check for any related complications.
- **Tests and screenings.** These may include tests that help rule out conditions with similar symptoms and screening for alcohol and drug use. A healthcare professional also may request imaging studies, such as an MRI or a CT scan.
- Mental health evaluation. A healthcare professional or mental health
 professional checks mental status by noting how a person looks and behaves,
 and asking about thoughts, moods, delusions, hallucinations, substance use,
 and potential for violence or suicide. This evaluation includes family and
 personal history.

Treatment

Lifelong treatment with medicines and psychosocial therapy can help manage schizophrenia, though there is no cure for it. These treatments are needed, even when symptoms ease. Some people may need to stay in a hospital during a crisis if symptoms are severe.

A psychiatrist experienced in treating schizophrenia usually guides treatment. The treatment team also may include a psychologist, social worker, psychiatric nurse and

case manager to coordinate care. The full-team approach may be available in clinics with expertise in schizophrenia treatment.

Psychosocial interventions

Once symptoms get better, continuing to take medicine is important. It's also important to take part in psychological and social or psychosocial treatments, including:

- Individual therapy. Talk therapy, also known as psychotherapy, may help improve patterns of thought. Also, learning to cope with stress and identify early warning signs of the return of symptoms can help people manage their illness.
- **Social skills training.** This focuses on making communication and social interactions better and making people with schizophrenia better able to take part in daily activities.
- **Family therapy.** During this therapy, families learn how to deal with schizophrenia. They also get support.
- Vocational rehabilitation and supported employment. This counseling focuses on helping people with schizophrenia prepare for, find and keep jobs.

Most people with schizophrenia need support in daily life. Many communities have programs to help people with schizophrenia with jobs, housing, self-help groups and crisis situations. A case manager or someone on the treatment team can help find resources. With the right treatment, most people with schizophrenia can manage their illness.

Coping and support

Coping with a mental condition as serious as schizophrenia can be hard for people with the condition and their friends and family. Here are some steps that may help:

- Build strong relationships with members of your treatment team. Working
 closely with your healthcare professional, mental health professional and other
 care team members makes you better able to fully take part in, and benefit from,
 treatment.
- Learn about schizophrenia. Education about this condition can help you understand how important it is to follow your treatment plan. Education also can help friends and family learn more about the condition and be more compassionate toward those who have it.
- **Get more sleep.** If you're having trouble sleeping, lifestyle changes can help.

- **Stay focused on goals.** Managing schizophrenia is an ongoing process. Keeping treatment goals in mind can help you stay motivated, manage the condition and work toward your goals.
- **Don't use alcohol or drugs.** Using alcohol, nicotine or recreational drugs can make it hard to treat schizophrenia. But quitting can be hard. Get advice from your healthcare team on how best to quit.
- **Ask about social services.** These services may be able to help with affordable housing, transportation and other daily activities.
- Learn relaxation and stress management. Stress management techniques such as meditation, yoga or tai chi may help you and your loved ones.
- **Join a support group.** Support groups can help you reach out to others facing the same types of challenges. Support groups also may help family and friends cope.