Understanding Schizophrenia

Schizophrenia is a major psychiatric illness. People often experience symptoms such as hallucinations (hearing, seeing, feeling, or smelling things that aren't there) or delusions (unusual beliefs that other people don't have, such as paranoid beliefs that others are against them). They may also have other symptoms, such as low motivation, poor attention, and inability to experience pleasure. Sometimes it is hard for people with schizophrenia to distinguish fantasy from reality.

The cause of schizophrenia is unknown. Scientists believe it may be caused by an imbalance in neurotransmitters (brain chemicals), especially the chemical dopamine. Imbalances of these neurotransmitters may be caused by genetic factors, early effects of the environment on the developing brain (such as when the baby is in the womb or during birth), or both.

About 1% of people develop schizophrenia during their lifetime. Schizophrenia usually develops between the ages of 16 and 30, but may develop after that. It is a lifelong disorder.

Schizophrenia is diagnosed with a clinical interview. The interviewer checks to see whether a person has experienced symptoms and, if so, for how long. To be diagnosed with schizophrenia, a person must experience a decrease in social functioning (school, work, social relationships, or self-care) for at least 6 months. The clinician must also make sure that the person has no physical problems that could cause problems like those of schizophrenia, such as a brain tumor.

Schizophrenia is a major psychiatric illness that is diagnosed with a clinical interview. Schizophrenia occurs in 1% of people.

SYMPTOMS OF SCHIZOPHRENIA

Two broad types of symptoms are very common in schizophrenia: psychotic symptoms and negative symptoms. Psychotic symptoms are thoughts, perceptions, and behaviors that are present in people with schizophrenia, but not in other people. These symptoms often reflect difficulties distinguishing between what is real and not real. Negative symptoms are the absence of thoughts, perceptions, and behaviors that are present in other people. A person does not have to have all of the following symptoms to be diagnosed with schizophrenia.

Common Psychotic Symptoms

- Hallucinations
- Delusions
- Bizarre, disorganized, or strange behaviors
- Disorganized speech

(continued)

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Common Negative Symptoms

- Flattened affect (diminished expressiveness)
- Apathy and low motivation
- Loss of pleasure
- Lack or low amount of speech, or limited content of speech

Common symptoms of schizophrenia include:

- Psychotic symptoms (hallucinations, delusions, etc.)
- Negative symptoms (apathy and low motivation, loss of pleasure, etc.)
- Disorganization

FREQUENTLY ASSOCIATED SYMPTOMS

Some people with schizophrenia may also experience cognitive problems and other symptoms, though these are not used in making the diagnosis of schizophrenia. Cognitive problems include difficulties with memory, trouble with abstract reasoning, difficulty planning, and attention problems. Some other associated symptoms are depression, fluctuating mood, anxiety, and anger or hostility.

SIMILAR PSYCHIATRIC DISORDERS

Schizophrenia shares some symptoms with other major psychiatric disorders, such as bipolar disorder, major depression, and schizoaffective disorder. However, there are important differences between schizophrenia and these other disorders. People with bipolar disorder or major depression sometimes experience hallucinations or delusions when their mood is abnormal (depressed or manic). In contrast, people with schizophrenia or schizoaffective disorder often continue to experience hallucinations or delusions even when their mood is normal. People with schizoaffective disorder experience prolonged or frequent problems with their mood (either depression, mania, or both), whereas people with schizophrenia tend to have less severe problems with their mood.

The symptoms of schizophrenia overlap with those of other psychiatric disorders.

TREATMENT

Antipsychotic medications are used to treat schizophrenia. Sometimes antidepressant and mood-stabilizing medications are used as well. It is very important that medications are taken regularly to decrease symptoms, to prevent relapses, and to make sure that the illness does not become more severe.

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Many people with schizophrenia also benefit from social skills training, supported employment, case management, family treatment, and learning illness management techniques, such as how to prevent relapses and cope with symptoms.

Schizophrenia is treated with medication, as well as other services (including family treatment, vocational rehabilitation, and skills training approaches).

FURTHER READING

- Mueser, K. T., & Gingerich, S. L. (in press). Coping with Schizophrenia: A Guide for Families (2nd ed.). New York: Guilford Press.
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- Torrey, E. F. (2001). Surviving Schizophrenia: A Family Manual (4th ed.). New York: Harper Trade.