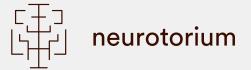


Frequently asked questions about schizophrenia

Schizophrenia





Frequently asked questions about schizophrenia

What is schizophrenia?

Schizophrenia is a serious mental-health disorder that can have debilitating symptoms and a significant impact on daily living. The disorder affects your way of thinking, feeling and behaving. People with schizophrenia experience symptoms of **psychosis**, which is a combination of '**positive**', 'negative' and 'cognitive' symptoms. Examples of such symptoms include:

- Hallucinations, delusions, paranoia and confused thoughts and feelings (positive symptoms)
- Withdrawal from family and friends, and lack of interest and general motivation (negative symptoms)
- Poor or decreased decision-making capabilities, trouble focusing or paying attention and problems with working memory (cognitive symptoms).

How does schizophrenia affect people's lives?

At various points during their lives, people with schizophrenia have to manage the symptoms of psychosis. Dealing with beliefs or experiences that others do not believe or understand can be very frightening, isolating and frustrating. Social withdrawal and lack of motivation can lead to people with schizophrenia becoming isolated and alone. They may also lose their motivation to look after their physical health and hygiene, and become uninterested in work, education or hobbies. This can lead to difficulties in maintaining relationships, staying in employment or education, and looking after their physical health.

What are the causes of schizophrenia?

There are multiple factors that when combined can cause schizophrenia. These include genetic, environmental (such as stress or trauma), psychological, physical and addictive factors.

How common is schizophrenia?

Understanding the prevalence of schizophrenia is difficult, as the symptoms vary from person to person; however, it's estimated that approximately 1% of the population will experience schizophrenia symptoms within their lifetime. Due to the differences in symptoms, some people may never receive a formal diagnosis of schizophrenia.

What are the symptoms of schizophrenia?

Symptoms vary widely from person to person and are grouped into positive, negative and cognitive categories. Symptoms can be continuous or intermittent throughout a person's life and often occur in repeated cycles of improvement and deterioration.

It's important that you seek help as soon as you feel something is wrong, even before symptoms arise. The earlier the intervention, the more likely you are to return to your previous daily life.

What are the positive symptoms of schizophrenia?

Positive symptoms include changes in behaviour or thoughts. Examples include hallucinations and delusions, and having disorganised thoughts and speech. A person may hear voices or may feel others are planning to harm them or are able to read their thoughts.

What are the negative symptoms of schizophrenia?

Negative symptoms can appear years before a first acute episode of schizophrenia. Symptoms include social withdrawal, lack of emotional expression, lack of motivation and reduced ability to speak or find pleasure in life.

What are the cognitive symptoms of schizophrenia?

Cognitive symptoms involve poor or decreased ability to understand information and use it to make decisions, trouble in focusing, paying attention or concentrating, and problems with the ability to use information immediately after learning it.

What are the signs of an acute episode?

It's important to identify the signs of a schizophrenia attack to help manage your disease and to recognise if you are becoming unwell. Signs of an attack may include:

- Loss of appetite
- Feeling anxious or stressed
- Disturbed sleep
- Hearing voices

- Seeing things that are not there
- Difficulty in concentrating
- Feeling suspicious or fearful.

How is schizophrenia diagnosed?

Schizophrenia is usually diagnosed after an assessment by a psychiatrist. No single test can diagnose schizophrenia and diagnosis usually involves an in-depth interview. Your family members may also be interviewed.

Diagnosis involves ruling out other mental-health disorders and determining that your symptoms are not due to drug use, medication or any other medical condition that may mimic schizophrenia. To determine a diagnosis, the following may be performed:

- Tests and screening
- Psychiatric evaluation

Diagnostic criteria for schizophrenia.

How is schizophrenia treated?

To manage schizophrenia, patients are treated with medications and psychosocial therapy (see the What Is Psychosocial Therapy? FAQ below). Schizophrenia requires lifelong treatment regardless of whether symptoms have subsided. Hospitalisation may be needed during crisis periods or times of severe symptoms to ensure safety, proper nutrition, adequate sleep and basic hygiene.

Treatment is usually guided by a psychiatrist experienced in treating schizophrenia. A psychologist, social worker, psychiatric nurse and possibly a case manager to coordinate care may also be involved in your treatment team.

What medications are used to treat schizophrenia?

Antipsychotics are the backbone of medication for schizophrenia and are thought to control symptoms by balancing the brain neurotransmitter dopamine. They have been proven to relieve the psychotic effects of schizophrenia such as delusions, hallucinations and incoherence.

Your psychiatrist may try different drugs, different doses or combinations over time to effectively manage signs and symptoms at the lowest possible dose. Other medications also may help, such as antidepressants or anti-anxiety drugs. Improvements may be seen within the first few weeks of treatment.

What are the common side effects of antipsychotics?

Side effects vary depending on the individual and on the antipsychotic, and can range from minimal to having a serious effect on your daily life. Some of the most serious side effects related to antipsychotics are:

- Blurred vision
- Heart problems
- Emotional effects
- Seizures

- Weight gain
- Bed-wetting
- Skin problems.

It's important to talk to your doctor about the benefits and side effects of any medication that is prescribed.

What is psychosocial therapy?

Psychosocial therapy is a combination of psychological and social interventions, and is commonly given in combination with continued medication once the attack subsides. It's important in relieving behavioural symptoms of schizophrenia and helping with problems such as difficulty in communicating as well as maintaining relationships and employment or education. Interventions include:

- Individual therapy
- Family therapy

- Social skills training
- Vocational rehabilitation and supported employment.

What if I do not respond to treatments?

Different strategies can be proposed when the disorder is not properly controlled by usual antipsychotics, including psychotherapy (such as **cognitive behavioural therapy**), the use of specific antipsychotics (such as clozapine), other psychotropic drugs (such as mood stabilisers when an associated mood disorder is observed) or brain stimulation (such as **electroconvulsive therapy** or repetitive transcranial magnetic stimulation).

Next: Lexicon

Lexicon

Antidepressant. A type of medication for depression that is thought to balance chemicals within the brain, known as neurotransmitters, which can have an effect on a wide variety of functions, such as heart rate, sleep, mood and emotion. They are usually used in combination with other therapies in the treatment of severe depression.

Antipsychotic. A type of medication used to treat the symptoms of psychosis, which include hallucinations and delusions.

Cognitive behavioural therapy (CBT). A type of talking therapy that is most commonly used to treat depression and anxiety. It can help you to change the way you think and behave.

Cognitive symptoms. Cognitive symptoms are a class of symptoms experienced by people with schizophrenia, and include a poor or decreased ability to understand information and use it to make decisions (executive functions), trouble in focusing, paying attention or concentrating, and problems with the ability to use information immediately after learning it (working memory).

Electroconvulsive therapy (ECT). A treatment that involves sending electrical currents through an individual's brain causing a surge of electrical activity, ultimately altering brain circuits and relieving symptoms of mental-health disorders.

Negative symptoms. Negative symptoms are a class of symptoms experienced by people with schizophrenia and can appear years before a first acute episode of schizophrenia. Symptoms include social withdrawal, lack of emotional expression, lack of motivation and reduced ability to speak or find pleasure in life.

Neurotransmitter. A neurotransmitter is a chemical messenger that carries, boosts and balances signals between neurons, or nerve cells, and other cells in the body. These chemical messengers can affect a wide variety of both physical and psychological functions, including heart rate, sleep, appetite, mood and fear.

Positive symptoms. Positive symptoms are a class of symptoms experienced by people with schizophrenia and involve changes in behaviour or thoughts. Examples include hallucinations (when a person hears, sees, feels, smells or tastes things that do not exist) and delusions – for example, a person may hear voices or may feel others are planning to harm them or are able to read their thoughts. Disorganised thoughts and feelings may also be experienced.

Psychosis. Symptoms of psychosis are categorised into positive, negative and cognitive symptoms.