



Schizophrenia

What is schizophrenia

Schizophrenia is an illness affecting the normal functioning of the brain. It can interfere with a person's ability to think, feel and act.

Schizophrenia is characterised by two or more of the following:

- Delusions;
- Hallucinations;
- Disorganised speech;
- Grossly disorganised or catatonic behaviour; and
- Negative symptoms.

These symptoms must impair social and occupational functioning and be continuously present for at least six months.

Some people with schizophrenia will recover completely, and for others treatment can alleviate the debilitating symptoms. However, for many it is a prolonged illness which can involve years of distressing symptoms and disability.

Contrary to popular belief, schizophrenia is *not* a split personality.

Symptoms

People with schizophrenia experience a number of positive and negative symptoms, some of which are listed below.

Positive Symptoms

A **delusion** is a firmly held belief that causes significant distress to the individual.

A **hallucination** is characterised by seeing, hearing, feeling, and/or smelling something that is not physically present. For example, an individual who experiences auditory hallucinations may hear voices when no one is talking.

When a person has **disorganized speech**, their words or sentences are not connected properly.

A **thought disorder** is the inability to carry through a line of thinking in a way that makes sense to other people. This may result in speech that is disconnected, illogical and jumbled.

Negative Symptoms

- Lack of motivation.
- Social withdrawal.
- Lack of insight.
- Reduced emotion or interest in things.
- Inappropriate response.

Not all of the above symptoms may be evident.

“contrary to popular belief, schizophrenia is NOT a split personality”

Early Changes

A person may experience the following early changes before more obvious symptoms of psychosis develop.

Changes in Mood: depression & lack of interest or drive, fear, anxiety and tension, irritability, quick temper or aggression.

Changes in Behaviour: decreased appetite, social withdrawal, sleeping problems, unusual rituals, reduced attendance at school or work.

Changes in Thinking: concentration or memory problems, preoccupation with one or two things, ruminations on themes.

Prevalence

The prevalence of psychotic disorders in the adult population of urban areas in Australia is in the range of 4 to 7 per 1000 depending on the catchment area.

Schizophrenia and schizoaffective disorder accounts for over 60% of the prevalence. (Jablensky et al, 1999).

Causes

There are a number of theories about what causes schizophrenia, but so far the biological mechanisms behind the disease are not fully understood.

Schizophrenia tends to run in the families. A first degree relative (parent, sibling, children) has

approximately 10% chance of developing the disease compared to 1% of the general population. Generally though, a range of factors have to be present for schizophrenia to develop.

Stressful events may precede or increase the chance of someone already vulnerable to developing schizophrenia. Many researchers believe an excess of dopamine (a specific chemical critical to communication between brain cells) plays a part. Increased levels of dopamine may explain some of the psychotic symptoms.

Some recreational drug use such as cannabis, ecstasy and amphetamines can mimic the symptoms of psychosis and have been associated with triggering episodes of the illness.

Treatment

Treatments can greatly reduce and/or control symptoms of schizophrenia, allowing the person to live a productive and fulfilling life. For the best results, treatment should generally include a combination of medication and community support.

Certain **antipsychotic drugs** can assist the brain to restore its usual chemical balance, thus reducing or eliminating some of the symptoms. They can lessen delusions, hallucinations, incoherent speech and thinking, and reduce confusion. However, little is understood about how antipsychotics work, and not everybody finds them effective. Furthermore, they can have very serious side effects which cause major concern some to users.

Cognitive behavioural therapy (CBT) can be used to heighten awareness of the inconsistency of delusions and to develop practical coping mechanisms for persistent symptoms

The focus for action within a **psychiatric rehabilitation framework** include the following:

Illness Management

This may involve treating psychotic episodes via hospitalisation or maintenance on anti-psychotic medication as a buffer against vulnerabilities resulting in symptom relief.

Skills Development

Involves the reacquisition of lost daily living skills, vocational skills or social skills; or the development of alternative skills lost since the onset of illness,

and the development of age appropriate skills that were never acquired as a result of being unwell.

Support Development

Involves regaining, enhancing or replacing family or peer networks; access to secure, low stress housing and financial supports; and access to professional and disability support networks.

Personal Adaptation

This may involve gaining assistance to resolve personal trauma of having a psychotic episode, re-establishing an identity that integrates the experience of psychosis, and awareness of continuing vulnerability. This may occur through consumer support, counselling or psychotherapy.

Research Programs

Because so little is understood about schizophrenia, a number of research projects using varied techniques are currently being undertaken by the Institute. Visit our website or request our latest Annual Report to find out more about what's happening in the following laboratories:

- Behavioural Neuroscience Laboratory
- Rebecca L Cooper Laboratories
- Pharmacogenomics
- Molecular Psychopharmacology
- Cognitive Neuropsychiatry
- Oxidative Stress Laboratories
- Synaptic Neurobiology Laboratory

Support Services

A number of support services exist to help people who experience schizophrenia and their families and friends. These include:

- Mental Illness Fellowship Victoria
Tel: (03) 8486 4200
- Sane Australia
Tel: 1800 18 7263
- Association of Relatives and Friends of the Emotionally and Mentally Ill (ARAFEMI)
Tel: (03) 9810 9300