

Schizophrenia

NDSCS Counseling Services hopes the following information will help you gain a better understanding of schizophrenia. If you believe you or someone you know is experiencing concerns related to schizophrenia and would like to visit with a counselor, please call NDSCS Counseling Services for an appointment - 701.671.2286.

Definition

Schizophrenia is a chronic and severe mental disorder that affects how a person thinks, feels, and behaves. People with schizophrenia may seem like they have lost touch with reality. Although schizophrenia is not as common as other mental disorders, the symptoms can be very disabling.

Signs and Symptoms

Symptoms of schizophrenia usually start between ages 16 and 30. In rare cases, children have schizophrenia too.

The symptoms of schizophrenia fall into three categories: positive, negative, and cognitive.

Positive symptoms: "Positive" symptoms are psychotic behaviors not generally seen in healthy people. People with positive symptoms may "lose touch" with some aspects of reality. Symptoms include:

- Hallucinations
- Delusions
- Thought disorders (unusual or dysfunctional ways of thinking)
- Movement disorders (agitated body movements)

Negative symptoms: "Negative" symptoms are associated with disruptions to normal emotions and behaviors. Symptoms include:

- "Flat affect" (reduced expression of emotions via facial expression or voice tone)
- Reduced feelings of pleasure in everyday life
- Difficulty beginning and sustaining activities
- Reduced speaking

Cognitive symptoms: For some patients, the cognitive symptoms of schizophrenia are subtle, but for others, they are more severe and patients may notice changes in their memory or other aspects of thinking. Symptoms include:

- Poor "executive functioning" (the ability to understand information and use it to make decisions)
- Trouble focusing or paying attention

• Problems with "working memory" (the ability to use information immediately after learning it)

Risk Factors

There are several factors that contribute to the risk of developing schizophrenia.

Genes and environment: Scientists have long known that schizophrenia sometimes runs in families. However, there are many people who have schizophrenia who don't have a family member with the disorder and conversely, many people with one or more family members with the disorder who do not develop it themselves.

Scientists believe that many different genes may increase the risk of schizophrenia, but that no single gene causes the disorder by itself. It is not yet possible to use genetic information to predict who will develop schizophrenia.

Scientists also think that interactions between genes and aspects of the individual's environment are necessary for schizophrenia to develop. Environmental factors may involve:

- Exposure to viruses
- Malnutrition before birth
- Problems during birth
- Psychosocial factors

Different brain chemistry and structure: Scientists think that an imbalance in the complex, interrelated chemical reactions of the brain involving the neurotransmitters (substances that brain cells use to communicate with each other) dopamine and glutamate, and possibly others, plays a role in schizophrenia.

Some experts also think problems during brain development before birth may lead to faulty connections. The brain also undergoes major changes during puberty, and these changes could trigger psychotic symptoms in people who are vulnerable due to genetics or brain differences.

Treatments and Therapies

Because the causes of schizophrenia are still unknown, treatments focus on eliminating the symptoms of the disease. Treatments include:

Antipsychotics

Antipsychotic medications are usually taken daily in pill or liquid form. Some antipsychotics are injections that are given once or twice a month. Some people have side effects when they start taking medications, but most side effects go away after a few days. Doctors and patients can work together to find the best medication or medication combination, and the right dose. Check the U.S. Food and Drug Administration (FDA) website: (http://www.fda.gov/), for the latest information on warnings, patient medication guides, or newly approved medications.

Psychosocial Treatments

These treatments are helpful after patients and their doctor find a medication that works. Learning and using coping skills to address the everyday challenges of schizophrenia helps people to pursue their life goals, such as attending school or work. Individuals who participate in regular psychosocial treatment are less likely to

have relapses or be hospitalized. For more information on psychosocial treatments, see the <u>Psychotherapies</u> webpage on the NIMH website.

Coordinated specialty care (CSC)

This treatment model integrates medication, psychosocial therapies, case management, family involvement, and supported education and employment services, all aimed at reducing symptoms and improving quality of life. The NIMH Recovery After an Initial Schizophrenia Episode (RAISE) research project seeks to fundamentally change the trajectory and prognosis of schizophrenia through coordinated specialty care treatment in the earliest stages of the disorder. RAISE is designed to reduce the likelihood of long-term disability that people with schizophrenia often experience and help them lead productive, independent lives.

How can I help someone I know with schizophrenia?

Caring for and supporting a loved one with schizophrenia can be hard. It can be difficult to know how to respond to someone who makes strange or clearly false statements. It is important to understand that schizophrenia is a biological illness.

Here are some things you can do to help your loved one:

- Get them treatment and encourage them to stay in treatment
- Remember that their beliefs or hallucinations seem very real to them
- Tell them that you acknowledge that everyone has the right to see things their own way
- Be respectful, supportive, and kind without tolerating dangerous or inappropriate behavior
- Check to see if there are any support groups in your area

Join a Study

Clinical trials are research studies that look at new ways to prevent, detect, or treat diseases and conditions, including schizophrenia. During clinical trials, treatments might be new drugs or new combinations of drugs, new surgical procedures or devices, or new ways to use existing treatments. The goal of clinical trials is to determine if a new test or treatment works and is safe. Although individual participants may benefit from being part of a clinical trial, participants should be aware that the primary purpose of a clinical trial is to gain new scientific knowledge so that others may be better helped in the future.

Please note: Decisions about whether to participate in a clinical trial, and which ones are best suited for a given individual, are best made in collaboration with your licensed health professional.

How do I find Clinical Trials at NIMH/NIH?

Scientists at the NIH campus conduct research on numerous areas of study, including cognition, genetics, epidemiology, and psychiatry. The studies take place at the NIH Clinical Center in Bethesda, Maryland and require regular visits. After the initial phone interview, you will come to an appointment at the clinic and meet with one of our clinicians.

Find NIH-funded studies currently recruiting participants with schizophrenia by using <u>ClinicalTrials.gov</u> (search schizophrenia) or visit <u>Join a Study: Adults - Schizophrenia</u>.

How Do I Find a Clinical Trial Near Me?

To search for a clinical trial near you, you can visit <u>ClinicalTrials.gov</u>. This is a searchable registry and results database of federally and privately supported clinical trials conducted in the United States and around the world. ClinicalTrials.gov gives you information about a trial's purpose, who may participate, locations, and phone numbers to call for more details. This information should be used in conjunction with advice from health professionals.

Learn More

Free Booklets and Brochures

- <u>Schizophrenia</u>: A detailed booklet that provides an overview on schizophrenia. It describes symptoms, risk factors, and treatments. It also contains information on getting help and coping. Also available <u>en Español</u>.
- What is Schizophrenia? A brief brochure on schizophrenia that offers basic information on signs and symptoms, treatment, and finding help.

Research and Statistics

- Recovery After an Initial Schizophrenia Episode (RAISE): The NIMH-launched RAISE is a large-scale research initiative that began with two studies examining different aspects of coordinated specialty care (CSC) treatments for people who were experiencing first episode psychosis.
- <u>NIMH Schizophrenia Spectrum Disorders Research Program</u>: This program administers funding to scientists doing research into the origins, onset, course, and outcome of schizophrenia, schizoaffective disorder, and such related conditions as schizotypal and schizoid personality disorders.
- **Schizophrenia Statistics**: This webpage provides information on the best statistics currently available on the prevalence and treatment of schizophrenia in the U.S.
- Schizophrenia Clinical Trials at NIMH: Adults: This webpage lists NIMH clinical trials that are currently recruiting adults with schizophrenia.
- <u>Schizophrenia Clinical Trials at NIMH: Children</u>: This webpage lists NIMH clinical trials that are currently recruiting children with schizophrenia.

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