

Schizophrenia

What is schizophrenia?

It is a disorder of the mind that results in disorganisation of normal thinking and feeling. Schizophrenia, which literally means 'split mind', is often thought of as a split or double personality (the 'Dr Jekyll and Mr Hyde' perception), but this is a false impression as there is no such thing. It is not an intellectual disability.

Schizophrenia can come in various forms with different symptoms and outcomes. The common type is described here.

What is the cause of schizophrenia?

The cause or causes are not yet fully understood, but we know that there is a malfunction or breakdown in some cells in the brain most likely due to a chemical imbalance or deficiency. This problem can be triggered by very stressful circumstances, illness, drugs (e.g. cannabis), major surgery and childbirth. It is not caused by family upbringing or other parental influences. However, there is a strong genetic factor involved—it can run in families.

What are the symptoms?

The 'attacks' may come on suddenly or, as is more usual, gradually with a withdrawal from daily activities and the onset of unusual or strange behaviour. The symptoms include:

- mixed-up thinking (called *thought disorder*)
- mixed-up feelings (feeling 'unreal')
- hallucinations, especially hearing imagined things
- delusions (a fixed wrong belief)
- lack of insight
- loss of energy and initiative
- inappropriate emotions
- withdrawal from social activities
- slow or unusual movements
- bizarre behaviour
- deterioration in work and study performance
- tension, anxiety or depression

The hallucinations are typically auditory, such as 'hearing' strange voices in the head or in the air. Visual hallucinations (seeing things) and tactile hallucinations (feeling things) are uncommon.

What does the onlooker notice?

The affected person appears to become withdrawn, vague, 'flat', unable to converse normally and logically, unable to answer questions normally (may be blank) and lacking in feeling.

His or her emotions will appear flat and inappropriate (such as laughing at something sad or serious and crying without cause). The person may start neglecting his or her personal appearance.

If the schizophrenia is severe, the person will seem very disturbed and irrational.

How does the sufferer feel?

The person feels confused, lonely and afraid. He or she may be aware of loss of control of thinking and behaviour. The person may feel that he or she is being controlled from outside and perhaps may feel under threat from people who actually love him or her. The person may feel great tension and anger.

How common is schizophrenia and who gets it?

About 1 person in 100 has it to some degree while about 4 in 1000 will be suffering from it at a given point in time. It is typically seen in young adults—most people develop it between the ages of 15 and 25. Men and women are equally susceptible. Anyone can develop it, but it does tend to run in families.

What are the risks?

The main risks occur during severe attacks, when sufferers can do physical harm to themselves and others. This applies especially to the older paranoid schizophrenic. They also may try to commit suicide.

What should relatives or friends do?

Medical care is vital for these people—if you suspect someone in your family has the problem, persuade him or her to visit the doctor, whom you should contact beforehand to explain your observations. The person can be most unco-operative and upset, but must not be left alone—medical help must be obtained. The person will have little or no insight into the problem and will often claim that there is nothing wrong. A lot of family support is needed.

What is the treatment?

Effective treatment is available in the form of major tranquillising drugs, psychotherapy and rehabilitation. Sometimes electroconvulsive therapy may be required. Once the problem is under control, the patient needs ongoing supervision. Support is available from various organisations. Ask about support groups.

What is the outlook?

Most people recover and lead normal lives but may require regular checks or constant medication. Times of extreme stress create risk of relapse. There are varying degrees of schizophrenia, from mild to severe. The mild cases usually 'bounce back' to normality, while the severe ones can have problems most of their lives, especially if unsupervised.