

What is schizophrenia?

It is a mental disorder which affects thinking, feeling and behaviour. It is most likely to start between the ages of 15 to 35 years old and will affect about one in every 100 people during their lifetime.

Although the word 'schizophrenia' is often associated with violence in the media, this is the exception rather than the rule. Hospital admission is often not needed and many people with schizophrenia live a stable life, work and have relationships.

What causes schizophrenia?

It seems to be a combination of different factors. These include genes, subtle brain damage at birth or viral infections during pregnancy and childhood abuse. Street drugs (ecstasy, LSD, amphetamines and crack) can probably trigger it, particularly in teenagers using cannabis. Stressful events and family tensions make it worse.

What are the symptoms of schizophrenia?

'Positive' symptoms include:

- Hallucinations
Hearing, smelling, feeling or seeing something that isn't there. Hearing voices is the most common problem. These can seem utterly real. Although they can be pleasant, they are more often rude, critical, abusive or annoying.
- Delusions
Believing something completely even though others find your ideas strange and can't work out how you've come to believe them.
- Difficulty thinking
You find it hard to concentrate and tend to drift from one idea to another. Other people can find it hard to understand you.
- Feeling controlled
You may feel that your thoughts are vanishing, or that they are not your own, or that your body is being taken over and controlled by someone else.

'Negative' symptoms include:

- Loss of interest, energy and emotions
You may not bother to get up or go out of the house. You don't get round to routine jobs like washing, tidying, or looking after your clothes. You may feel uncomfortable with other people.
- Some people hear voices without negative symptoms. Others have delusions but few other problems. If someone has only muddled thinking and negative symptoms, the problem may not be recognised for years.

Can treatment help?

The earlier you get help, the better the outlook and less need for hospital treatment.

Antipsychotic medication

This helps to weaken any delusions and hallucinations. It should also help you to think more clearly and to look after yourself better. It can control (but not cure) the symptoms in around four out of five people. It works best when taken regularly, even when you have felt better for some time.

- Older 'typical' antipsychotics
These work by reducing the action of a chemical in the brain called dopamine. They can cause side-effects such as stiffness and shakiness and feeling slow, restlessness, sexual difficulties and unwanted movements, mainly of the mouth and tongue.
- Newer 'atypical' antipsychotics
These work on different chemicals in the brain. They are less likely to produce unwanted movements but can cause weight gain, diabetes, tiredness and sexual problems.

Psychological treatments

- Cognitive-behavioural therapy
This can help you to live with your experiences or even help you to work out what makes you unwell. You can then find new ways of thinking or behaving that help you to stay well.

- **Counselling**
It can help if you need to talk to someone or if you need support with the daily problems of life.
- **Family therapy**
Such therapy can help you and your family cope better with the illness. Sessions can help families learn about the disorder, ways to support someone with schizophrenia and how to solve some of the practical problems that can arise.

Social support and recovery

- **Day centres**
Such centres offer classes, advice about education and employment, and a place to spend time with other people.
- **Work projects**
Projects that will support you in getting back to work.
- **Supported accommodation**
Staff (on-site or visiting) can help with day-to-day problems.
- **A community mental health team key-worker can support you, both with practical problems and with medication or talking treatments.**
- **Occupational therapists can help you develop skills for living, working and socialising.**

Self-help

- **Learn to recognise the signs that you are getting unwell – these can include basic things like going off your food, feeling anxious or sleeping badly. Someone you trust may be able to warn you if they see you becoming unwell.**
- **Try to avoid getting too stressed, or using drugs or alcohol to feel better. Make sure you are able to do things that you enjoy.**
- **Try to keep healthy – eat well, don't smoke and keep fit.**

Helping someone else

It can be hard to understand what is happening. The person you know starts to behave differently, avoids other people and becomes less active. If they have delusional ideas, they won't always talk about them. If they are hearing voices, they may suddenly look away from you as they listen to the voice. When you speak to them, they may say little, or be difficult to understand. A person with schizophrenia can be more sensitive to stress, so you can help by avoiding arguments and keeping calm.

Can I talk to the mental health team?

If you are a carer, you should be able to get information from healthcare professionals. They can advise on psychological treatments, drugs and side-effects, and can suggest things to improve recovery.