



- ◊ Topic:
- ◊ Schizophrenia spectrum and other psychotic disorders

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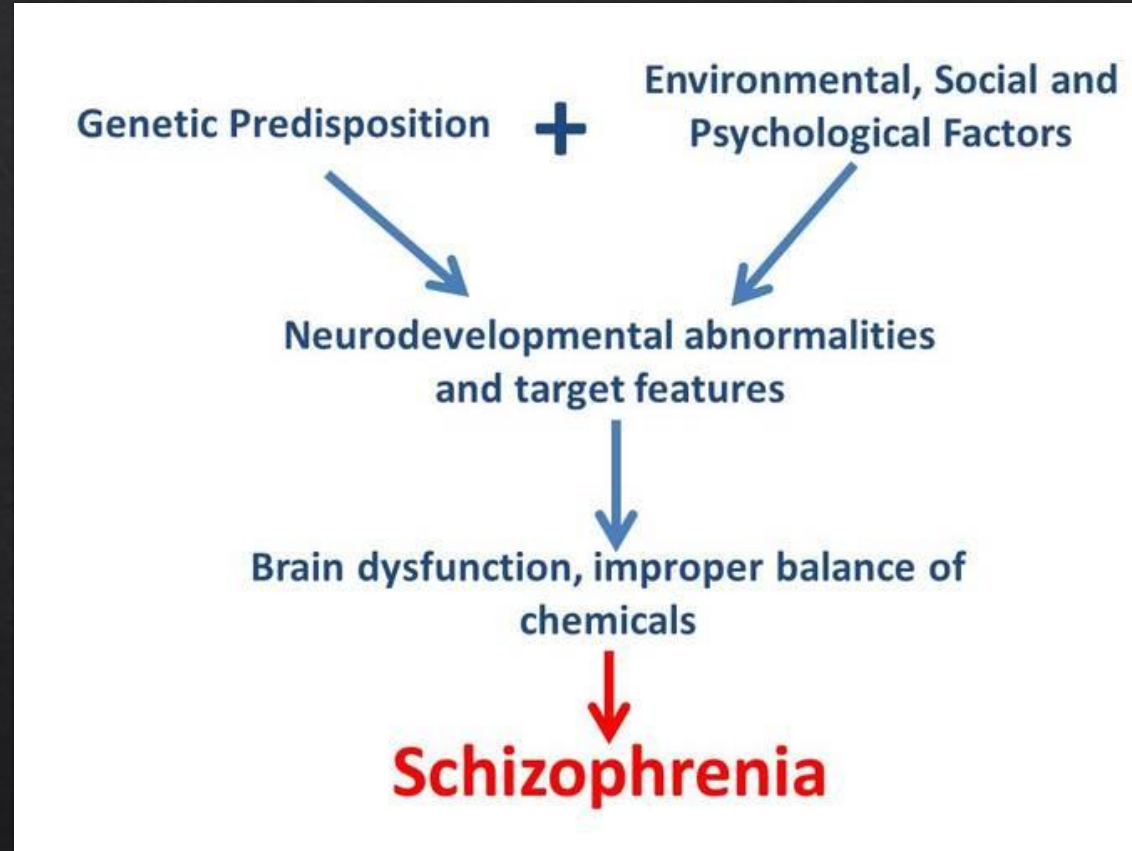
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Schizophrenia



Schizophrenia spectrum and other psychotic disorders

Hallucination: Hallucination are sensory experiences that appear real but are created by your mind . They can affect all of your five senses.

For example : You might hear a voice which no one else can hear or u see an image which no one can see.

Types of hallucination:

1. Visual hallucinations

Visual hallucinations involve seeing things that aren't there. The hallucinations may be of objects, visual patterns, people, or lights.

2. Olfactory hallucinations:

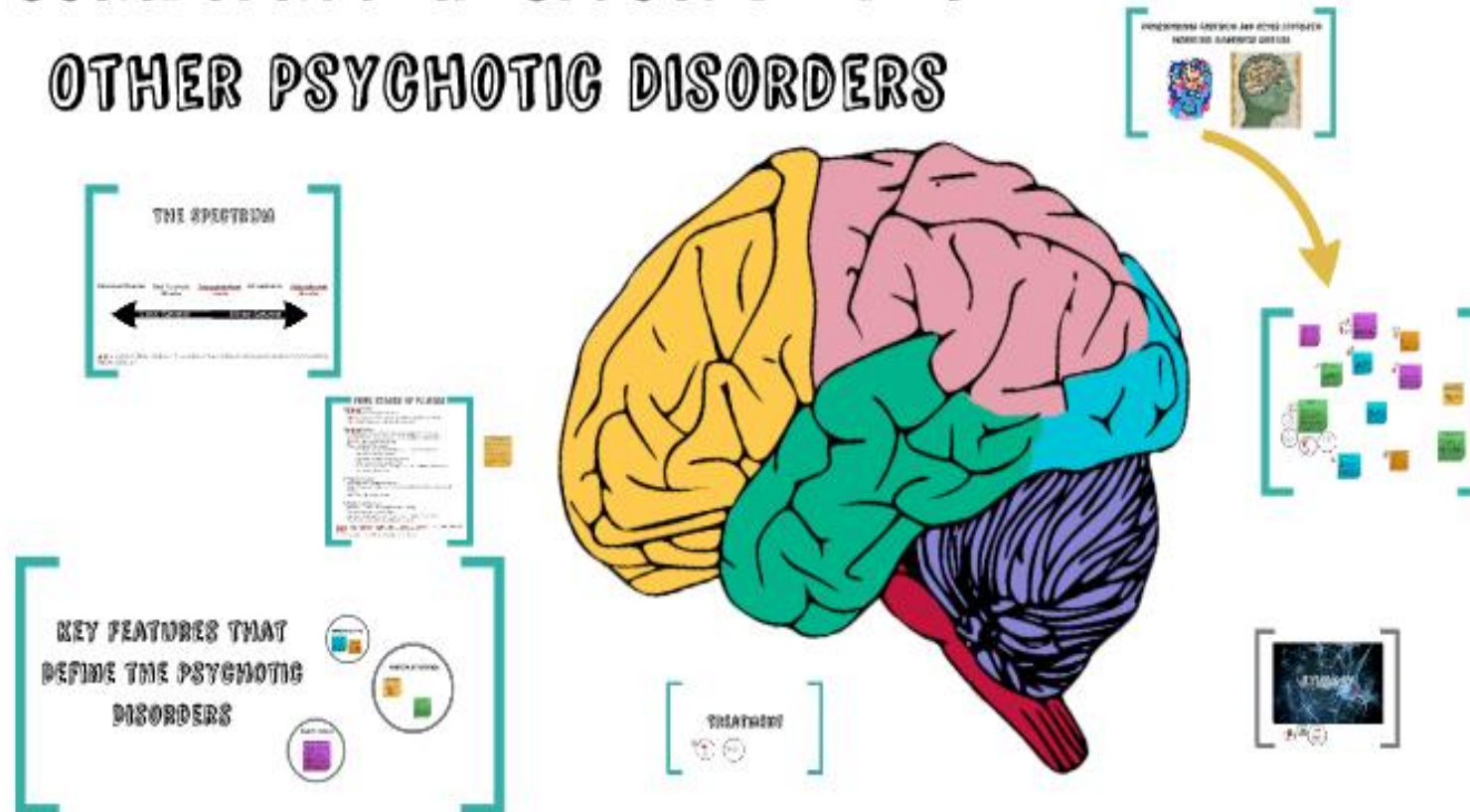
Olfactory hallucinations involve your sense of smell. You might smell an unpleasant odour when waking up in the middle of the night or feel that your body smells bad when it doesn't.

3. Gustatory hallucination

4. Auditory hallucination

5. Tactile hallucination

SCHIZOPHRENIA SPECTRUM AND OTHER PSYCHOTIC DISORDERS



Causes of hallucination

- ◇ Substances used
- ◇ Lack of sleep
- ◇ Migraine
- ◇ Epilepsy
- ◇ Social isolation
- ◇ Diagnosis of hallucination:
Perform some physical exams like ask symptoms by hiring any doctor.
Some blood and urine tests and may be brain scanning.
- ◇ Give company and emotionally sympathize to check symptoms.
- ◇ Treatment:
Medication
- ◇ Counselling

Delusion

Definition of delusion:

An idiosyncratic belief or impression maintained despite being contradicted by reality or rational argument, typically as a symptom of mental disorder.

Types of delusion:

1. Persecutory delusion.
2. Delusion of grandeur.
3. Delusional jealousy.
4. Erotomania or delusion of love.
5. Somatic delusional disorder.
6. Induced delusional disorder.
7. Bizarre delusion – Refers to delusion

Delusional Disorders

- ◇ Delusional disorder, previously called paranoid disorder, is a type of serious mental illness called a “psychosis” in which a person cannot tell what is real from what is imagined. ... This is unlike people with other psychotic disorders, who also might have delusions as a symptom of their disorder.

Types of delusional disorder:

1. Erotomantic
2. Grandiose and somatic
3. Jealous
4. Persecutory
5. Mixed: These people have two or more of the types of delusions listed above.

Etiology of delusional disorder:

A. Genetic. The fact that delusional disorder is more common in people who have family members with delusional disorder or schizophrenia suggests there might be a genetic factor involved.

B. Biological. Researchers are studying how abnormalities of certain areas of the brain might be involved in the development of delusional disorders

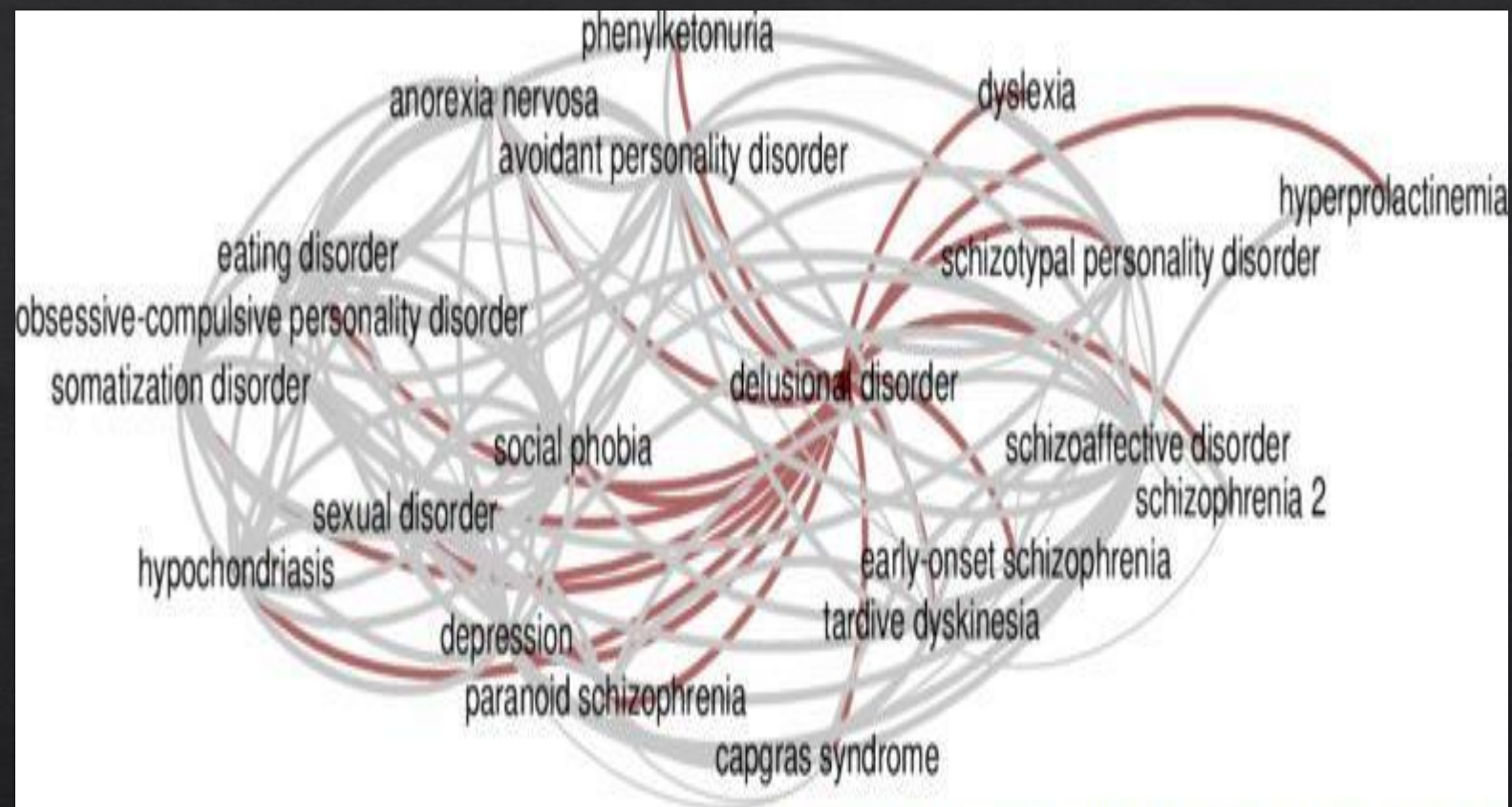
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C. Environmental

Diagnosis of delusional disorder

- ◆ The presence of non-bizarre delusions is the most obvious symptom of this disorder. Other symptoms that might appear include:
- ◆ An irritable, angry, or low mood
- ◆ Hallucinations (seeing, hearing, or feeling things that are not really there) that are related to the delusion.
- ◆ Treatment of delusional disorder:

Delusional disorder is considered difficult to treat. Antipsychotic drugs, antidepressants and mood-stabilising medications are frequently used to treat this mental illness and there is growing interest in psychological therapies such as psychotherapy and cognitive behavioural therapy (CBT) as a means of treatment.



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Schizotypal disorder

- ◇ schizotypal personality disorder is defined as a "pervasive pattern of social and interpersonal deficits marked by acute discomfort with, and reduced capacity for, close relationships as well as by cognitive or perceptual distortions and eccentricities of behaviour.

Symptoms :

- I. Flat emotions or limited or inappropriate emotional responses.
- II. Persistent and excessive social anxiety.
- III. Incorrect interpretation of events, such as a feeling that something that is actually harmless or inoffensive has a direct personal meaning.
- IV. Peculiar, eccentric or unusual thinking, beliefs or mannerisms.

Suspicious or paranoid thoughts.

Causes:

Brain functions

Genetics

Environmental influences and learned behaviour

Brief psychotic disorder

◈ Types of brief psychotic disorder

1) Delusions

2) Hallucinations,

3) Disorganized speech,

4) Disorganized or catatonic behaviour,

5) Negative symptoms.

Causes:

- i. Assault,
- ii. Natural disaster
- iii. The psychotic spectrum, there may be a genetic, biologic, environmental,
- iv. Major stress or trauma

Schizophreniform disorder

Symptoms:

- ◇ Hallucinations and delusion
- ◇ Disorganized speech resulting from formal thought disorder.
- ◇ Disorganized or catatonic behaviour.
- ◇ An inability to feel a range of emotions .

Causes:

Genetics (heredity): A tendency to develop schizophreniform disorder might be passed on from parents to their children.

Brain chemistry: People with schizophrenia and schizophreniform disorder might have an imbalance of certain chemicals in the brain.

Diagnosis:

Schizophreniform disorder is a mental disorder diagnosed when symptoms of schizophrenia are present for a significant portion of the time at least a month, but signs of disturbance are not present for the full six months required for the diagnosis of schizophrenia.

Treatment

- ◆ The treatment is given by:
- ◆ Psychotherapy
medication

Schizophreniform Disorder

Treatment

- **Hospitalization** : allows effective assessment, treatment, and supervision of a patient's behavior.
- **Antipsychotic** drugs for 3- 6 months.
- If a patient has a recurrent episode : **mood stabilizer** is added.
- **Psychotherapy**
- **ECT** : for patient with marked catatonic or depressed features.

Schizoaffective disorder

- ◇ Schizoaffective disorder is a psychiatric condition. People with this condition experience both psychosis and mood disorders: Psychosis is a loss of contact with reality, and mood disorders may include episodes of mania or depression. Schizoaffective disorder is divided into two subtypes based on the type of mood disorder involved:
- ◇ **depressive**: involves major depressive episodes only
- ◇ **bipolar**: involves manic episodes (high energy with extreme elevated, expansive, or irritable mood) with or without depressive episodes.
Causes:
 - ◇ paranoid thoughts and delusions
 - ◇ Hallucinations and confusion
 - ◇ catatonia, which is an inability to move normally
 - ◇ speaking too quickly.
 - ◇

Schizoaffective disorder

◇ Diagnosis of schizoaffective

- ◇ disorder is made if a person has periods of uninterrupted illness and has, at some point, an episode of mania, major depression, or mix of both while also having symptoms of schizophrenia. In addition, the person has a period of at least two weeks of psychotic symptoms without the mood symptoms.

◇ Treatment:

- ◇ 1. By medication:
 - a. Anti psychotic
 - b. Mood stabilizing
 - c. Anti depressants
- 2. By life skill training
- 3 . By hospitalization
- 4. By psychotherapy

Substance or medication induced psychotic disorder

- ❖ Substance/medication–induced psychotic disorder is characterized by hallucinations and/or delusions due to the direct effects of a substance or withdrawal from a substance in the absence of delirium.

Symptoms.

Substance or medication-induced psychotic disorder has two major symptoms, delusions and hallucinations. People with substance-induced psychosis might have delusions, hallucinations, or both. People with substance-induced hallucinations and delusions may or may not have insight into whether they are real.



Diagnosis

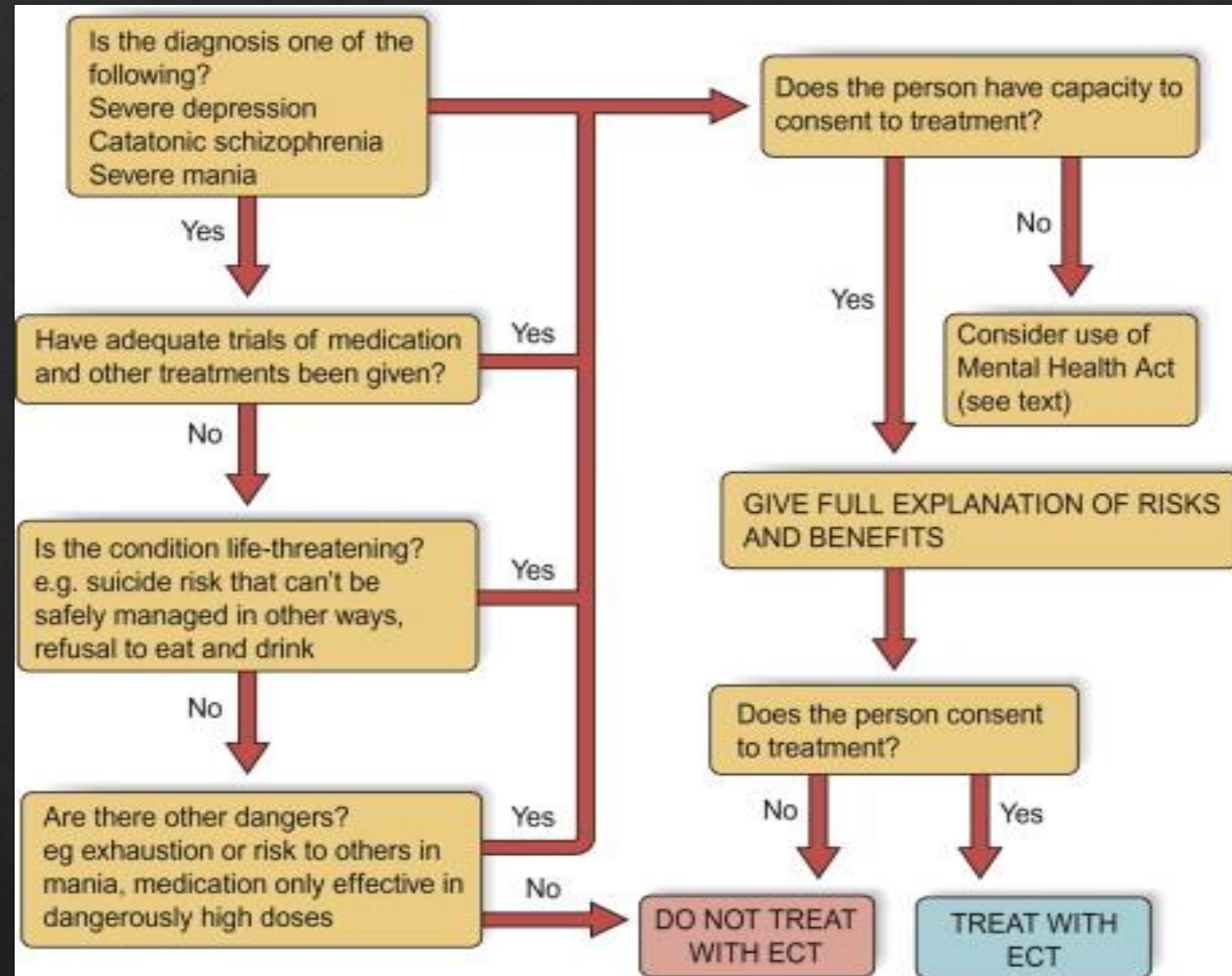
- ◇ Prominent hallucinations or delusion.
 - ◇ The disturbance is not better accounted for by a Psychotic Disorder that is not substance induced. Evidence that the symptoms are better accounted for by a Psychotic Disorder that is not substance induced might include the following: the symptoms precede the onset of the substance use (or medication use).
 - ◇ . The disturbance does not occur exclusively during the course of delirium.
- Treatment:**
In most substance-induced psychoses, stopping the substance and giving an anxiolytic (a benzodiazepine) or antipsychotic drug is effective. For psychosis due to dopamine-stimulating drugs such as amphetamine, an antipsychotic drug is most effective.

Catatonia

- ◇ Catatonia is a group of symptoms that usually involve a lack of movement and communication, and also can include agitation, confusion, and restlessness
- ◇ **Causes:**
 - . Several physical conditions can lead to catatonia in people who don't have a mental illness. These include:
 - ◇ Conditions that affect your body chemistry, like kidney problems, diabetes, and thyroid conditions
 - ◇ Parkinson's disease, which attacks your body's nervous system
 - ◇ Encephalitis, an infection that affects your brain.
 - ◇ Mood disorder
 - ◇ Psychotic disorder

Diagnosis of catatonia

- ◇ Not responding to other people or their environment
- ◇ Not speaking
- ◇ Holding their body in an unusual position
- ◇ Resisting people who try to adjust their body
- ◇ Agitation
- ◇ Repetitive, seemingly meaningless movement
- ◇ Mimicking someone else's speech
- ◇ Mimicking someone else's movement.

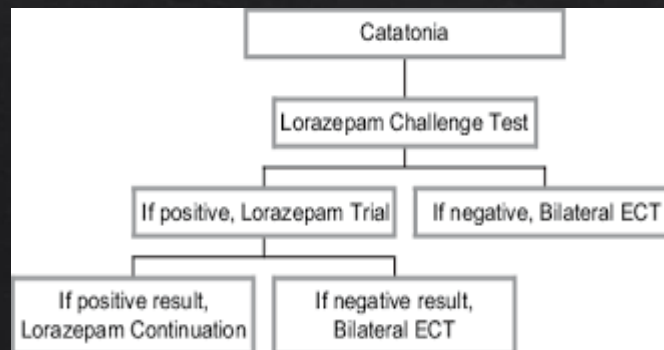


Treatment of catatonia

- ◇ Treatment modalities include pharmacotherapy and electroconvulsive treatment (ECT).

Treatable conditions must be identified immediately. Specifically, neuroleptic malignant syndrome (NMS), encephalitis, including anti-NMDA receptor encephalitis, non convulsive status epilepticus, and acute psychosis must be diagnosed and treated. Treatable conditions must be identified immediately. Specifically, neuroleptic malignant syndrome (NMS), encephalitis, including anti-NMDA receptor encephalitis, non convulsive status epilepticus, and acute psychosis must be diagnosed and treated.

- ◇ Give muscle relaxants.



◆ Other un specified schizophrenia spectrum and other psychotic disorders

The symptoms cause distress, and impair functioning in social, occupational, or other major areas of functioning.

The diagnosis can be assigned when the clinician decides not to specify the reason the diagnostic criteria are unmet, or if there is insufficient information available at the time of the evaluation to make a more specific diagnosis

. This diagnosis could be applied, for example, if the patient is experiencing visual hallucinations, but does not describe or present with any other psychotic symptoms, or deficits in reality testing. This diagnosis could also be applied in the event of a patient with one or more psychotic symptoms, but there is insufficient history or collateral information available at the time of the evaluation to make a more specific diagnosis.



Specified schizophrenia spectrum and other psychotic disorders

- ◇ Persistent auditory hallucinations.
- ◇ Delusions with significant overlapping mood episodes: This includes persistent delusions with periods of overlapping mood episodes that are present for a substantial portion of the delusional disturbance (such that the criterion for brief mood disturbance in delusional disorder is not met).
- ◇ Attenuated psychosis syndrome: This syndrome is characterized by psychotic-like symptoms that are less severe and more transient (and insight is relatively maintained) than what is typically seen in full psychosis.
- ◇ Delusional symptoms in partner of individual with delusional disorder: In the context of a relationship, the delusional material from the dominant partner provides content for delusional belief by the individual who may not otherwise entirely meet criteria for delusional disorder.

