



SCHIZOPHRENIA...

It's not what you think...

SCHIZOPHRENIA IS:

- A brain disease—the result of physical and biochemical changes in the brain
- Youth's greatest disabler—age of onset is usually 15 - 24 years
- Treatable with medication
- More common than you think. It afflicts one in 100 people worldwide - that's about 40,000 of your BC neighbours.

SCHIZOPHRENIA IS NOT:

- A split personality
- Caused by childhood trauma, bad parenting, or poverty
- The result of any actions or personal failures of the individual

FACTS

- Symptoms of schizophrenia include disordered thinking, changes in emotions, bizarre behaviour, paranoia, hallucinations, delusions, cognitive deficits (damage to short-term memory and executive functioning, i.e., difficulty organize, categorize, prioritize, make decisions.)
- Schizophrenia can be a devastating illness. 40–50 % of people with schizophrenia attempt suicide. Approximately 12–15% percent succeed.
- ***Early intervention and treatment of symptoms are critical. Evidence now shows that the sooner someone is stabilized on treatment, the better the prognosis for the illness.***
- 8% of hospital beds are presently occupied by people with schizophrenia...more than by sufferers of any other medical condition.
- Schizophrenia strikes one in 100. That means about 310,000 Canadians will be diagnosed with this illness at some point in their lives. The total cost estimate to Canada for victims of schizophrenia is **\$6.85 billion per year**. *Yet research expenditures are lower than for any other major disease.*
- There is as yet no “cure” for schizophrenia. But there is good treatment and there is hope. With new discoveries in brain research other scientific developments, we are finally on the threshold of an entirely new era of understanding.

“Compassion follows understanding. It is therefore incumbent on us to understand as best we can... The burden of disease will then become lighter for all.” — Dr. E. Fuller Torrey

Many people afflicted with schizophrenia do not receive proper medical treatment and other necessary supports. Frightened by inexplicable perceptions, anxious without observable reason, they struggle to make sense of disordered thoughts, internal voices, visual hallucinations or other debilitating symptoms that cause bizarre behaviours. Without proper education, friends, family and people in the community may reject someone suffering from schizophrenia because they do not understand the difficulties the person is experiencing.

SYMPTOMS

Symptoms of schizophrenia are generally divided into three categories: **POSITIVE** symptoms, **NEGATIVE** symptoms, and **COGNITIVE** symptoms.

POSITIVE SYMPTOMS

- **Hallucinations:** People with schizophrenia may hear, see, or less commonly, taste, smell or feel things that are not there.

- **Delusions:** Ideas that are strange and out of touch with reality, often under the categories of

Paranoia - Belief that others can read your thoughts, are plotting against you, or secretly monitoring your activities.

Grandiosity - Belief that you can control other people's minds, or that you are a well-known historical or media figure, or an important and influential personage (writer, artist, musician, inventor, politician, police or military personnel, religious figure, etc.)

“Positive” as used here does not mean “good”. It refers to having symptoms that ordinarily should not be there.

Positive symptoms are sometimes called “psychotic” symptoms since the patient has lost touch with reality in certain important ways.

NEGATIVE SYMPTOMS

- **Affective Flattening:** Marked by diminished emotional responsiveness, including: few expressive gestures; changes in facial expression; stilted, forced or artificial gestures; poor eye contact; lack of vocal inflection; decreased spontaneous movements.

- **Alogia:** Poverty of speech and of its content; lack of spontaneity and flow of conversation; inability to communicate.

- **Avolition** (Apathy) Associated with social withdrawal: physical anergia; impaired grooming and hygiene; lack of persistence in performing activities.

- **Anhedonia** (Asociality) Few recreational interests/activities; impaired personal and sexual relationships; uncommunicative, detached, distant.

- **Inattention:** Impaired concentration: social inattentiveness; inattentiveness during conversation/interview; poor rapport.

COGNITIVE SYMPTOMS

- **Disorganized Perceptions:** People with schizophrenia often have a hard time making sense of everyday sights, sounds, and feelings. Perceptions of what is going on may be distorted so ordinary things seem distracting or frightening. Extra sensitivity to background noises, colours and shapes.

- **Disorganized Thinking and Speech:** Trouble understanding language, communicating in coherent sentences, or carrying on a conversation. Odd word association; “word salad”.

- **Disorganized Behaviour:** Loss of short term memory and organizational skills make planning, prioritizing, and decision-making tasks very difficult, if not impossible.

Schizophrenia may also cause people to move slowly, repeat rhythmic gestures, or make ritualistic movements. In severe cases, the illness can cause people to become catatonic—to stop speaking or moving completely and hold a fixed position for long periods of time.



**BRITISH COLUMBIA
SCHIZOPHRENIA SOCIETY**
A Reason to Hope. The Means to Cope.