

Psychosis Discussion Guide

(The bolded words are from the word search)

- **Psychosis** is an impaired or abnormal mental state with delusions (false beliefs) or hallucinations (things that are seen or heard but aren't really there). People with psychosis lose contact with reality and have disorganized thought patterns and speech. Sometimes they have bizarre, odd or unpredictable behavior.
- Schizophrenia is a chronic form of psychosis named for the "schism" or split between cognitive (thinking) and emotional aspects of the personality. The person may lose touch with reality.
- The cause of psychosis is unknown, but it tends to run in families. Viruses, malnutrition, and/or other emotional or social factors may be involved:
 - Mental illnesses like schizophrenia, depression, or bipolar disorder.
 - Medical conditions like HIV infection, Parkinson's disease, strokes, brain tumors and seizure disorders
 - Drugs like LSD, cocaine, alcohol, amphetamines, marijuana, or PCP
 - Less frequently, anti-seizure medication, steroids and chemotherapy can cause psychosis
- **Medical Diagnosis**
 - Schizophrenia- Paranoid, Disorganized, or Catatonic type
 - Schizophreniform disorder (1-6 mo. of psychotic symptoms) includes good social and work functioning
 - Schizoaffective disorder - includes major depression or bipolar disorder along with schizophrenia
 - Delusional disorder- non-bizarre delusions with functioning unaffected
 - Brief psychotic disorder (1-30 days)
- Psychosis sometimes happens with other disorders: depression with psychotic features, manic episodes of bipolar disorder, posttraumatic stress disorder, delirium, organic mental disorders
- Nearly 50% of patients with schizophrenia have a co-occurring substance use disorder, usually alcohol or cannabis

(The following may be seen in psychosis or schizophrenia, but not all of them - Everyone has a different set of symptoms)

Psychosis Discussion Guide

- **Thought** processes are affected by psychosis. Concrete thinking (literal rather than abstract thinking) – Need to use short, simple cues
 - Information processing changes when chemical activities in the brain slow down, speed up, or are blocked
 - May be unable to think logically and express clear sentences – May say things that make no sense
 - May have poor memory, attention, and decision-making

- Types of **Delusions** – The false beliefs seem very real and “fixed” delusions may stay
 - Paranoid- Suspicious, irrational distrust
 - Grandiose- Greatness or special powers
 - Religious- Favored by a higher being
 - Somatic- Body is diseased or distorted
 - Nihilistic- Thoughts of nonexistence or hopelessness

- **Abnormal Perceptions** - Are often the first symptoms in many brain diseases
 - **Hallucinations**
 - Distortions can happen in any illness that disrupts brain function
 - Perceptual problems are often the first symptoms in any brain diseases
 - Can affect any of five senses: Sight, sound, taste, touch, and smell

 - **Sensory Integration**
 - Abnormal perceptual behavior can lead to acts of self-harm
 - Often inaccurate pain or touch recognition
 - May not recognize right/left orientation or faces
 - Environment can worsen visual hallucinations- Reflective or glaring objects, like television screens, glass in frames, and fluorescent lights
 - Environment can worsen auditory hallucinations from excessive noise. Or people may withdraw from activities that use their senses and have more hallucinations when quiet and isolated
 - Hallucinations and delusions can be mixed

 - **Reality** testing is when the real world and what you think is real are weighed or evaluated. For people with psychosis it may be hard to know the difference between internal distortion and fantasy from what is really happening around them.

Psychosis Discussion Guide

■ **Disordered** Thought Content

- Thought broadcasting- Thoughts being aired to the outside world
- Thought insertion- Thought are being placed into the mind by outside people
- Ideas of reference- Incorrect understanding of casual events as having direct personal meaning
- Magical thinking- believing they are capable of causing something to happen just by thinking about it
- **Obsession**- An unwelcome idea, emotion, or impulse that repeats and forces itself into thoughts
- Phobia- Dark fear associated with extreme anxiety

■ Impaired Thought Processes – Problems with ability to talk logically

- Circumstantial – indirect speech with too much detail causing delay in answering or reaching goals. But in time, is able to answer the question
- Flight of ideas – rapid, continuous talking with constant shifting from one idea to another
- Loose associations – flow of thought with ideas shifting from one subject to another in a completely unrelated way
- **Tangential** - responds to question in irrelevant way, never getting to desired goal (goes off on tangents)
- Thought blocking – sudden stopping in the “train of thought” or in the middle of a sentence
- Word salad – series of words that seem totally unrelated or like gibberish
- New words created or using blended words that have no previous meaning
- Words chosen or repeated based on similar sounds, instead of meaning (may include rhyming)
- Poverty of speech – Brief and empty replies to questions (not related to shyness)

■ Mood and Emotion - People with psychosis often lack emotional expression even when they feel emotional. May have anxiety and depression or mania, but the face lacks expression (flat affect)

- **Affect**- Includes behaviors such as hand or body movements, facial expression, and pitch of voice that can be observed. Normal affect varies among cultures.
 - Bright, broad or restricted affect can be considered “normal”
 - Blunted, flat, or inappropriate affect can be symptoms of a disorder
- Difficulty naming, describing emotions
- Decreased ability to experience pleasure, joy, intimacy, closeness

Psychosis Discussion Guide

- Apathy: lack of feelings, emotions, interests, concern
- Lack of motivation

- **Maladaptive Movements**
- Catatonia- In a stupor (unresponsive although physically stable)
- Odd movements or muscle twitching sometimes may be from side effects of medications
- Decreased or rapid blinking, difficulty following moving object, staring, or avoidance of eye contact
- Grimacing
- May have problems completing tasks like dressing or grooming
- Imitation of movements by others
- Abnormal walking, gestures or mannerisms

- **Deteriorating Behavior**
- Person may lack energy and drive
- May have obsessive-compulsive behavior
- May become more anxious if simple tasks become more difficult
- Aggression, agitation, and risk for violence may be from feeling out of control
- There is risk for self-harm or suicide

- **Effects on Socialization**
- Disheveled, dirty clothes, or sloppy appearance may be a problem
- Social problems can be directly or indirectly from the psychiatric illness
- May use expressions, actions or behaviors that are odd or not appropriate
- Stigma (if the illness is seen as a "mark of shame") may affect the family
- Denial is common, but people can find resources to adapt and cope

- **Be Aware of Symptom Triggers** – They may be warning signs of a new episode of illness
- Health-related: Poor nutrition, fatigue or lack of sleep, infection or drugs that affect the brain
- Environment: Hostile/critical living environment, pressure to perform, poor housing, changes in daily routines, lack of social activity or healthy relationships, lack of resources
- Attitudes/Behaviors: Low self-confidence, feeling out of control or lacking motivation, poor social skills, aggressive behavior, not taking medication correctly, or poor symptom management

Psychosis Discussion Guide

- Physical **Health** - People with schizophrenia have a shorter life span
- High-risk lifestyle: Not enough exercise, smoking, or poor eating habits; obesity may result in diabetes, hypertension, coronary artery disease

Moving Toward **Recovery** (Write down some ways you can do these:)

- Stay safe
- Get the emotional support and health care that you need
- Use reality testing
- Manage your symptoms – Learn how to cope with them
- Let your family or friends be involved in your recovery
- Prepare for discharge from hospital
- Prevent relapse

Psychosis Symptoms and What to Do Factsheet available at

http://heretohelp.bc.ca/sites/default/files/images/p_symptom_family.pdf