

# [Genetics, brain structure, and behavior: future directions](https://assignbuster.com/genetics-brain-structure-and-behavior-future-directions/)

This particular disorder is not thought to be progressive, but it is chronic and debilitating. Many regions of the brain and other systems operate abnormally in schizophrenic individuals. The frontal lobe is affected because it gives someone with schizophrenia a difficult time in making plans and organizing his or her thoughts. The auditory system can be over-active for someone suffering from this illness, and it can lead to auditory hallucinations. Visual hallucinations are rare, but it will have someone with this illness incapable of understanding images, recognizing motion, and understanding emotions.

The limbic system focuses on emotions, and someone with schizophrenia can easily be agitated and not make a clear picture on what is happening. The hippocampus facilitates the formation of learning and memory, these functions are impaired with individuals suffering from such a debilitating illness. Movement of the body, emotions, and integrating the sensory information belongs to the basal ganglia, and someone whose mental capacities are affected can display abnormal functions that can lead to paranoia and hallucinations.

An imbalance in the neurotransmitter dopamine was said to be the primary cause of schizophrenia but new research revealed that more universal neurotransmitter glutamates better explain the symptoms relating to schizophrenia. Individuals with this illness have a rare way of showing emotions. They may laugh at something that others consider very sad and sometimes they will not change their facial expression. Consequently, people with schizophrenia do not display the same symptoms. The symptoms vary so much that many people in the mental health field believe schizophrenia is a group of mental disorders nstead of one. Difficulty in diagnosing schizophrenia may have to do with the different types of this illness that there are. The disorganized schizophrenic does not speak coherently and may invent words. They also may act entirely silly and laugh at the most inappropriate things. With a constant change of mood it could be difficult to gain a clear diagnosis on a person who shows erratic unorganized behavior. Catatonic schizophrenia moves a person through immobility to barbaric activity. An elaborate sense of power, knowledge, or identity can lend to extreme delusions in the paranoid schizophrenics mind.

In many cases, it could take up to six months if not more for a thorough diagnosis of not only schizophrenia, but also of what subtype is predominantly afflicting the individual. In addition to diagnosis, there is no concrete support that schizophrenia is a cultural disorder, nor environmental. In addition studies have shown that it can be genetic and infect more than one member of a direct bloodline and that susceptibility is inherited. Statistically, in a family, those with relatives closely related are more likely to develop schizophrenia than those with a lesser connection, such as a half-brother to a cousin.

Though identical twins are more likely to carry the same infliction as are children born to parents who both suffer from schizophrenia. Unfortunately, there is no preventative measures that can be taken in the realm of schizophrenia, but there are definitely measures that can decrease the periods of delusions and with that comes in-depth therapy and in some cases interventions from family members. There has not been a complete cure for the illness, schizophrenia, however; there are new and inventive measures presently offered that have potential of giving a person with schizophrenia a means of living a normal life.

One of these is with cognitive behavioral therapy. This type of intensive invasion into a person’s life can help them learn to pacify the voices by listening to music, or even repeating the questions aloud and transforming them into perceptions and conclusive understanding. “ Recent Advances in Social Skills Training for Schizophrenia” (2006) consists of adapting behavioral proficiency to those with schizophrenia, allowing them to achieve living skills, coping mechanisms, and giving them a sense of freedom from their inner turmoil.

Family Interventions are for teaching the family of a schizophrenic how to deal with the mental illness, the stress of their family member living with this illness and how to cope with medications and structure for the ill. Typically the family is left in the dark until the person with schizophrenia is being released from the hospital and still assumed that he or she will know what to do (Johnson, 2005). Cognitive Remediation is meant to actuate learning perception, judgment, and reasoning. Improving the areas that fall short within the realms of daily living and avoid areas re-enact further mental breakdown (Medalia & Choi, 2009).

Supported employment can help those with schizophrenia attain reasonable employment to improve self-esteem and the betterment of his or her life (Solar, 2011). As a final point, there is still plenty that the medical and scientific community does not know about schizophrenia, but the main part to remember is that with only study and proper diagnosis there will not be anything new learned or discovered. What is necessary in the treatment of these individuals who suffer from such a debilitating ordeal is understanding, patience, and the right dose of proper medications.

There has been no defining affirmation that schizophrenia is a disease of the brain or a biochemical imbalance within the brain. What genuinely matters is whether children can be pre-diagnosed from behavioral tendencies that at some point they will gain all symptoms of this paranormal entity that affects not just their hearing, but their vision, and body movements. As a community of psychologists and scientists, it is more within the communities benefit to pinpoint what will assist a person from descending into an unknown darkness that he or she can delve into a catatonic existence and remain there without proper medicinal doses and therapy.

No one is ever fully cured from schizophrenia, but he or she can live a relatively free life from frequent episodes that prevent him or her from living to his or her full potential and particularly what all people connected to those with schizophrenia should look for. References: Davidson L. “ Psychotherapeutic and Cognitive-Behavioral Treatments for Schizophrenia: Developing a Disorder-Specific Form of Psychotherapy for Persons with Psychosis,” in Perris C, et al. , eds. Cognitive Psychotherapy of Psychotic and Personality Disorders: Handbook of Theory and Practice.

John Wiley & Sons, 1998. Recent Advances in Social Skills Training for Schizophrenia. (2006, August). Schizophrenia Bulletin, 32(1), S12-S23. Retrieved from http://schizophreniabulletin. oxfordjournals. org. ezproxy. apollolibrary. com/content/32/suppl\_1/S12 Johnson, D. L. (2005, May). Family Interventions for Schizophrenia: An International View. Psychiatric Times, 22(6), . Retrieved from http://search. proquest. com. ezproxy. apollolibrary. com/docview/204565480 Medalia, A. , & Choi, J. (2009). Cognitive Remediation In Schizophrenia.

Retrieved from http://search. proquest. com. ezproxy. apollolibrary. com/docview/232848215. Solar, A. (2011). Supported employment can reduce social exclusion and improve schizophrenia . Retrieved from http://av4kc7fg4g. search. serialssolutions. com. ezproxy. apollolibrary. com/? ctx\_ver= Z39. 88-2004&ctx\_enc= info%3Aofi%2Fenc%3AUTF- Abnormal Psychology, Tenth Edition Chapter 11: Schizophrenia ISBN: 0471692387 Author: Ann M. Kring, Gerald C. Davison, John M. Neale, Sheri L. Johnson copyright © 2007 John Wiley & Sons, Inc. A Pearson Education Company