

Research paper on schizophrenia

[Health & Medicine](#), [Drugs](#)



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Schizophrenia has many physical and mental symptoms. The symptoms of schizophrenia are similar to many other mental illnesses. It is not possible to pinpoint one particular diagnosis to detect schizophrenia. Schizophrenia symptoms can start any time, however, in men it generally starts during teen ages and in women the disease mostly starts during 20s or 30s. It is extremely unlikely to develop schizophrenia after the age of 45 or during childhood. There are many symptoms of schizophrenia which can broadly be classified into three categories - positive, negative and cognitive.

Positive Effects of Schizophrenia

Positive symptoms are those which reflect in excess or in distortion in a patient.

Hallucinations: Hallucinations are perceptual inaccuracies that make the patient of schizophrenia see, taste, hear, touch or smell things which either does not exist or others cannot see. In acute phases of schizophrenia patients hear noises, voices and sound which are totally their imagination

(Obermann and Heekeren). Hearing is the most common of the hallucinations. Symptoms of hallucination while seeing, smelling and feeling are also seen in some of the patients. Hallucinations are experienced as forceful and important thought in the head. Sometimes patients feel that it is coming from outside. In some cases the patients seem to converse about those thoughts with an imaginary person. Voices sometimes reassure the patients but in many cases it is mentally agonizing for the patient. It is so real for the person experiencing the hallucination that it is almost impossible to make them understand that it is their imagination. Even some say that it feels like someone has implanted a radio in their head.

Delusions: This is generally wrong interpretation or belief about events and their significance (Obermann and Heekeren). For instance, a person may accidentally get busted and from that incidence may conclude that government is trying to harass him. He may hear some noise at night and may infer that the neighbors are deliberately trying to disturb his sleep. The tendency to misinterpret and personalize events increases in schizophrenic patients due to stress and fatigue. In the acute stage of schizophrenia the beliefs and personalization are fixed. Logical reasoning and alternate explanations do not even come into consideration. In fact if someone tries to reason about the possible alternate explanations of the event, it leads to further conviction that the conspiracy to plot against him is deeper than he is able to see.

Thought Disorder: Schizophrenic patients often have peculiar thought process. One of the most common forms of the disease is disorganized thinking (Rollins, Bond, Lysaker, Salyers, McGrew and Salyers, 2010). A

person with disorganized thinking finds it difficult to organize his thought process or logically interpret it. In such conditions the speech of such patients may not make sense. Another common thought disorder is called ‘thought blocking’ in which a person stops in the middle of a thought or speech as if the whole thought has suddenly been taken out of his brain.

Disorganized Behavior: This symptom is shown in the way of agitation through body movements. The most common form of disorganized behavior is repeating a motion over and over again (Rollins, Bond, Lysaker, Salyers, McGrew and Salyers, 2010). Another rare form of disorganized behavior is called catatonia. A person with catatonia does not respond at all to others. This symptom is very rare these days.

Negative Effects of Schizophrenia

Unlike positive symptoms, in negative symptoms the patient shows diminished characteristics of normal function. These functions may appear in parallel with positive symptoms. For example, a person may become very lazy to take care of himself.

Loss of interest / Lack of Motivation: Loss of interest in everyday activity is one of the most common negative symptoms found among schizophrenic patients. It is seen that in acute stages of schizophrenia students do not feel the urge to go to school, workers do not feel the need to go to the place of work and so on. This often is caused by a lack of motivation (Tandon and Greden, 1991). In many cases this lack of motivation and interest only surfaces when a person goes deep into schizophrenia. Many believe that this lack of motivation comes as a side effect of medication. Most of the

medication of schizophrenia puts the patients to sleep for long hours, resulting in an increase in this kind of symptom.

Social Withdrawal: It is seen that schizophrenic patients often withdraw themselves from family and friends. Many family members find it very hard that their loved ones are slowly slipping away from them. In many case patients stop all sorts of interaction with their family and friends completely (Tandon and Greden, 1991). Patients being so much overwhelmed by their hallucinatory visions fail to relate to the people around them and develop a deep connection with their imaginary world. Even in extreme cases schizophrenic patients cannot fathom their own emotions. They feel an emotional void within themselves and let their actions guided by the voice inside their head.

Neglect of Hygiene: Schizophrenic patients often do not feel the need of personal hygiene (Skrabalo, 1998). It is seen that patients often forget to brush teeth, do not take bath for weeks and do not even feel the urge to change clothes for days.

Cognitive Effects of Schizophrenia

Cognitive symptoms are those which are experienced by a patient in his thought process. Many cognitive symptoms can be included into either positive or negative symptoms but it is essential to identify them as separate as they need different kind of treatments. Cognitive symptoms are most problematic for the patients. Cognitive symptoms affect the patient's ability to perform the basic routine activities. The main cognitive problem found is making sense of things. In some cases schizophrenic patients cannot make

sense out of an event or logically analyze some events. This type of patients is often unable to participate in normal schooling system and generally cannot score high in logical subjects like math, science etc. Another common cognitive problem is the difficulty to pay attention. In this symptom the patient cannot concentrate on a thing for a long period of time. Patients cannot read a book for a long time or hear a person talking for a sustained period of time. The attention span for schizophrenic patients with this type of cognitive problem is often less than few minutes. In acute stages it is not even few seconds. Memory problem is another type of cognitive symptom seen in schizophrenic patients. Patients with memory problem often forget things very quickly and fail to remember things. Studies show that even if they register things in their brain they cannot process those things logically which appears as memory loss as they cannot recall it properly from their brain.

Treatments of Schizophrenia

Schizophrenia was not treatable till very recently. However, vast medications and treatments are now available to treat various schizophrenic types.

Schizophrenia has mainly two phases; an acute phase and maintenance phase. If a patient is in acute phase of schizophrenia then it is absolutely necessary to prescribe medication. Antipsychotic drugs are the most common form of drugs used in treating schizophrenia. In acute phase high dosage of antipsychotic drug is prescribed to reduce the psychotic symptoms. However, once a patient recovers and is in the maintenance phase then the overall dosage is adjusted and probably doctor prescribes a

dosage of antipsychotic medication which the patient needs to take throughout the remaining life. In case of reappearance of the symptoms an increase in dosage may be necessary. Antipsychotic drugs cannot cure schizophrenia. It only reduces the symptoms of the disease. Over the last 4 decades antipsychotic drugs are used successfully for the treatment of schizophrenia. There are cases where antipsychotic drug do not respond and there are also patients who do not require antipsychotic drugs at all. It is not easy to determine the stage of schizophrenia and hence it is not easy to prescribe the dosage of antipsychotic drugs. Long term follow-up treatment is required for the proper dosage recommendation and treatment. Older antipsychotic drugs like Thorize, Haldol, Proxin and Navane are very effective to reduce the positive symptoms like hallucinations, delusions and thought disorders (Rollins, Bond, Lysaker, Salyers, McGrew and Salyers, 2010). However, it has side effects like increasing the cognitive symptoms and involuntary movements. In 1989, another class of antipsychotic drugs was introduced. These new antipsychotic drugs like Clorazil have fewer side effects than the older ones and work in a much better way against the positive symptoms. However, negative symptoms still are not effectively treated by medication.

Negative symptoms are very important as well and they cannot be effectively treated using antipsychotic medication. Even if positive symptoms are treated completely using medication still negative symptoms, if untreated, can completely impair a person to function normally (Thomas, 1996). In negative symptoms people feel completely lost and feel a void inside their head. Logical thinking completely ebbs away. Patients at time

spend weeks only lying on bed not doing anything. They don't feel like reading or watching TV. In its early days it was thought that positive symptoms are the ones seen in a patient first. However, recent studies have concluded that negative symptoms are generally first noticed in a patient before the positive symptoms. Second generation antipsychotic medication is often seen as a possible solution to the negative symptoms. Second generation antipsychotics actually have less side effects and do not enhance the negative symptoms as a side effect of reducing the positive symptoms. Serotonin-specific reuptake inhibitors seem to be helpful in case of negative symptoms. Results are not yet fully established (Rollins, Bond, Lysaker, Salyers, McGrew and Salyers, 2010). Negative symptoms are correlated with that part of the brain system which controls neurocognitive behavior. It is one of the most complex parts in the brain. Recent developments in cognitive enhancer drugs are giving high hopes to the doctors that they will be able to come up with some effective drug to treat negative symptoms. Till that time negative symptoms will continue to puzzle the doctors as one of the most complex areas of research.

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