

Mental illness as portrayed in a beautiful mind nursing essay



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Introduction

The movie A Beautiful Mind is an adaptation of the book by the same name and is a biopic based on the life of Nobel Prize winning economist, John Forbes Nash, Jr. The movie portrays the symptoms and treatment for paranoid schizophrenia from which John Nash suffers. He has episodes of auditory and visual hallucinations and has frequent interactions with imaginary people. This paper attempts to present a reflective case study of the patient as presented in the movie. The patient when treated for hallucinations has certain negative reactions to the medicine, to overcome which, he avoids them, relapsing into his earlier condition. The patient mentions taking 'newer' medications later on which also help him decide between the reality and delusion. At the end of the movie, the patient is seen to have overcome this disorder by learning to ignore his hallucinations. This paper discusses alternate treatment as well as recommendations for future mental health nursing practices. Early recognition and detection of symptoms can help treat the mental disorders like schizophrenia faster. This paper will explore the medical and societal issues revolving around this debilitating and chronic illness. This paper hopes to enlighten people about the resources available to persons suffering from schizophrenia and their families in the form of medication, counseling and support groups.

In the movie, A Beautiful Mind, the protagonist, demonstrates the classical symptoms of paranoid schizophrenia. The protagonist, John Nash, suffered from schizophrenia which was only discovered at a later stage. During his college years at Princeton, John's room-mate and best-friend was a man named Charles, who is later found out to be one of John's hallucinations (A <https://assignbuster.com/mental-illness-as-portrayed-in-a-beautiful-mind-nursing-essay/>

Beautiful Mind 2001). As time goes by, his hallucinations become more frequent and violent as he soon believes himself to be working for the US government on a top secret project to which no one, not even his wife had access to. When he started missing classes a psychiatrist was called in to look into his condition and he found the stay at the asylum unpleasant and believed it to be a Soviet plan to stop him from working on his secret government mission. His wife had trouble believing the psychiatrist at first as she believed her husband's story to be true and very real. But she realized the problem when she went to his college to find out what he used to do during work and found magazine clippings pasted all over the room. She also discovered the unopened confidential envelopes that were supposed to be sent out to Mr. Parcher, the person who put John up to the secret mission. The story revolves around how John has to face reality when his make-belief world is so real to him. He can finally confront his reality when he realizes that Charles' niece, Marcee, never grew any older than when he had first met her. With continual medication, he learns to ignore the fictional characters in his life and starts to teach again, at Princeton. He goes on to win the Nobel Prize in Economics and lives a happier life.

Thesis Statement

Early detection and intervention are the best ways to treat schizophrenia. However, patients suffering from schizophrenia need long term treatment. Advancements made in the field of psychotherapy, psychiatry, medicine, intervention, nursing practices in mental health and awareness in society can combat schizophrenia effectively.

Signs and Symptoms Associated with Schizophrenia

Paranoid schizophrenia (Port 2010) is only one of numerous categories of schizophrenia which is a chronic mental disease. People suffering from this kind of mental illness are not able to interpret reality in a normal way and are said to suffer from psychosis. Around 40 percent of schizophrenic cases are of paranoid schizophrenia. The symptoms usually start being displayed at later ages from around the ages of 25 or 30. The typical symptoms or symptoms exhibited by patients of paranoid schizophrenia include hallucinations and delusions that have no connection with reality. These are also called positive symptoms that are the easiest to detect. The ability to think and function normally is affected and though paranoid schizophrenia is a milder form of the disorder it can have lifelong ramifications and can even result in suicidal behavior and other complications. Usually the onset of the illness is marked by a sense of grandiosity and this preponderance is seen in case of delusion and/or a sense of persecution. The onset of the disease can be quite sudden and the deterioration in the physiological as well mental condition of the patient can be quite rapid. The recognition and identification of these symptoms can be quite difficult for people with no prior experience or exposure to this situation. More perceptive relatives and friends may be able to recognize a heightened state of nervous tension, irritability, anger, jealousy and argumentative behavior (Kennard 2008). The other kinds of symptoms or the negative symptoms are the lack of emotions displayed by normal people. An example of this would be if a person with hebephrenic schizophrenia may laugh at a funeral. The lack of interest in life and loss of energy is more difficult to spot and may be confused with depression or

apathy. However, the good news is that with proper diagnosis and treatment patients overcome the symptoms and lead a happy life.

The symptoms displayed by John Nash in the film are very distinct and classic. The hallucinations of his room-mate, Charles and later that of Mr. Parcher, the US government official, and finally of Marcee show that his illness was detected at a very advanced stage where the diagnosis of paranoid schizophrenia needed to be treated symptomatically and with continued medication and therapy. The medications that Nash is put under are the antipsychotic drugs and insulin shock therapy. He was confined and had to be kept under constant supervision at the mental hospital. During particularly severe conditions he had to be bound and kept in solitary internment.

Treatment Modalities Specific to Schizophrenia

The major part of Nash's treatment included Dr. Rosen's recommendation of insulin shock therapy, which is a conventional method of treating mental illness and is now considered to be outdated and antipsychotic drugs (Mayo Clinic Staff 2010). The insulin coma therapy and convulsive therapy have now been replaced by antipsychotic drugs that have greater efficacy and lesser adverse effects. Antipsychotic drugs are tranquilizing medicines that are used to treat schizophrenia and bipolar disorders. The first generation of anti-psychotic drugs included clozapine (Monson 2008) which acted on the receptor sites of neurotransmitter, dopamine.

Clozapine is a prescription drug for advanced conditions of schizophrenia and is also sold in the market under the trademark of Clozaril and FazaClo. It is

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sold specifically under prescription as tablets. It reduces the heightened sensitivity by blocking dopamine and serotonin from being transmitted in the brain. Some adverse side effects of clozapine can be drowsiness, constipation, and weight gain. Sodium valproate is an anticonvulsant that is now commonly used in treating psychiatric disorders particularly in the treatment of psychosis and depression (Omranifard, Amel & Amanat 2010).

Some common side effects of prolonged use of these medicines are weight gain, diabetes, drowsiness, spasms and tremors (NIH 2010). Some other symptoms like tardive dyskinesia (NIH 2010) which causes twitching around the mouth region are also seen in some patients. If these symptoms are noticed in patients being treated with these medicines, the doctor's intervention should be sought. Patients suffering from schizophrenia have to be on life-long treatment for this condition.

In the movie, *A Beautiful Mind*, we also see the use of shock therapy in the form of insulin shock therapy. Nash had to undergo this kind of therapy five times a week for duration of ten weeks. In the conventional mode of treatment, it was thought that convulsions were a way to prevent occurrence of schizophrenia (Freudenreich, O. et al 2008). Hence, this method of treatment was used on patients to induce convulsion and electroconvulsive was often used to protect the patient from personality disorders. In modern times, doctors use anesthesia and varieties of muscle-relaxants to this therapy more bearable.

Intervention, Support Program and Therapy for Schizophrenia

Apart from medical intervention, the patient needs to undergo behavioral therapies such as training in social skills in order to function normally in their daily lives. Support and awareness programs should be conducted for the patient as well as the family members. Support at a community level should also be given to the care-givers to cope with the situation and prevent relapses (Dawson 2010). Family members and support groups must encourage patients to follow through with their treatment and get check-ups done regularly (WHO 1973).

Basic skills that need to be reinforced with a person suffering from schizophrenia should include (Challis 2010):

- Training for rehabilitation like being able to perform basic hygiene routine and being able to eat on one's own
- Being able to use public transport
- Train for a job: basic skills and communication
- Learn how to manage money
- When to take correct doses of medicines
- How to recognize signs of relapse and communicate with the therapist.

Diagnostic Tests for Schizophrenia

The first step in the detection and prognosis of the clinical conditions experienced in schizophrenic and bipolar patients is through reliable

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diagnostic techniques such as CT scan of the brain, magnetic resonance and other imaging techniques which may help eliminate possible confusion in the diagnosis of this disease. As there are few or no medical tests available that will warn a person of an onset or prevention of this disorder, the psychiatrist must carry out a thorough evaluation of the patient's family background and genetic history by interviewing the patient and the care givers. The doctor must also take into account the course the illness has taken and how long the symptoms have been prevalent, patient's reaction to medication and therapy (Schwartz 2010).

Current Prevalence

The current prevalence of this condition at a global level stands between 0.5 and 1 percent (Bhugra 2010). However, prevalence of this disorder can be calculated only through registered cases of Schizophrenia and other psychiatric disorders. The risk of occurrence of this disease is higher than the actual prevalence recorder statistically. Prevalence in developed countries is higher than in developing countries, partially because more cases are registered and more commonly because of the nomadic and unstable lifestyles (Saha et al 2009). There is no appreciable difference in the male and female cases of occurrence, though the onset in males is found to be earlier than in females. The migrant populations have a higher propensity for this disorder.

Impact of Psychosocial Issues like Discrimination

John Nash had strange mannerisms and his odd behavior put some of his students and friends off (A Beautiful Mind 2001). His constant writing of

formulae on window panes and wearing his knitted hat at all times seemed
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out of place and caused his friends to ridicule him. The incident of his being dared to speak to an unknown girl and her slapping him for his effort caused him to become the brunt of his friends' jokes. There was an incident with his teacher who was worried about Nash's performance in Princeton but that was later transformed to appreciation because of the brilliance of his project.

People suffering from schizophrenia are often labeled, stereotyped (Marder 2010) and discriminated against. The common perception is that the patient is responsible for having the behavioral changes that are a part of the symptoms of the disorder. Often negative stereotypes are created and the people suffering from schizophrenia are believed to have undesirable or uncontrollable characteristics. In the film, it has been demonstrated by the absent-minded behavior of John Nash when he allows his son to nearly drown in the bath-tub while he goes off to complete his secret work. His constant delusion of being engaged in highly classified and confidential state matters caused his wife and friends distress and at certain periods to mistrust his words, when in reality he was making up stories due to his hallucinations and delusions.

These stereotypes often lead to discrimination against the sufferers of schizophrenia (Merill 2010) and they are considered as social outcasts. Discrimination often takes the form of patients being rejected in society and their job applications being rejected on the basis of their mental health reports. The same has been observed in the case of letting out apartments to people with a history of schizophrenia. They are not considered socially competent and find themselves subjected to derision and not being taken

seriously. The quality of their work is often scrutinized more than the average worker and that causes them additional mental trauma.

Certain ethical issues that may come up during the prognosis and treatment of this disorder may come in conflict with human rights issues. For example, patients who were treated with electroconvulsive therapy were never consulted and had to endure extreme pain and terror often without reaping the benefits of being completely cured.

Another significant point to be remembered is that persons with schizophrenia are often driven to desperate acts like self-mutilation (Challis 2010) because the people they trust do not believe them and sometimes reject them outright. This, to my mind, adds insult to injury because the need to be heard and understood is very high in people who are confused and trying to grapple with their own demons.

Role of Nurse in Treatment of Schizophrenia

The role of a nurse in the treatment of schizophrenia is important as they can be effective in intervening with people suffering from schizophrenia and their families. They are trained to use interventions that have been proven to be effective. They can be administer IV injections and monitor the condition of patients so that the chances of a relapse are minimized. They can help in educating the family members, improve the family's ability to cope with the stress of having to care for a mentally ill patient and improve their communication skills. The nurse is particularly trained to observe drug compliance and manage the situation professionally in times of crisis.

Nurses can also monitor the physiological condition of the patient and make educated reports to the doctor in charge of the patient's treatment. For the family, the diagnosis of schizophrenia in a loved one is experienced as a disruptive event that changes the family life and affects a family member permanently and scars him/her for life. This unhappy experience mars the patient's relationships with his family members and friends who begin to perceive him as a stranger who is needy and requires constant attention. The presence of a trained nurse can mitigate this situation as it is easier to confide in, trust and unburden one's grief to a third party whose perception of the situation will be more objective. Also the nurse's training in this specific field can be used as a better supervisor to monitor the day-to-day progress in a patient's condition.

A family member or care-giver may be emotional about it and not be able to assess the situation objectively or even adhere to drug-compliance and post recovery counseling. Nurses can also help the client to recognize hallucinations and talk about the hallucinations dispassionately. Nurses are also in the unique position of being trusted by the patients whom they can reassure by telling them that there are other patients who have similar symptoms (Nursing Care Plan 2010). A patient is more likely to receive a nurse's recommendations for treatment more seriously than family members and help the patients to recover more quickly.

Recommendations

The movie is much acclaimed and very well made as it has not used a clichéd approach to schizophrenia as a mental disorder and ways in which people deal with this debilitating disease (Hausman 2010). In the movie, the <https://assignbuster.com/mental-illness-as-portrayed-in-a-beautiful-mind-nursing-essay/>

ending is touching but it shows how people once afflicted with this disorder will have to live with it for their lives. However, I would think that with the newer techniques of treatment and advancement in pharmacology, these kinds of disorders will be able to reduce the trauma of the patient and their families. The antipsychotic drugs, Thorazine and Haldol (Mayo Clinic Staff), are effective against agitation, hallucination as well as delusion that sometimes have irreversible side effects of involuntary movements of tongue and mouth, and are prescribed by medical practitioners. But these symptoms are relatively less harmful when compared to the relief they provide to the patient and their families.

Realistic films such as *A Beautiful Mind* should advertise the newer modes of treatment that will reduce the suffering of the people and allow them to lead happy lives. I would recommend that this powerful medium be used to create awareness amongst common people so that the patients of schizophrenia are not discriminated against and their disorders can be stemmed at the initial stages.

It is recommended that people be made aware of the positive and negative symptoms associated with schizophrenia like delusional, bizarre behavior and slurry speech as well as the lack of emotions and total withdrawal from society. Detecting and diagnosing this disorder at the earliest stages is the most effective way to stem regression and educating families with a history of mental disorders and society, in general, about the possible resources that are available, today, can help prevent a lot of trauma to all concerned.