

Schizophrenia essay example

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In spite of our great knowledge of its causes, course and treatment, schizophrenia and psychosis continues to amaze both health professionals and the public. This is because these illnesses are poorly understood.

Schizophrenia and psychotic disorders are serious illnesses that affect the mind and alter an individual's ability to think and make judgment, communicate and understand effectively. People

Psychosis and life span development, there are four developmental stages of suffering from psychosis often will lose touch with reality, behave inappropriately and are unable to meet the demands of ordinary daily life.

In schizophrenia importance that occurs throughout an individual's life.

These stages include infancy, adolescence, adulthood and old age. When a break in the development of an individual occurs during any of these stages, he or she is liable to develop a mental disorder like psychosis or schizophrenia.

Historically psychiatry and psychology have developed from the ancient theory that explores four main factors mainly genetic, biochemical, psychodynamic and social factors. There is need for psychologists and clinicians to understand the personal psychological problems of individual patients, be able to identify signs and symptoms of abnormal psychology and provide accurate prompt management action.

This is a psychotic disorder characterized by patterns of severe behavioral and cognitive symptoms such as delusions and hallucinations. This condition may persist for six months or more. There are two categories of schizophrenia namely:-

(a) Schizophrenia Positive or type 1 Schizophrenia - this is characterized by abnormal behavior, delusions and hallucinations one also develops speech and thought disorder. Positive symptoms are the features that are not very common or are absent but in this case they can be elicited.

(b) Schizophrenia Negative or type 2 Schizophrenia - it is characterized by absence of some common symptoms such as poor interpersonal relationship, flat mood, maladaptive and inappropriate social skills. This also includes withdrawal symptoms, lack of interest, poor concentration and state of being emotionless. In negative schizophrenia there is absence of functions namely present.

PSYCHOTIC DISORDERS

In this type of disorder an individual has distinct loss of contact with reality with symptoms such as delusions and hallucinations. Common types of psychotic disorders include:-

(a) Schizo Affective Disorder - an individual exhibits symptoms of both schizophrenia and mood disorder such as bipolar disorder or depression. There is loss of contact with reality and abnormal mood.

(b) Schizophrenic disorder - in this type of condition, individuals have features of schizophrenia but the symptoms last between one and six months.

(c) Brief Psychotic Disorder – this is characterized by sudden change of behavior, brief psychotic episodes often associated with a stressful event such as death of a loved one. Recovery normally takes less than a month.

(d) Delusional Disorder – a person will have a false fixed belief (delusion) often involving a real life experience. They have bizarre beliefs, like people are spying on them or even a belief that they are suffering from a certain disease. This condition lasts for about one month.

(e) Shared Delusional Disorder – there is a strange development of delusions in a person closely related to a person who has been diagnosed with psychotic disorders.

FAMILY SYSTEMS

The effect of family systems on development of psychotic disorders was studied extensively by a scientist Murray Bowen, who developed a model known as Murray Bowen's family system theory.

In this theory Bowen focused on the relationships between anxiety and families. The determinants of chronic anxiety and reactivity in an individual may be closely related to external stressors and sensitivity to some rundown from one generation to another. Inability by family members to deal with relationship dilemmas and rather react anxiously to some emotional difficulties could lead to some psychotic disorders like chronic anxiety.

Bowen emphasized on the need for individuals and families to understand how the emotional systems work and focused on making individuals change rather than expecting others to change. He did a study that emphasized on key areas of a family system that affect human behavior. These areas included; studies on nuclear family, emotional fusion, couple conflict,

symptoms in a spouse, symptoms in a child, family projection process, emotional disconnect, sibling rivalry, differentiation of self-etc.

Biological factors and genetic makeup of a person can be a cause of psychotic disorder. Other factors that could lead to psychotic disorder include emotional stress; trauma, disturbances etc. This could lead to onset of mental illnesses.

Proximal or the immediate causes are related to brain function abnormalities that include neuropsychological deficits. Factors that contribute to these problems include genetic makeup of an individual or even viral infection e. g. HIV, neurochemical transmitters, imbalances or even problems of the neuro cortex has been linked to schizophrenia. Brain structures e. g. enlarged lateral ventricles of an individual's brain has also been linked to schizophrenics. Predisposing causes of schizophrenia includes climatic conditions, people born during winters or spring have higher chances of developing schizophrenia and this is attributed to influx of viral diseases during winter. Other factors include complications during pregnancy and birth. Teratogenic effect of drugs or even monozygotic twins, increases chances of acquiring schizophrenia. Genes may also be responsible for psychotic disorders in children and this is evidenced by studies carried out on monozygotic and dizygotic twins.

The psychodynamic components of a child's development can be explained by their disruptive behavior either due to a malfunction of their conscience or super ego. Socio-cultural factors also influence somatoform disorders.

Such experiences like sexual abuse, rape, etc. on a child may cause some disorders in later stages of life.

CHILDHOOD DISORDERS

Some disorders that have been diagnosed in childhood continue to decrease as a child reaches teenage life and during maturity, for conditions like anxiety disorders and schizophrenia symptoms will set in from adolescence to early adulthood. Depression develops in young girls in their childhood and this explains the high prevalence of depression in adult women. Mental retardation will be diagnosed between childhoods up to ages of 18 years when individuals are found to be having lower intelligence for their age.

Learning disabilities are easy to detect in early childhood when children begin school and this can be diagnosed below the age of 9 years.

Communication disorder is detected in school age children when they develop difficulties in understanding and formulating words. Other conditions like conduct disorder or defiant behavior manifests between the ages of 10-14 years.

Many theories have been formulated to explain the causes of childhood disorders; there is a contribution of both environment and genetics in the course of childhood and developmental disorders. Early childhood trauma, stress, emotional behavioral and social disorders are some of the factors contributing to childhood psychotic problems. Other classification of childhood disorders include:-

AUTISM – It can be diagnosed as early as 3 years or even later. Symptoms of autism vary at different ages but initial features include impaired social

interactions, communication disorder, repetitive behavior and restricted patterns of interest. In children between 0-3 years, some signs and symptoms include lack of interest, irritability; child prefers to be alone, easily frustrated with challenges and lack of interest to play. They may also show unusual interest in specific objects e. g. moving objects.

ATTENTION Deficit Disorder (ADD) – these are psychotic disorders characterized by behaviors such as hyperactivity, impulsiveness, and attentiveness.

Down syndrome – this is a genetic disorder that results from having an extra copy of chromosome 21, which changes the development of body and brain of a child. Physical characteristics of Down syndrome include small hands, irregular ear shape, poor muscle tone, a flat face and short neck; they also have poor intellectual ability, communications disorder, slow motor skills and poor problem solving ability.

COGNITIVE MENTAL DISORDER

In abnormal psychology, cognitive disorders are psychological disorders that originate from temporary or permanent interruption of our basic cognitive functions. These include reception, problem solving, memory and language. There are three main classifications of cognitive disorders as outlined by the Diagnostic and Statistical manual of Mental Disorders. They include;-

(a) DELIRIUM – this is a disorder characterized by an individual's problem of processing new information or is unaware of his/her situation. It has an acute onset but does not last for long; it may last for hours or even weeks. It is

usually accompanied by mood swings, violent behaviors, inattentiveness, or hallucinations.

(b) DEMENTIA – this is a cognitive disorder in which an individual's memory is fully or partially erased. The cause could be either genetic or trauma induced.

(c) AMNESIA – its symptoms include an individual having a problem retaining memories. Anterograde amnesia is difficulty in retaining recent memories while retrograde amnesia is inability to retain long term memory.

Regardless of how we understand it, schizophrenia explains that its symptoms, however restricted, results from a composite interaction between nature and nurture and can be easily treated through the use of a typical antipsychotic drugs and psychotherapy.

References

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