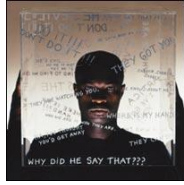


What do the voices in your head say?



Chapter 9  
Schizophrenia and the  
Related Disorders

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### Class Objectives

- What is Schizophrenia?
- What are the features of Schizophrenia?  
Positive and Negative
- What are the different types of Schizophrenia?

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Stop and Think...  
How would you describe  
Schizophrenia?

How would you describe a  
person with this disorder?



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## Who has Schizophrenia?

- A middle-aged man walks the streets of New York with aluminum foil under his hat, so the Martians can't read his mind.
- A young woman sits in her college classroom and hears the voice of God telling her she is a vile and disgusting person.
- You try to strike up a conversation with the supermarket bagger, but he stares at you vacantly and will say only one or two words in a flat, monotone voice.

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## They ALL do!

Schizophrenia is classified as a *psychotic disorder*. These disorders are characterized by *hallucinations and delusions*, which involve a loss of contact with reality

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## How disruptive is this disorder?

- Schizophrenia is a devastating disorder that has a tremendous impact almost every area of functioning.
- This disorder is characterized by a broad spectrum of cognitive and emotional dysfunctions, including:
  - Hallucinations
  - Delusions
  - Disorganized speech & behavior
  - Inappropriate emotions

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### History

Schizophrenia comes from the Greek words for *split mind*, which reflected Bleuler's (1908) belief that underlying all the unusual behaviors was an associative splitting of the basic functions of personality.

This phrasing contributed to a large misconception about Schizophrenia. Cognition, emotion and perception are splintered, it is NOT multiple personality disorder!

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### Society tends to devalue and dehumanizes those with schizophrenia.

- People with these severe mental disorders are twice as likely to be harassed in public as people without schizophrenia (Berzins et al., 2003).



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**THINK**

### Are people with Schizophrenia accurately portrayed in our society?

What preconceived images or ideas do you have about people with Schizophrenia?

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Characters on TV and in movies, as well as images in the media commonly depict this disorder inaccurately and often promote distorted images of schizophrenia

More than 70% of T.V characters in prime-time dramas with schizophrenia are presented as violent

- More than 1/5 depicted as murders.

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Symptoms of schizophrenia are divided into 2 categories, positive and negative.

- Positive symptoms:
  - These are additions and the more obvious signs of psychosis- not to be confused with happy.
- Negative symptoms:
  - Indicate the absence of normal behavior.

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Positive symptoms

- Delusions are a false, unshakable belief.
  - This symptom involves disorder of thought content and beliefs that are misrepresentations of reality.
- A person who believes the flickering street light is sending him messages from the aliens is delusional

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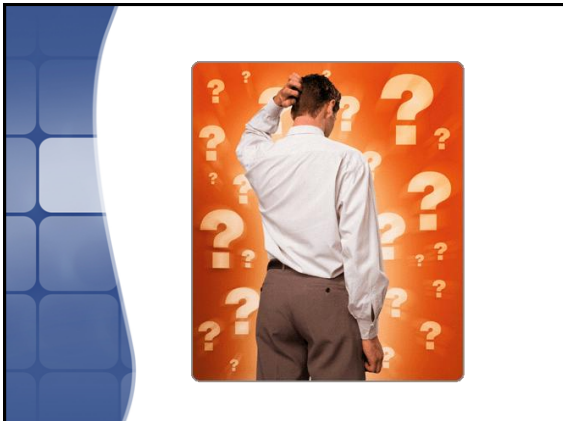
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Hi, Jesus Christ. Nice to meet you.

- *Delusions of Grandeur* are the belief that you are more important than you are.
  - For example when you believe that you are very special or have special powers or abilities.
  - "I'm Napoleon" "I can cure cancer with my powers"

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## Delusions

- A very common delusion effecting 1/3 of people with schizophrenia is the belief that others are “out to get them.” They believe they are being cheated, harassed, poisoned, or conspired against
  - These are called *delusions of persecution* (paranoid delusions) which can be the most disturbing for people with schizophrenia

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## “I know what that means...”



*Delusions of reference* involve a person having a belief or perception that irrelevant, unrelated or innocuous things in the world are referring to them directly or have special personal significance.

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While watching a re-run of the Cosby show, Dan recognizes that Bill Cosby is speaking directly to him. These “messages” are a sign from God that something bad is about to happen. He must run and get as far as possible!

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### Delusions of Reference

- They feel that people on television or radio are talking about, or talking directly to them.
- They believe the headlines or stories in newspapers are written especially for them
- believing that events (even world events) have been deliberately contrived for them, or have special personal significance

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### Did you hear that?!

Hallucinations are also positive symptoms of schizophrenia that are evidence of perceptual disturbance.

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Hallucinations are false perceptions and inaccuracies that affect the senses.

Causing people to hear, see, taste, touch or smell what others do not.

Auditory hallucinations are the most common.



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## Understanding Hallucinations

- Research found by using SPECT scan of the brain that the area of the brain most active during hallucinations was Broca's area
  - linked to speech production.
- This research suggests that people are not hearing the voices of others but they are listening to their own thoughts or voice and they can't recognize the difference (Hoffman, 1999)

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In contrast to the presentation of new features with positive symptoms, *negative features of schizophrenia* indicate the absence of or insufficiency of "normal" behavior.

They include emotional and social withdrawal, apathy, and poverty of thought and speech.

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- Avolition (Apathy), is the inability to initiate/persist in important activities.
  - People who are apathetic are uninterested in performing even the most basic day-to-day activities, like grooming/bathing.
- Alogia is often referred to as poverty of speech. This is the relative absence of typical speech
  - A person with alogia may respond with brief answers to questions that have little content and may appear uninterested in the conversation.
  - Example- "Do you have children?" "Yes"

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## Are they just unsocial people?

- This deficit in communication is believed to reflect a negative *thought disorder*, rather than inadequate communication skills.
- Research suggests that people with alogia may have trouble finding the right words to formulate their thoughts (Alpert & Clark, 1994)

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## Hey...Mom's dead!

- Sometimes people with schizophrenia display *inappropriate affect*.
- Behavior that does not fit the mood is sometimes displayed, such as laughing or crying at inappropriate times
  - Laughing at a funeral

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People with schizophrenia often lack insight (awareness) and have *disorganized* thoughts and speech.




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## Disorganized Thoughts

- These are marked by *looseness of associations*, in which the patient rambles on from topic to topic in a disconnected way *tangentially*
  - Where unrelated answers are given to questions

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The “*word salad*” is also displayed in which the patient’s speech is so incoherent that it makes no grammatical sense

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## Physical characteristics

- Some people are very *physically agitated*
  - “psychomotor agitation”
- Others in the other extreme, hold unusual postures called *catatonic immobility*.
- This can also involve *waxy flexibility*, the tendency to keep their bodies in the positions someone else puts them in




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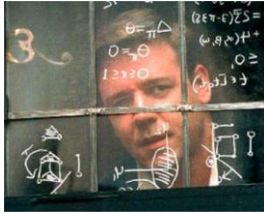


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## Interview with John Nash



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## The many faces of schizophrenia

This disorder is divided into subtypes:

- Paranoid
- Disorganized
- Catatonic
- Undifferentiated

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## Paranoia will destroy ya...

- This form of schizophrenia stands out because the delusions and hallucinations have a theme:
  - such as grandeur, excessive religiosity or persecution.

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Surprisingly, people with paranoid schizophrenia have a better prognosis than other forms of schizophrenia




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## Paranoid Schizophrenia

- People with paranoid schizophrenia tend to have their cognitive skills and affect relatively intact.
- They do not usually have disorganized speech or flat affect.

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## Disorganized type

- In contrast to the paranoid type, people with *Disorganized Schizophrenia* show marked disruption in their speech, thinking and behavior.
- These behaviors are often coupled with flat/inappropriate affect and an unusual self-absorption
- Patients may spend an excessive amount of time staring at themselves in a mirror (Ho et al., 2003).

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If hallucinations/delusions are present, they are often fragmented and do not revolve around a central theme.

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### Catatonic Type

- This type of schizophrenia effects the motor functions/responses. This can be displayed in the waxy flexibility or excessive psychomotor activity
- People with this type of schizophrenia sometimes display odd mannerisms with their bodies and faces, such as facial grimacing.
- They often repeat or mimic the words of others (echolalia) or movements (echopraxia)

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This type of schizophrenia is relatively rare, and there is some debate about whether it should remain classified as a separate subtype.

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## Undifferentiated Type

- People do not always fit neatly into a specific subtype, which is why there is a subtype of undifferentiated schizophrenia.
  - People who have the major symptoms of schizophrenia, but do not meet the criteria for paranoid, disorganized or catatonic types.

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## Can you just have a little bit of schizophrenia?

- No, but you can experience one psychotic episode without further symptoms. This is the residual type of schizophrenia.
- Although they may not display bizarre hallucinations or delusions, they may have "left over" symptoms.
  - Social withdrawal
  - Bizarre thoughts
  - Inactivity
  - Flat affect

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## What's Next?

- Other psychotic disorders
- Causes of Schizophrenia

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