

# What Is *Psychosis*



**Early Psychosis Intervention Program**

The word “psychosis” is used to describe conditions that affect the mind, in which there has been some loss of contact with reality.

When someone experiences symptoms of psychosis, their condition is referred to as a psychotic episode. The terms “early psychosis” or “first-episode psychosis” simply mean that an individual is experiencing psychosis for the first time.

Psychosis affects an individual’s thoughts, feelings, and behaviours. The experience of psychosis varies greatly from person to person and two individuals experiencing psychosis may have very different symptoms.

Who gets psychosis?

- approximately 3% of all individuals will experience an episode of psychosis in their lifetime
- psychosis affects males and females equally
- first episodes of psychosis generally develop in young people in their late teens to mid-twenties
- psychosis occurs across cultures and levels of socioeconomic status

There are three phases to a psychotic episode:

## **1. Prodromal Phase**

Looking back at the period before the psychosis became evident, there are often changes in feelings, thoughts, perceptions

and behaviours. This period is called the “prodrome” and these early changes are referred to as “prodromal” symptoms.

Prodromal symptoms vary from person to person and some people may not experience a prodrome. The duration of the prodromal phase is quite variable, although it usually spans several months.

Some of the more common prodromal symptoms are:

- reduced concentration, attention
- reduced drive and motivation, lack of energy
- depressed mood
- sleep disturbance
- anxiety
- social withdrawal
- suspiciousness
- deterioration in role functioning (no longer attending school or going to work)
- irritability

## **2. Acute Phase**

During the acute phase, typical psychotic symptoms emerge.

The symptoms of psychosis are frequently separated into “positive” and “negative” categories.

### **Positive Symptoms**

These symptoms are referred to as “positive” because they are viewed as an excess or distortion

of the individual’s normal functioning.

Some of the positive symptoms include:

### **Delusions**

Delusions are false beliefs that are firmly held and out of keeping with the person’s cultural environment. These beliefs are very significant to the individual but are not accepted by other people.

Some of the more common delusions include beliefs of:

- being followed or monitored
- being plotted against
- having special abilities or “powers”
- certain songs or comments are communicating a hidden message
- being controlled by forces or other individuals
- having one’s thoughts being broadcast so others can hear them

### **Hallucinations.**

Hallucinations involve seeing, hearing, feeling, smelling, or tasting something that is not actually there. The most common type of hallucination involves hearing things – such as voices or particular sounds.

### **Disorganized Speech or Behaviour**

The speech of individuals with psychosis may be disorganized - the person might frequently move from one topic to the next

or the person's speech may be so disorganized as to not be understandable.

The behaviour of individuals with psychosis also may be disorganized – and the person may have difficulties performing activities of daily living (e.g., cooking, self-care, etc.) or display inappropriate behaviours or affect (e.g., laughing while describing a personal tragedy).

### **Negative Symptoms**

Negative symptoms reflect a decrease in or loss of normal functions. These symptoms are often less evident than positive symptoms and require careful assessment to ascertain if they are indeed psychotic symptoms or if they are related to something else (such as depressed mood or medication side effects).

Some examples of negative symptoms include:

- little display of emotions
- not speaking very much
- difficulties with coming up with ideas or thinking
- decreased ability to initiate tasks
- lowered levels of motivation or drive

### **Other symptoms or problems apparent during the acute phase**

It is common for other symptoms or problems to occur along with the psychotic symptoms.

Some examples of other problems that may be evident include:

- Depression
- Anxiety
- Suicidal thoughts or behaviours
- Substance abuse
- Difficulties functioning
- Sleep disturbance

### **3. Recovery Phase**

***“Psychosis is treatable. Recovery is expected.”***

With appropriate treatments, the great majority of people recover well from their initial episode of psychosis.

Once the psychosis has responded to treatment, problems such as depression, anxiety disorders, decreased self-esteem and social impairment need to be addressed during the recovery phase. Assistance with employment, school, and other responsibilities may also be required at this time.

The recovery process will vary from person to person in terms of duration and degree of functional improvement. Some people will recover from the psychosis very quickly and be ready to return to their life and responsibilities soon after. Other individuals will need time to respond to treatment and may need to return to their responsibilities more gradually.

Following recovery from a first episode, a significant number of

people will never experience a second episode (called a relapse) of psychosis. However, the risk of relapse is greatly increased if medication and other treatments are discontinued prematurely.

The likelihood of a complete recovery is much better with proper treatment.

### **Diagnosing Psychosis**

Psychosis is associated with several different mental and physical disorders.

Some of the more common diagnoses associated with psychosis include:

- schizophrenia
- schizophreniform disorder
- Brief reactive psychotic disorder
- Bipolar disorder
- Psychotic depression
- Schizoaffective disorder

There are also other disorders in which psychosis may occur.

Sometimes, certain specialized types of assessments (such as a brain scan or assessment of cognitive functioning) may aid in clarifying the specific diagnosis and these will be arranged when it is felt they may be helpful.

In order to properly diagnose what specific type of psychotic disorder an individual has, patterns of symptoms must be assessed often over many months. For this reason, determining the diagnosis may take some time.