



- [home](#)
- [about](#)
- [brochures](#)
- [resources](#)
- [site map](#)

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Find Topic:

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Search:

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- [Domestic Violence](#)
- [Eating Disorders](#)
- [HIV & AIDS](#)
- [Mental Health and the Economy](#)
- [Mental Illness](#)
- [Obsessive-Compulsive Disorder](#)
- [Panic Disorder](#)
- [Patient Bill of Rights](#)
- [Phobias](#)
- [Postpartum Depression](#)
- [Posttraumatic Stress Disorder](#)
- [Seasonal Affective Disorder](#)
- [Schizophrenia](#)
- [Suicide](#)

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- [Children's Mental Health](#)
- [College Age Students](#)
- [Healthy Minds Blog Contributors](#)
- [Healthy Minds TV Program](#)
- [Latino Mental Health](#)
- [Men](#)

- [Military](#)
 - [Public Service Announcements](#)
 - [Seniors](#)
 - [Sexual Orientation](#)
-
- [Home](#)
 - Schizophrenia

Schizophrenia

Schizophrenia is a chronic brain disorder that affects more than one percent of the population. When schizophrenia is active, symptoms can include delusions, hallucinations, trouble with thinking and concentration, and lack of motivation. However, when these symptoms are treated properly, a large portion of those diagnosed will greatly improve over time.

While there is no cure for schizophrenia, research is leading to new, safer treatments. Experts also are unraveling the causes of the disease by studying genetics, conducting behavioral research, and by using advanced imaging to look at the brain's structure and function. These novel approaches hold the promise of new, more effective therapies.

The complexity of schizophrenia may help explain why there are misconceptions about the disease. Schizophrenia is not synonymous with split personality or multiple-personality disorder. Most people with schizophrenia are not dangerous or violent. They also are not homeless nor do they live in hospitals. The majority of people with schizophrenia reside with family, in group homes, or on their own.

While research has shown that schizophrenia affects men and women equally and occurs in similar rates in all ethnic groups around the world, its symptoms differ from person to person and can fluctuate over time. When the disease is active, it can be characterized by episodes in which the patient is unable to distinguish between real and unreal experiences.

Symptoms

There are several subtypes of schizophrenia, depending on the most prominent symptoms. As with any illness, the severity, duration, and frequency of symptoms can vary; however, in persons with schizophrenia, the incidence of severe psychotic symptoms often decreases during a patient's lifetime. Not taking medications, use of alcohol or illicit drugs, and stressful situations tend to increase symptoms. The symptoms fall into three categories:

Positive symptoms

Hallucinations, such as hearing voices, paranoid delusions, and exaggerated or distorted perceptions, beliefs, and behaviors.

Negative symptoms

A loss or a decrease in the ability to initiate plans, speak, express emotion, or find pleasure.

Cognitive symptoms

Confused and disordered speech, problems with memory, trouble with logical thinking, and difficulty paying attention and making decisions.

Symptoms usually first appear in early adulthood. Men often experience symptoms in their early 20s and women typically first show signs of the disease in their late 20s and early 30s.

Causes

Researchers believe that a number of biological and environmental factors play a role in the disease's onset and course. However, scientists do not yet know which factors produce the illness. Because of the variations in symptoms, many believe that schizophrenia constitutes a group of disorders, not unlike other chronic illnesses. Although the origin of schizophrenia has not been identified, scientists know that there is some hereditary basis or

genetic predisposition for the disease because it runs in families.

Treatment

There is no cure for schizophrenia, but treatments are available to reduce the intensity and frequency of the symptoms. Medication and psychosocial treatments can help some people with schizophrenia lead highly productive and rewarding lives, while for others, the illness continues to cause impairments in function despite treatment and family support.

A variety of antipsychotic medications are effective in reducing the psychotic symptoms present in the acute phase of the illness, and they also help reduce the potential for future acute episodes. Before treatment can begin, however, a psychiatrist should conduct a thorough medical examination to rule out substance abuse or other medical illnesses whose symptoms mimic schizophrenia.

People with schizophrenia abuse drugs more often than the general population. Substance abuse complicates the diagnosis of schizophrenia and also reduces the effectiveness of treatment for schizophrenia. If a patient shows signs of addiction, treatment for substance abuse should be pursued along with other treatments.

Recovery and Rehabilitation

After the symptoms of schizophrenia are controlled, therapy can help people learn social skills, cope with stress, identify early warning signs of relapse, and prolong periods of remission. For many with this disease, recovery from schizophrenia includes those who reach their full potential by managing the illness. Because schizophrenia typically strikes in early adulthood, individuals with the disorder need rehabilitation to help develop life-management skills, complete vocational or educational training, and hold a job. For example, supported-employment programs have been found to help persons with schizophrenia obtain self-sufficiency. These programs provide people with severe mental illness with jobs in competitive, real-world settings.

Many people living with schizophrenia receive emotional and material support from their family. Therefore, it is important that families be provided with education and assistance managing their ill relative's disease. Such assistance has been shown to help prevent relapses and improve the overall mental health of the family members as well as the person with schizophrenia.

People with schizophrenia may receive rehabilitation services on an individual basis, in the community, or in a hospital or clinic. When living alone or with family is not an option, supportive housing is often available and includes halfway and group houses as well as monitored cooperative apartments.

Outlook for the Future

Research continues into the causes and treatment of schizophrenia. With an improved understanding of the disease and effective therapies, those with schizophrenia can have a full life, hold a job, and live in the community or with their family.

Resources

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