

Schizophrenia

Schizophrenia is a disorder of the brain which affects the way people think, behave and perceive the world around them. This is a long-term condition that usually begins in late adolescence or early adulthood. The condition is linked to structural and functional abnormalities in the regions of the brain that control and coordinate thinking, perception and behavior, making it difficult for affected people to filter and process information.

Usually, the symptoms of schizophrenia develop gradually over a period of about 6 or 9 months, called the prodrome. However, in some cases rapid onset may be seen. Patients affected with this condition display two broad categories of symptoms, positive and negative. Positive symptoms are exaggerated versions of normal experiences. These include delusions or false beliefs, hallucinations or false sensory perceptions, such as seeing or hearing things that are not actually present, disordered behavior or changes in emotional sensitivity. The negative symptoms, on the other hand, are deficiencies of a typical emotional response. These include reduced physical activity, lack of motivation, loss of interest and a withdrawn attitude. In addition, patients may also have problems with attention, concentration and memory, as well as abnormal movement and declining academic performance.

About five people in every thousand are likely to develop schizophrenia during their life. This condition affects both men and women equally, although on average, women tend to develop the condition about a decade later than men. Women have also been noted to be more affected with the positive symptoms than the negative ones.

Risk Factors

Like most brain disorders, no single clear cause has been identified for schizophrenia. Family and twin studies have clearly shown that genetics plays a major role in the development of the condition. In fact, having a first degree affected relative is the single biggest risk factor for developing schizophrenia. However, the variants that have so far been found to be associated with the disease are able to explain only a very small part of the genetic risk. On the other hand, environmental influences have also been shown to affect the possibility of developing schizophrenia. These include childhood trauma, drug abuse and prenatal or birth stresses. It is likely that the condition manifests itself as a result of the interaction between these genetic and environmental risk factors.

Diagnosis and Management

A diagnosis of schizophrenia requires a thorough medical examination by a psychiatrist. Since other brain disorders like depression and obsessive-compulsive disorder can have overlapping features, it is important to distinguish between them. Schizophrenia is diagnosed only if the patient is shown to have experienced symptoms for at least six months, including at least one month of delusions, hallucinations or disorganized speech.

The common treatment for schizophrenia is medication and psychosocial therapy. Antipsychotic medications are the main class of drugs used for treatment. These work very well for the positive symptoms, but are not as effective against the negative

symptoms. Psychosocial therapy includes cognitive-behavioral therapy, family education, rehabilitation and skills training. The latter is extremely important, since schizophrenia typically affects people at the stage in life when they are normally developing the skills necessary for independent living. Like most long-term conditions, it is difficult to predict how well each individual patient will respond to the medication. Some patients respond very well and remain relapse-free, while some might need hospitalized care in spite of the medications and therapy. Early identification and effective intervention is important in successfully managing the condition

Schizophrenia in the Arab World

Prevalence of schizophrenia in the Arab World ranges from 0.7% in the UAE to 5.6% in Morocco, and it is comparable to the global rate. Like most other neurological brain disorders, stigma and lack of awareness play a major role in the under-diagnosis of the condition in the region. Strong family ties in Arab communities may play a positive role by providing support to affected patients. However, they may also negatively impact the condition by creating social pressure. In addition, in some rural communities, people tend to first seek help from spiritual healers, which delays diagnosis and prevents proper treatment.

Misconceptions about Schizophrenia

1. Schizophrenics suffer from split personality

Having multiple personalities is not a symptom of schizophrenia. This confusion probably results from the word 'schizophrenia' which when translated from Greek could mean 'split mind'. This is not a reference to split personality, but to a split from reality.

2. People with schizophrenia are violent and uncontrollable

Most patients are passive in nature, and are in fact, more susceptible to being victims of violence rather than perpetrators. Only a small subset of patients have a tendency for displaying aggressive behavior.

3. Schizophrenia is untreatable

It is true that schizophrenia cannot be cured. However, the treatments and therapies currently available can effectively manage the symptoms in patients in order to help them live healthy and productive lives.