



Psychosis

"I had a vivid dream; in it people I had seen on a train had turned into drug pushers and were trying to kidnap me. I woke up convinced that this was true. I was convinced that people were trying to climb up the trellis at the front of the house. I was afraid to be in a room without my parents but at the same time I thought my parents were being made to work for the gang which was trying to get me. I refused to eat because I thought my food had been drugged. I set off the panic button on the burglar alarm twice that evening as I felt so scared and helpless." (Anon.:BMJ)

What is Psychosis?

Psychosis is a term used to describe a range of conditions that affect the mind. These conditions lead to a loss of touch with reality and /or distorted perceptions of reality. When someone becomes ill in this way and loses contact with reality, it is called a psychotic episode. Psychosis is most likely to occur in young adults. It is quite common - 3 out of every 100 young people will experience a psychotic episode, making psychosis more common than diabetes in young people.

What Are the Symptoms?

Confused thinking: Everyday thoughts become confused or don't join up properly. You may have difficulty concentrating, following a conversation or remembering things.

False beliefs (delusions): You become so convinced of your delusion, that the most logical argument cannot make you change your mind.

Types of delusions include:

- Delusions of Grandeur: believing you are psychic, someone famous like a politician or Jesus Christ
- Delusions of Paranoia: believing you are being persecuted, followed, being plotted against, that people like family or friends are in a conspiracy against you.
- Being suspicious of a partner's fidelity, 'psychotic jealousy' is also a kind of delusion.

Hallucinations: You might see, hear, feel, smell or taste something that is not actually there. You may hear voices 'in your head' or see things that don't really exist, e.g.. snakes crawling up the wall. Voices may mock you, be abusive or may even be amusing. Hallucinations often seem absolutely real so they can cause agitation, hostility, great distress and make communication very difficult.

Changed feelings: If you are experiencing a psychotic episode you may feel strange and cut off from the world with everything moving in slow motion. Your emotions may seem dampened. You may feel less emotion than before, or show less emotion to those around you and you may withdraw socially.

Anxiety/Agitation: Very often your emotions are in turmoil. Things seem in some way not right or normal. This can be a time of great fear and stress when your usual methods to calm yourself don't seem to work. This leads to further fear about what is happening to you.

Changed behaviour: If you are experiencing psychosis you may behave differently from the way you usually do. You may be extremely active or lethargic. Often changes in behaviour are associated with the other symptoms of psychosis.

What Types of Psychotic Illnesses Are There?

Each person's experience of psychosis is different. This can make it is very difficult to make a clear diagnosis, particularly during a person's first episode of psychosis. Many mental health professionals do not use a diagnosis but refer to 'an episode of psychosis' or 'first episode psychosis.' Some people who experience one episode go on to have no further psychosis after successful treatment.

However, when a person has experienced a number of periods of psychosis they will generally be given one of the following diagnoses:

Schizophrenia – Schizophrenia refers to a group of mental illnesses that affect a person's ability to think, feel and act. The symptoms may include hallucinations, thought disorder, delusions, withdrawal, loss of emotion and energy and inappropriate emotions. To be diagnosed with schizophrenia, symptoms must have been continuing for a period of at least six months.

Bipolar Disorder – Bipolar disorder (manic depression) affects the way a person feels. You may experience periods of very extreme moods – feeling very high and/or very low for days, weeks or months. You may have delusions or hallucinations which are consistent with the high or low mood. Some people have a series of manic episodes, others a series of depressive episodes, while others have both manic and depressed episodes.

Schizoaffective disorder – There are two subtypes of this disorder (bipolar and depressive). In schizoaffective disorder, people have symptoms of either schizophrenia and bipolar or schizophrenia and depression. People with schizoaffective disorder are generally treated with a combination of medications, depending on their symptoms.

Schizophreniform disorder – Schizophreniform disorder is diagnosed if the psychotic symptoms last more than one month but less than six months. Symptoms are similar to those of schizophrenia.

Drug-induced psychosis – Drug induced psychosis is brought on solely by the use of drugs in someone who is predisposed to a psychotic episode. With a drug induced psychosis the symptoms appear quickly and last a relatively short time, from hours to days, until the effects of the drug wear off. Disorientation, memory problems and visual hallucinations are the most common symptoms.

Delusional disorder – If you have delusional disorder you may hold strong beliefs in things which are not true. You may have delusions of being persecuted, that people are out to get you; or that you are someone famous.

Major depression – Someone with major depression can have a type of depression which is so intense it causes loss of interest and enjoyment, loss of appetite, severe insomnia and even psychotic symptoms such as delusions.

Post-partum psychosis – Post-partum psychosis can be brought on by hormonal changes after childbirth, and often resembles schizophrenia or bipolar disorder. Post-partum psychosis happens to about 1 in 500 pregnant women and usually occurs in the first 6-8 weeks after the birth.

Other illnesses – Other physical illnesses altogether can affect the brain and cause psychotic symptoms. Some of these illnesses include AIDS, thyroid disorder, dementia, brain tumour, Huntington's disease and viral infection.

What Causes Psychosis?

A psychotic episode is triggered by a disturbance in the way the brain functions. Researchers are only starting to understand how someone develops psychosis and there is still much research to be done. Symptoms of psychosis often emerge in response to stress, drug abuse or social changes in individuals with a psychotic illness.

Biological - There is some evidence that psychosis is caused by a combination of biological factors which create a vulnerability to experiencing psychotic symptoms during adolescence or early adult life. A psychosis may be due to impairment of the nervous system in its early development, or possibly a chemical imbalance in part of the brain.

Genetic - For some psychotic disorders there is no family link at all. For others, such as schizophrenia and bipolar disorder, evidence suggests that genetic factors may play a part.

Stress - The stresses of life seem to play a part in bringing on or exacerbating psychotic episodes in people with a tendency towards developing a psychotic illness. These stresses are often greater in early adult life just when the illness commonly starts.

How is Psychosis Treated?

The first phase of treatment involves assessment: this means having a series of interviews with mental health specialists. Blood tests and x-rays will probably be organised to exclude a physical cause for the symptoms. Information obtained from you and your family and friends, together with the test results, will provide some idea about the type of psychosis being experienced, the cause, and how you can best be helped.

Medication - Along with other forms of treatment medication plays a fundamental role in recovery from a psychotic episode and in the prevention of further episodes. Different types of medication are effective in reducing the symptoms of psychosis and the anxiety and distress these symptoms can cause.

Counselling and psychological therapy - Having someone to talk to is an important part of treatment. As the recovery phase progresses, you may learn practical ways to prevent further episodes. These can include stress management techniques or ways of recognising warning signs. Counselling for your family and friends can also be very important. Support groups may provide some of the necessary support for recovery.

Hospital - Sometimes there are benefits in spending a period of time in hospital before continuing with home treatment. Hospitalisation allows symptoms to be observed more closely and medication to be trialled and stabilised.

Social support – Support from family and friends is crucial as it reduces isolation and makes you better able to deal with the symptoms. Community support and the reduction of stigma and myths surrounding psychosis is also greatly needed. Other forms of support which can be crucial to recovery include supported accommodation programs, such as Disability Housing through the Department of Housing; support in gaining employment; income support from Centrelink when you are ill; and training through TAFE or universities.

Recovering From Psychosis

The pattern of recovery from psychosis varies from person to person and can depend on the diagnosis. Some people recover quickly with very little intervention. Others may benefit from support over a longer period.

With a psychotic illness such as schizophrenia, one in approximately three people will have one or two episodes and then experience no further episodes. For some people with bipolar disorder, months or years can pass between psychotic episodes.

Where to Go For Help

- General Practitioner - for referral to a psychiatrist and to ensure that your general health is monitored
- Local Community Mental Health Centre (see 'Community Health Centre' in *White Pages*).
- Association for Relatives and Friends of the Mentally Ill (ARAFMI): (02) 9332 0700 or 1800 655 198
- Schizophrenia Fellowship of NSW: (02) 9879 2600 for information, support and referral
- SANE Australia: 1800 688 382 - for information and referral
- Mental Health Information Service: 1300 794 991 for information about services in your area



**Telephone Interpreter
Service 131 450**

If English is not your first language please call the Mental Health Information Service through the Telephone Interpreter Service (TIS). This service is free to non-English speaking Australian citizens or permanent residents. TIS have access to interpreters speaking more than 120 languages and dialects.



Medicare Rebates and Accessing Private Practitioners

What is the difference between psychiatrists and psychologists?

Psychiatrists are medically trained doctors who specialise in the treatment of mental illness. Like GPs they can prescribe, administer and monitor medication. Psychiatrists do not advertise so it is up to your GP to refer you to someone appropriate.

Psychologists are trained in human behaviour and use a range of therapies to treat patients. They provide services including assessment, psychological testing, and various types of psychotherapy and counselling.

Medicare rebate for psychologists

A Medicare rebate is now available for a number of sessions per calendar year with a registered psychologist* with a Medicare Provider Number. To obtain the rebate you must be referred by an appropriate medical practitioner, i.e. a GP, psychiatrist or paediatrician. The practitioner will ensure that you meet the eligibility requirements and develop a management plan for your condition.

The cost and rebate from Medicare can vary depending on the consultation length and fee charged. If the psychologist bulk bills there will be no extra cost.

For further information about the rebate or to locate a psychologist in your area contact the Australian Psychological Society on 1800 333 497 www.psychology.org.au.

* Similar Medicare rebates also exist for mental health accredited social workers and occupational therapists.

Mental Health Resource Centre

The Resource Centre contains material that promotes a better understanding of mental health issues. New books and DVDs are purchased on a regular basis and visitors are welcome to come in and browse.

Members of MHA, CAG and ARAFMI may check-out resources on loan. The length of the loan is 3 weeks. Membership costs between \$10 - \$30 per individual per annum. Please note that most of the reference books are not available for loan

You will find the Resource Centre Booklist on our website: www.mentalhealth.asn.au for further information contact 1300 794 991.

Disclaimer

This information is for educational purposes. As neither brochures nor websites can diagnose people it is always important to obtain professional advice and/or help when needed. The listed websites provide additional information, but should not be taken as an endorsement or recommendation.

This information may be reproduced with an acknowledgement to the Mental Health Association NSW. This and other fact sheets are available for download from www.mentalhealth.asn.au. The Association encourages feedback and welcomes comments about the information provided.

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