

TREATMENT....for schizophrenia

Depending on how severe their symptoms are, people with schizophrenia may be treated as outpatients or they may be hospitalized. Today, the illness is treated primarily with a combination of medication and psychosocial interventions (counselling, for example). Family counselling is often recommended to help people with schizophrenia and their families understand and manage problems associated with the illness. It is important that they learn as much as possible about treatments being offered, understand the pros and cons of each treatment and discuss them with the physician so everyone becomes a partner in care.

BIOLOGICAL TREATMENTS

Medication

Medications called neuroleptics or antipsychotic drugs, developed in the 1950s, have proven to be among the most important medical advances for treating schizophrenia. Because of these drugs, people with schizophrenia no longer need to be hospitalized for years. Most are able to live in the community, needing hospitalization for the illness only if they relapse.

There are many different types of antipsychotic medications: the type and dosage will vary for each person. Most of these drugs are given in tablet form, some are liquids and others are given as injections. These medications are not addictive. It is important to keep taking the medication long enough to control symptoms and prevent a relapse. The treating physician will be able to determine how long the drug should be taken. Some people forget to take their medication regularly. For them, long-lasting (depot) injections may be given, sometimes just once a month.

Some people do not respond to traditional antipsychotic medications, but may get good results from recently developed medications. One of the newer drugs, clozapine, can weaken immunity in some people. Therefore, people taking clozapine need regular blood tests to monitor their white cell counts.

Antipsychotic medications are the main class of drugs used to treat schizophrenia, but other types of medication may also be prescribed to treat particular symptoms such as depression, anxiety or sleep difficulties.

Side-effects

Unpleasant side-effects may be experienced when taking antipsychotic medication. This is especially common during the active phase of illness, when a higher dose of medication may be required. The most common problems include muscular stiffness, tremor, muscle spasms, restlessness, dry mouth and blurred vision. As a result of these side-effects, people may become discouraged, and may not want to take medication. However, over time the body tends to adjust and the side-effects should lessen. Other medication may also be prescribed to relieve or reduce these unpleasant side-effects.

For some, long-term use of neuroleptics medication results in another disorder called tardive dyskinesia. It usually consists of involuntary movements of the face, eyes, tongue, mouth or jaw. If this condition appears, medication may be changed or discontinued.

Electroconvulsive therapy (ECT)

Electroconvulsive therapy (ECT), often referred to as electro-shock therapy or shock treatment, is not usually recommended for the treatment of schizophrenia. However, in some cases it is prescribed for people who are severely ill and do not respond to medication. It may also be prescribed for people who are severely depressed.

Psychosocial interventions

Schizophrenia usually develops in young people during the years when they would normally develop the skills needed for independent living. Because this process is disrupted by the onset of their illness, psychosocial interventions are often used to help develop this crucial skill. Psychosocial interventions help people set and achieve goals in key areas of their lives. A variety of approaches are used, such as case management, counselling, centre or clubhouse-based programs, and housing programs with built-in support or flexible outside support.

Counselling

Counselling is offered by health care professionals trained in social work, nursing, psychology, medicine, or occupational therapy. The most common form of counselling for people with schizophrenia is supportive psychotherapy, which can be provided individually or in group formats. Using this approach, people learn more about the sources of their distress and receive help to change beliefs and behaviours that contribute to their problem. Emphasis is placed on encouraging people to develop their strengths and their ability to cope with illness.