Psychology - Schizophrenia:

Clinical Characteristics-

Positive Symptoms; Hallucinations, Delusions, Disorganised Thinking/Speech, Disorganised or Catatonic Behaviour

Negative Symptoms; Affective Flattening, Alogia, Avolition

Classification and Diagnosis

DSM-IV is the American classification system, and ICD-10 (International Classification of Diseases), the tenth edition of which was published by the World Health Organization in 1992, are the two most common classification systems.

The DSM-IV diagnostic criteria are:

1. Two or more of the symptoms identified above for a period of over 1 month. One symptom only is needed if the delusions are bizarre or if the hallucination is critical and abusive of the individual’s behaviour.

2. The disturbance must be evident over a significant period of time, at least 6 months, including 1 month of pronounced symptoms.

3. The symptoms must have led to a failure to function in social and occupational roles.

The ICD-10 criteria are very similar to those used in DSM-IV. The main difference being DSM-IV requires evidence of continuous disturbance for at least 6 months, whereas ICD-10 requires that symptoms must be present for most of the time over a 1-month period.

For any diagnostic system to work effectively, it must possess reliability and validity. Reliability means that there is good consistency over time and between different people’s diagnosis of the same patient; the latter is known as inter-judge (or inter-rater) reliability. If a diagnosis of schizophrenia is valid then patients who are diagnosed as suffering from schizophrenia must have the disorder. If a diagnostic system is to be valid, it must also have high reliability.

AO2-

- A reason for the issues with reliability could include the factor of unreliable symptoms. Klostercotter assessed 489 admissions to psychiatric wards. He found positive symptoms were more useful for diagnosis than negative symptoms. However it's argued that patients with totally different behaviours can be given the diagnosis of schizophrenia, only one characteristic symptoms is needed 'if delusions are bizarre' yet even this create problems with diagnosis. When 50 psychiatrists in the U.S. We're asked to differentiate between 'bizarre' and 'non-bizarre' delusions, they produced an inter-rather reliability of 0.40. As a result of this the schizophrenia spectrum has been created in order to a more reliable diagnosis of schizophrenia.
Primary use is to reduce positive symptoms occurring due to overactive dopamine an example is Chlorpromazine.

- Bind to dopamine receptors blocking their action reducing stimulation
- Reducing stimulation of dopamine in the brain means antipsychotics can eliminate positive symptoms

**Atypical;**

A newer drug found in 1990. Is said to combat positive symptoms as well as negative. As well as acting upon the dopamine system they’re also thought to simulate serotonin receptors.

The drugs bind to the DA receptors in the same way as conventional antipsychotics however instead of permanently block the receptors they temporarily bind to the receptors and rapidly dissociate to allow normal DA transmission.

Drug treatments need to be started quickly in order to be an effective treatment, those who are untreated for years often don’t benefit from treatment.

**AO2-**

- *Davis et al found conventional antipsychotics made a significant difference but only for those living in hostility and criticism in the home environment. In these conditions relapse was 53% for those on medication but 92% for those on placebo. In a supportive home environment there was no significant difference; 12% on medication and 15% on placebo.* (Effective Treatment)

- Anti-Psychotics can be seen as an inappropriate treatment due to the side effects including uncontrollable movements of the lips, tongue, face hands/feet. Around 30% of those taking anti-psychotic medication develop this.

- Atypical drugs can be seen as more appropriate due to the lower likelihood of tardive dyskinesia supported by Jeste et al who found 30% rates in conventional drugs but only 5% in atypical drugs. Arguing a more appropriate treatment due to the lesser side effects.

- The anti-psychotics as a treatment for schizophrenia can be seen as an ineffective treatment as they fail to treat the negative symptoms of schizophrenia e.g. loss of motivation. As they only treat part of the symptoms the treatment can be seen as ineffective as it only treats half of the symptoms that are a result of the disorder.