Schizophrenia

There are two widely used systems in psychiatry for defining and classifying mental disorders:

1) The International Classification System for Diseases (ICD) was developed by the WHO (World Health Organisation)
2) Diagnostic and Statistical Manual of Mental Disorders (DSM) was developed by the APA (American Psychiatric Association)

Each method is very similar except that the DSM specifies that the signs of schizophrenia must be present for 6 months, whereas ICD only requires them to be present for 1 month.

Sufferers must have at least two of the following symptoms:

- Hallucinations (auditory or somatic)
- Delusions (often linked to hallucinations)
- Disorganised Speech
- Catatonic Behaviour
- Social and Occupational dysfunction

There are three types of schizophrenic disorders:

1) Disorganised
2) Catatonic
3) Paranoid

Disorganised schizophrenia

Disorganised, incoherent speech.
Inventing new words, or stringing other together, often accompanied by silliness or laughter.
Can be flat effect or constant shifts of emotion, breaking into inexplicable fits of laughter and crying.
Disorganised behaviour, not goal directed, for example pointing to objects with no reason.
No care for appearance

Canonic Schizophrenia

Switch between catatonic immobility and wild excitement.
Resist instructions, often echo back speech.
Sudden onset, although previous withdrawal from reality.
Limbs often become stiff and swollen.
Obliviousness
When excitement, shouting is common

Paranoid schizophrenia

Prominent delusions/hallucinations.
Grandsons delusions - exaggerated sense of self importance.
Delusional jealousy - insubstantial believes of partners infidelity.
Belief of being persecuted or spied upon.
Agitated, argumentative, angry and sometimes violent.
Language is not disorganised

Evaluating subtypes

Usefulness is often questioned as diagnosing schizophrenia is often very difficult.