

Travail personnel

Theoretical Part: Psychosis

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Year: 2021/2022

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Introduction

For my Travail Personnel this year I have decided to write a story in English in which the main character has a form of psychosis. I wanted the story to show the symptoms of psychosis and show people how far the symptoms can take you. Since I didn't know much about psychosis, I thought it would be a good idea to include a small theoretical part about psychosis so that it would be easy for me to write the story later. I chose this topic because I am very interested in mental illness and psychology in general. I wanted to write something only about schizophrenia, but when I had an interview about this specific illness with specialists, they advised me to focus on psychosis in general and not only on schizophrenia. Which, turns out in time, had been very helpful, because just writing about schizophrenia would have been a bit too challenging.

Psychosis

Overview

Psychosis is a medical term, it can be an over term for disorders that are associated with changes in thoughts, perception, feelings, and behaviour. The people concerned can temporarily not tell the difference between reality and their own imagination. They take a temporary “break from reality,” there are different terms used to describe psychosis. For example, “psychotic symptoms,” “psychotic episode” or “psychotic experience.” People who suffer from psychotic episodes see, hear, experience, or believe things differently from others. They don’t think there is something wrong with them, but they rather think that the people around them are being weird and different. Their perceptions are real to them. But psychosis can also be a one-off experience, not just a condition linked to other disorders. Psychosis has always been considered as a symptom of a mental illness, but that isn’t necessarily the case. You can have psychotic experiences without it coming from a mental illness. There are many theories why one has a psychosis, and it does not always have to be due to a mental disorder.

Common examples of symptoms are the following but remember that these “symptoms” do not apply for every form of psychosis but for most of them.

Hallucinations

Hallucinations cause you to see and/or hear voices, music, people, or beings that exist in your mind only. However, the encounters seem so real to you that you converse with the voices and/or the beings in your hallucination. You may also accept their instruction regarding on how to spend your day.

For example, you may follow their instructions to skip work, leave school or smash your phone to avoid unwanted observation by invisible enemies. Unfortunately, you may also accept their low opinion of your worth, value, or appearance. So, you may feel less worthy of living after those voices telling you that.

Here are some examples of different hallucinations:

- Hearing voices/sounds
- Seeing things which aren’t there in the eyes of other people
- Feeling someone or something touching you when there is nothing
- Smelling things which others can’t

Hearing sounds or someone talking is the most common hallucination. Voices can be different for everyone with any experience of psychosis.

Voices may be:

- They can have any gender
- It may be a familiar voice or someone you’ve never heard before

- In a different language or accent as your mother tongue
- Whispering or shouting
- Negative/disturbing or overly friendly and happy

Some might hear them all the time and talk to them, but some people might only hear them in certain moments. They can come and go or just stay. That means that this type of hallucination can vary. You cannot say that if you perceive a voice in a certain way, you have a certain form of psychosis. It always depends on oneself who or what one hears or sees.

Delusions

These are beliefs that are not based on reality. Even though they feel real to you. Other people are likely to disagree with your beliefs. A delusion is different from holding a religious or spiritual belief which others don't share. Delusions can take any forms and can go beyond just dreaming. You might, for instance, strongly believe that you have exceptional talents and are famous for your incredible abilities. It could be that you act different and do things you think are reasonable, because you have these abilities. You could go as far as purchasing clothing to wear to your award ceremony, because you are so convinced that all of it is real.

But there are also other things you could believe such as:

- That you are being followed by secret agents or the government.
- That people are out to kidnap you or trying to kill you/ or your loved ones. (These people can be people you know, or fictive people whom you've never met before)
- Having a chip planted into some part of your body to control and monitor your actions and thoughts.
- That you have special powers, or that you are on a secret mission or in some cases even that you're God.
- Believing that your food or your drink has been poisoned, so you refuse to eat anything.

Conversely, there are some delusions that could lead you to think that a stranger who casually makes eye contact with you on a crowded street, is secretly in love with you. Delusions are described as exaggerations of everything, you become paranoid easily and overthink everything. You may believe that the whole country is conspiring against you because of one man with a suit walking past your door. Or, as just mentioned, that someone has fallen madly in love with you because they happened to look in your direction.

You may not always find these experiences distressing, although others often do. You may be able to stay in work and function well even if you have these experiences

Cognitive Experiences

What does cognitive experience mean?

The adjective "cognitive" comes from the word "Cognition" and a cognition is all of the mental activities that are involved in learning, remembering, and using any kind of knowledge.

Including mental actions as attention, judging, knowing, learning, perceiving, recognising, remembering, thinking, and understanding using both verbal and non-verbal abilities. It is also the ability to perceive and respond, process, and understand information and to store and retrieve them.

So cognitive experiences/problems are when you struggle with your cognition, so it does not work as it should or not everything works perfectly.

Individuals with psychosis may experience some or all these cognitive problems:

- Lack of paying attention (concentration problems)
- Decreased speed of processing Information (taking in information)
- Memory problems (memory loss, blackouts)
- Decreased reasoning and thinking abstractly
- Reduced learning capacity
- Loss of the ability to understand social information like body language, emotional expressions, or jokes

What mental health conditions are linked to psychosis?

Just to clarify again, psychosis can be something that happens to you as a psychotic experience or as said be linked to other conditions. So, you experience psychotic symptoms while having any of the following conditions. But there is a difference made between "Primary psychotic disorders (functional)" and "Secondary psychosis (acute)."

Primary psychosis also called functional psychosis, is a psychotic state for which no specific neurological or other physical pathology has been demonstrated. Means that you have psychotic episodes without any brain injuries. You don't have a physical disease that affects your mind and/or brain. You have a non-organic, i.e., a functional psychosis. But rather a mental disorder such as schizophrenia, bipolar disorder, schizoaffective disorder, etc...

Secondary psychosis is an acute psychosis, which is when you have psychosis as part of a neurological condition such as dementia, Alzheimer's, or Parkinson's, caused by a brain injury. But drug use is also included here, as one can experience psychotic episodes due to alcohol or drug use. There are also some medications (pills or tablets) where the side effects indicate psychotic behaviour.

Now these are the different conditions linked with psychosis:

Schizophrenia

Psychosis from the schizophrenic spectrum (schizophrenia). People concerned have hugely different manifestations with a focus on cognitive disorders in perception and thinking. Schizophrenia is not based on a split personality, as the literal meaning ("schizo" = I split,

"phrenia" = mind) suggests. You do not have multiple personalities while being diagnosed with schizophrenia.

It is extremely hard to be diagnosed with schizophrenia, you will have to go through several tests, and you must talk to a professional for an amount of time. Professionals in this field want to make sure that it really is the disorder called schizophrenia and not just a series of psychotic experiences. It is rare to be immediately diagnosed with schizophrenia as soon as the suspicion of it arises.

You might receive a diagnosis of schizophrenia if you experience a mixture of what medical professionals call 'positive' symptoms and 'negative' symptoms.

You can have a combination of negative and positive symptoms.

Positive symptoms

Positive symptoms are something you experience in addition' to your normal experience. Such as psychosis. They include the following.

- Hallucinations
- Delusions
- Disorganised thinking. Such as switching from one topic to another with no clear link between the two

Disorganized thinking is derived from disorganized speech. Normal and effective communication can be disturbed, and answers to questions may be partially or completely unrelated. Rarely, speech may include putting together meaningless words that cannot be understood, sometimes known as word salad.

Negative symptoms

Negative symptoms are things which are taken away from your normal experience. They prevent you from continuing your life as you used to.

They include:

- lack of motivation
- slow movement
- change in sleep patterns
- poor grooming or hygiene
- difficulty in planning and setting goals
- not saying much
- changes in body language
- lack of eye contact
- reduced range of emotions
- less interest in socialising or hobbies and activities
- low sex drive

A person may neglect personal hygiene or appear emotionless (exhibiting non-changing facial expressions, speaking monotonously). The person may lose interest in daily activities, withdraw socially, or not be able to experience pleasure.

Bipolar Disorder

Your mood can change drastically with bipolar disorder. It is a mental health problem which mostly affects your mood. You can experience series of mania and depression. In addition to manic symptoms, you may also experience psychosis. Your delusions are usually grandiose, meaning that you believe that you are a particularly important person or that you can achieve something that cannot be achieved. It is not the case that every individual with bipolar disorder will experience psychosis. You may feel fine between episodes of mania and depression. Also, you might experience changes in energy levels or how you act when your mood changes.

Schizoaffective disorder

Schizoaffective disorder is a mental illness that can affect your thoughts, mood, and behaviour. The term schizophrenia-affective disorder refers to a combination of symptoms of schizophrenia, such as hallucinations and delusions, and symptoms of mood disorders, such as depression or mania.

The two types of schizoaffective disorder — both of which include some symptoms of schizophrenia — are:

- Bipolar type: includes episodes of mania and sometimes major depression
- Depressive type: includes only major depressive episodes

In conclusion, schizoaffective disorder is an illness which affects the mood while having schizophrenic symptoms, but there are some symptoms which are not same such as disorganised speech. Most people with schizoaffective disorder, do not have the experiences of disorganised thinking, but only the psychotic symptoms which affect the way they perceive reality.

Drug induced psychosis

People who use or withdraw from alcohol and drugs can experience psychosis.

In rare situations side effects of medication can cause psychosis. Also taking overdoses of medication can cause psychosis.

Depression with psychotic symptoms

If you suffer from severe depression, it can lead to psychotic behaviour. Unlike schizoaffective disorder, you are already diagnosed with depression that is so severe that you may suffer from hallucination or delusion. A severe depression is when your symptoms are severer than someone who has mild or moderate depression.

If you have a diagnosis of depression, you may:

- feel low
- lack motivation
- lack energy
- feel guilty
- lose your appetite
- sleep poorly

Postpartum psychosis

Psychosis following childbirth is known as postpartum psychosis. This is a rare condition. It occurs most often within two weeks after childbirth.

Postpartum psychosis can include:

- experiencing psychosis
- feeling confused and suspicious
- talking too quickly
- thinking too quickly
- displaying signs of depression

A mental health condition such as this should be treated as an emergency. If you don't get treatment quickly, you may become much worse. As long as you receive the right treatment, you can make a full recovery. You may be admitted to a mother and baby unit for support.

Delusional disorder

A delusion is the symptom that is in the foreground. In a delusion, the affected person misinterprets their environment or gives it a false meaning. In delusions, there is a disturbance in the content of thought, whereas in hallucinations, perception is disturbed. This disorder includes delusion only, which is a symptom of psychosis, therefore people affected are unlikely to hear voices or experience any hallucinations.

Organic psychosis

There are some organic causes that can lead to psychosis, e.g., brain damage due to dementia, epilepsy, multiple sclerosis, Parkinson's disease, or a brain tumour. They are called organic psychosis or acute psychosis. Acute (organic) psychosis count to the "Secondary psychosis," Secondary psychosis also include drugs and alcohol consumption.

Brief psychotic episode

You will experience psychosis for a short period of time. The psychosis may or may not be linked to extreme stress. Or when your very tired due to poor sleep, you can experience psychotic symptoms like hallucinations, but that does not mean you have psychosis. The

psychosis will usually develop gradually over a period of 2 weeks or less. You are likely to fully recover within a few months, weeks or even days.

Occurrence and course

Psychotic disorders are relatively common. About 2 % of the population suffer from them once in a lifetime - about 1 % from schizophrenic psychoses and about 1 % in connection with depression and mania. The first onset of the illness usually occurs between the ages of 15 and 35. The course of psychotic disorders varies greatly and depends not only on the diagnosed form of the disorder but also on the person affected, his or her environment and the therapeutic measures.

Psychoses progress in phases. In the acute phase, the symptoms are very pronounced; patients should then be cared for as closely as possible and frequently as inpatients. In the stabilization phase that follows, many patients need rest and time to recover. In the third phase, the remission phase, the symptoms decrease considerably or disappear completely.

Some of those affected only experience a single acute phase, often in connection with a life crisis. Some experience renewed psychotic episodes in stressful situations, but they can lead a relatively normal life between the acute phases. Other patients, however, are permanently impaired and have psychotic symptoms between acute episodes.

Conclusion

I enjoyed writing and learning about psychosis. It helped me a lot to write this theoretical part of my Travail Personnel. I found out a lot because I didn't really know anything about psychosis. I only knew about some mental illnesses that fall under the term psychosis. I found it important and helpful to learn about them, otherwise my story would not have turned out the way it did. Overall, it was important for me to combine my creativity with something that really interests me, and because that includes psychology and mental illnesses, I liked putting together this TraPe very much. Even though I chose it consciously and on my own, it was a challenge to write everything in English. But I think it also helped me a lot in that aspect. I learned a lot of new vocabulary and I`m becoming more and more confident in the language. In conclusion, this work has helped me in so many ways and helped me to develop my language and knowledge.

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