

SHIZOPHRE NIA

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defectologist 2 course

Schizophrenia is a mental illness characterized by abnormal behavior, strange speech, and a decreased ability to understand reality. Other symptoms may include false beliefs, unclear or confused thinking, hearing voices that do not exist, reduced social engagement and emotional expression, and lack of motivation. People with schizophrenia often have additional mental health problems such as anxiety, depression, or substance-use disorders. Symptoms typically come on gradually, begin in young adulthood, and, in many cases, never resolve.



The causes of schizophrenia include environmental and genetic factors

Possible environmental factors include being raised in a city, cannabis use during adolescence, certain infections, the age of a person's parents, and poor nutrition during pregnancy. Genetic factors include a variety of common and rare genetic variants. Diagnosis is based on observed behavior, the person's reported experiences and reports of others familiar with the person. During diagnosis, a person's culture must also be taken into account. As of 2013, there is no objective test. Schizophrenia does not imply a "split personality" or dissociative identity disorder, conditions with which it is often confused in public perception.

Басы

Негізгі
бет

Genetic

Estimates of the heritability of schizophrenia are around 80%, which implies that 80% of the individual differences in risk to schizophrenia is associated with genetics. These estimates vary because of the difficulty in separating genetic and environmental influences and some have labeled these estimates inaccurate. The greatest single risk factor for developing schizophrenia is having a first-degree relative with the disease (risk is 6.5%); more than 40% of monozygotic twins of those with schizophrenia are also affected [59] Results of candidate gene studies of schizophrenia have generally failed to find consistent associations, [63] and the genetic loci identified by genome-wide association studies as associated with schizophrenia explain only a small fraction of the variation in the disease.



Environment

Environmental factors associated with the development of schizophrenia include the living environment, drug use, and prenatal stressors.

Maternal stress has been associated with an increased risk of schizophrenia, possibly in association with **reelin**. Maternal nutritional deficiencies, such as those observed during a famine, as well as maternal obesity have also been identified as possible risk factors for schizophrenia. Both maternal stress and infection have been demonstrated to alter fetal neurodevelopment through pro-inflammatory proteins such as **IL-8** and **TNF**.



Epidemiology

First degree relatives
have 10 time greater
risk
of developing the
disorder.

Up to 50 have
substance abuse and
90 have
smoking.

More prevalent in low
socio Economices.

High frequent
hospitalization.

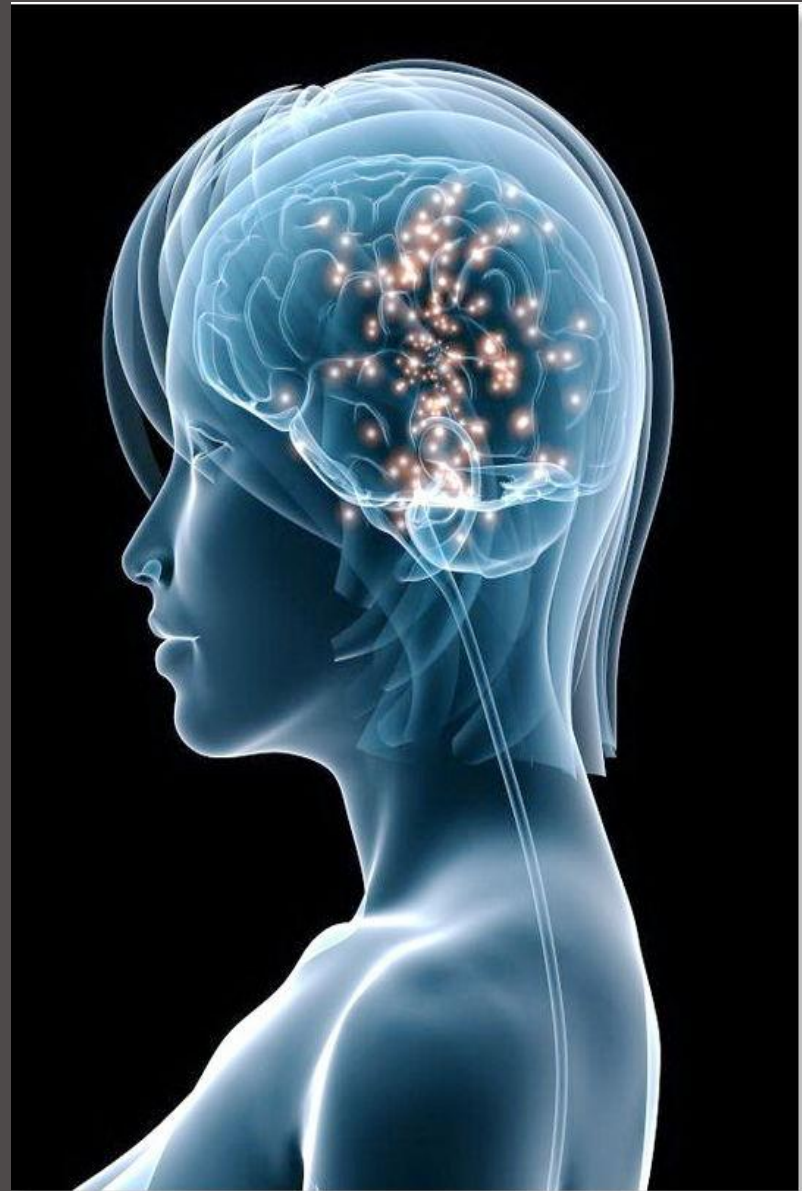
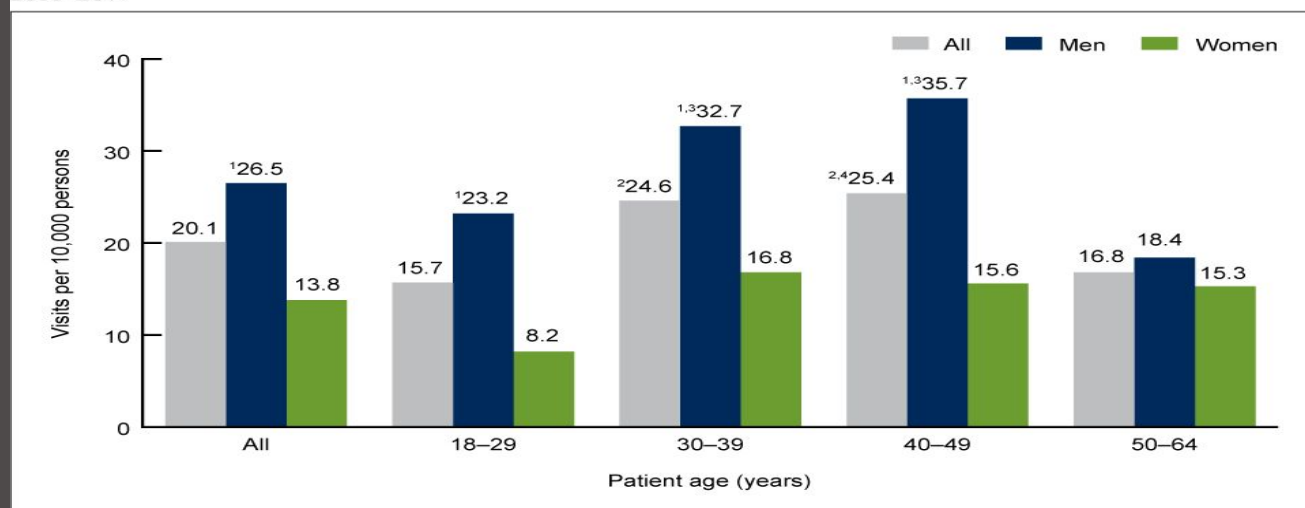
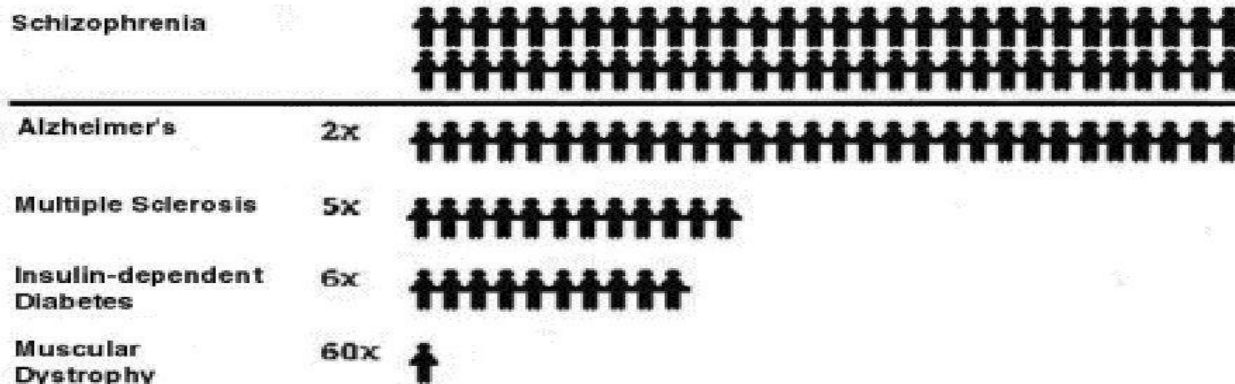


Figure 1. Schizophrenia-related emergency department visit rates for adults aged 18–64, by age and sex: United States, 2009–2011



¹Visit rate is significantly different ($p < 0.05$) for men compared with women of the same age group, based on a two-tailed t test.
²Visit rate is significantly different ($p < 0.05$) compared with all persons aged 18–29, based on a two-tailed t test.
³Visit rate is significantly different ($p < 0.05$) compared with men aged 50–64, based on a two-tailed t test.
⁴Visit rate is significantly different ($p < 0.05$) compared with all persons aged 50–64, based on a two-tailed t test.
 NOTES: Figure is based on 3-year averages. Emergency department visits related to schizophrenia are defined as code 295 of the *International Classification of Diseases, Ninth Revision, Clinical Modification* for any of the up to three collected visit diagnoses. Data are based on a sample of 551 emergency department visits related to schizophrenia made during 2009–2011, representing an average weighted total of 382,000 visits per year. Visit rates are based on the set of estimates of the civilian noninstitutionalized population of the United States, as developed by the U.S. Census Bureau's Population Division.
 SOURCE: CDC/NCHS, National Hospital Ambulatory Medical Care Survey, 2009–2011.

RELATIVE PREVALENCE OF SCHIZOPHRENIA



Adapted from J.A. Lieberman

Нерізгі
бет



**-unresponsive, fixed posture,
refusal to move or talk**



**-stupor associated with marked
rigidity or flexibility**

-overactivity with stereotypy

Cognitive Symptoms:

Difficulties in concentration and
memory

Disorganized thinking

Slow thinking

Difficulty understanding

Poor concentration



VIDEO

