



Information factsheet

What is psychosis?

The word 'psychosis' is used to describe experiences in which there has been some loss of contact with reality. The person has difficulty telling the difference between what is real and what is imaginary. It is quite common, 3 out of every 100 people have an episode of psychosis at some point in their lives.

Psychosis is associated with a number of different conditions which range from drug induced episodes to mental illnesses such as schizophrenia, bipolar affective disorder (often called manic depression) and severe depression. The experience depends on the individual and, to some extent, on the diagnosis with which it is associated.

It is very important to seek help as early as possible when psychosis or a relapse of psychosis is suspected. Therefore, it is important to know what psychosis is and how to recognise it.

In this factsheet we describe some common psychotic experiences, how experiencing psychosis might affect someone and useful ways of understanding psychosis. In an accompanying factsheet we describe how psychosis can be managed.

What are the symptoms?

Psychosis is an umbrella term for several types of experience. In order to describe psychosis it is useful to group together some of the more common experiences. It is important to remember that not everybody will have every experience.

1. Confused thinking

Everyday thoughts become confused and can become faster or slower than normal. A person may have difficulty concentrating, following a conversation or remembering things. This can result in people not being able to understand them. These symptoms are referred to as 'thought disorder'.

2. False beliefs

It is common for a person experiencing psychosis to hold false beliefs known as delusions. Delusions are fixed and firmly held beliefs which others find strange. They are different to beliefs the person would normally have, based on their religious and cultural beliefs. Often, a person is so convinced of their delusion that even the most logical argument cannot persuade them to change their mind.

3. Hallucinations

In psychosis, a person's understanding of the world may also be affected. People may see, hear, feel, smell or taste things that are not actually there. Auditory hallucinations, where a person may hear voices which no one else can hear, or visual hallucinations, where a person sees things which are not there, are the commonest. These experiences may become a part of the person's delusional beliefs.

4. Changed feelings

The way a person feels may change for no apparent reason. They may feel strange and cut off from the world. Mood swings are also common and they may feel unusually excited or depressed. A person's emotions can feel dampened and they may show less emotion to those around them.

5. Changed behaviour

People with psychosis may behave differently from the way they usually do. They may be extremely active or feel 'slowed up'. They may laugh inappropriately or become angry or upset for no apparent reason. Often, changes in behaviour are associated with psychotic experiences. For example, a person believing they are in danger from a neighbour or organisation may call the police or someone who believes they are in some way special may spend the day preaching in the streets. Other examples could include a person who stops eating because they are concerned that the food is poisoned or have trouble sleeping because they are scared.



What is psychosis?

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How are individuals affected?

When a variety of these different symptoms are experienced, people may react in different ways:

- They may become suspicious, depressed, anxious, tense, irritable or angry.
- They may experience mood swings, sleep problems, appetite changes or be less able to concentrate.
- They may become withdrawn or isolated and see their study, work or social life deteriorate.
- It is common for others to perceive that something is 'not quite right'.

Useful ways of understanding psychosis

Many people, if put under unusual amounts of stress could develop symptoms of mental illness. Some people are vulnerable to developing psychosis due to their genetic make up or to difficult experiences early in life. The symptoms can be triggered by emotional distress, trauma or memories of difficulties in childhood, such as being bullied, neglected or the lack of a stable home life.

There is evidence that some people may have unusual experiences (eg hearing voices, having unusual feelings) during times of stress and that the way they react to these and the beliefs they develop about them can contribute to them having a psychotic episode. Their patterns of thinking and beliefs about themselves and the world may also contribute.

Some changes in the chemicals in the brain seem to coincide with the development of psychotic experiences, in particular Dopamine, but also Serotonin and Noradrenaline.

Some studies have found that psychotic experiences run in families. Having a family member who develops psychosis may mean that other family members are at greater risk, however it does not make it automatic. Substance misuse, in particular cannabis and stimulants, can also trigger the development of psychotic experiences in some people.

The first time someone becomes psychotic, the cause may be unclear. It is therefore necessary for the person to have a thorough health examination including a range of investigations to rule out other medical causes, and a number of interviews to get as clear a picture as possible.

It is important to remember that psychosis is treatable and that the earlier the treatment begins, the better it is.

Further information

You may find it helpful to read the accompanying leaflet, *Managing psychosis*. Further information on the treatments available for psychotic illnesses, including information for families and friends is available from Oxleas NHS Foundation Trust.

This factsheet was written by a multidisciplinary team including service users, carers, consultant psychiatrists, nurses and psychological therapists as part of the Information Prescription Project.

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