

Schizophrenia in a Nutshell

What is schizophrenia?

- A chronic, severe, and disabling mental disorder that impacts a person's thoughts, feelings, and behaviors. It is characterized by a distorted perception of reality, which can manifest in a range of positive, negative, and cognitive symptoms. Individuals with schizophrenia may experience hallucinations, delusions, disorganized thinking, and a profound disconnection from reality, which significantly impairs their ability to function in everyday life.
- A patient must experience at least two symptoms, with at least one symptom being a positive symptom, within a period of at least six months.
- Schizophrenia typically begins in late adolescence or early adulthood and often persists for life.



Symptoms of schizophrenia

• Positive Symptoms

These are symptoms that reflect an excess or distortion of normal functioning:

- Hallucinations: Perceptions without external stimuli, most commonly auditory hallucinations.
- Delusions: False beliefs that are resistant to reasoning or contrary evidence
- Disorganized thinking: Incoherent speech or thoughts, making it difficult for the person to communicate effectively.
- Disorganized or abnormal motor behavior: ranging from unpredictable agitation to catatonia

• Negative Symptoms

These reflect a diminution or loss of normal functioning:

- Anhedonia: Loss of interest or pleasure in activities that were once enjoyable.
- Flat Affect: Reduced emotional expression
- Avolition: Decreased motivation to initiate and sustain purposeful activities
- Alogia: A reduced ability to express oneself.

Cognitive Symptoms

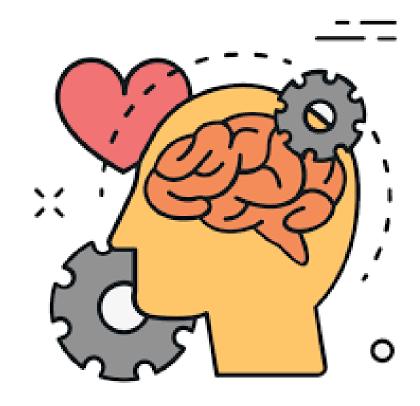
These symptoms primarily affect the mental processes necessary for learning and daily functioning:

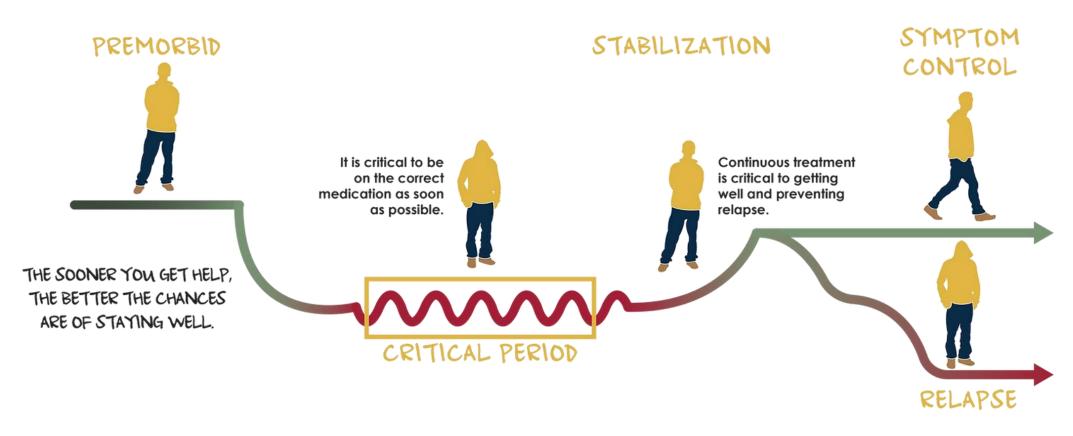
- Impaired Working Memory
- Attention Deficits
- Executive Dysfunction



Goals of Treatment

- Symptom reduction: Alleviating hallucinations, delusions, and cognitive impairment.
- Functional improvement: Enhancing the ability to work, study, and interact socially.
- Prevent relapse: Minimizing hospitalizations and long-term disability.
- Long-term management: Ensuring medication adherence and addressing side effects.





With the right medication, symptoms of schizophrenia can be managed to prevent a negative impact on your life, allowing you to live the way you had before.

FDA-Approved Treatments

- . **Medications**: Antipsychotics (primary treatment)
- Therapies: Psychosocial
 interventions, Cognitive Behavioral
 Therapy (CBT), and family education.
- . Electroconvulsive Therapy (ECT): For treatment-resistant schizophrenia.



Common First-Generation (Typical) Antipsychotics

Haloperidol (Haldol)

- FDA Approval: 1967
- Mechanism of action: Strong D2 receptor antagonism.
- Side Effects: High risk of EPS, sedation, orthostatic hypotension. Long-term use may lead to tardive dyskinesia.

Chlorpromazine (Thorazine)

- FDA Approval: 1954
- Mechanism of action: Dopamine receptor antagonist.
- Side Effects: Sedation, hypotension, weight gain, and anticholinergic effects

Not first choice due to side effect profile



Common Second-Generation Antipsychotics

• Risperidone (Risperdal)

- FDA Approval: 1993
- Mechanism of action: Potent D2 receptor and 5HT2A receptor antagonist.
- Side Effects: Sedation, weight gain, increased prolactin levels, sexual dysfunction.

• Olanzapine (Zyprexa)

- FDA Approval: 1996
- Mechanism of action: D2 and 5HT2A antagonist, with antihistaminergic effects.
- Side Effects: Significant weight gain, metabolic syndrome (elevated glucose, dyslipidemia), sedation.

• Clozapine (Clozaril)

- FDA Approval: 1989
- Mechanism of action: Antagonism of D1, D2, 5HT2A, and other receptors.
- Side Effects: Agranulocytosis (requiring regular blood monitoring), sedation, weight gain, metabolic side effects. Clozapine is highly effective for reducing suicidal behavior in schizophrenia patients.

• Aripiprazole (Abilify)

- FDA Approval: 2002
- Mechanism of action: Partial agonist at D2 and 5HT1A receptors, antagonist at 5HT2A receptors.
- Side Effects: Insomnia, restlessness (akathisia), anxiety, minimal weight gain compared to other SGAs.

• Quetiapine (Seroquel)

- FDA Approval: 1997
- Mechanism of action: D2 and 5HT2A antagonism, sedative properties.
- Side Effects: Sedation, weight gain, metabolic issues, orthostatic hypotension.

Recent Developments in Antipsychotic Treatments

Brexpiprazole (Rexulti)

- FDA Approval: 2015
- Mechanism of action: Partial agonist at D2 and 5HT1A receptors, antagonist at 5HT2A receptors.
- Side Effects: Weight gain, sedation, increased prolactin levels.

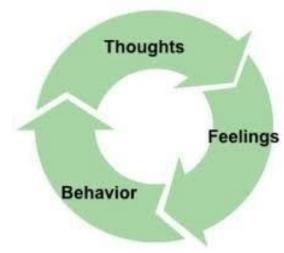
• Cariprazine (Vraylar)

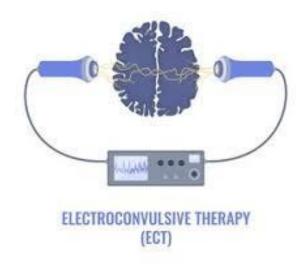
- FDA Approval: 2015
- Mechanism of action: Partial agonist at D2 and D3 receptors, antagonist at 5HT2A receptors.
- Side Effects: Akathisia, insomnia, weight gain, sedation.

- Long-Acting Injectables (LAIs)
 - Examples: Paliperidone palmitate (Invega Sustenna), Aripiprazole lauroxil (Aristada).
 - Advantages: Improved adherence
 - Side Effects: Common side effects are similar to oral antipsychotics, but LAIs can cause injection site reactions.

Non-Pharmacologic Treatment Options

- Cognitive Behavioral Therapy (CBT)
 - Helps manage psychotic symptoms and reduce relapse rates by targeting delusions, hallucinations, and disorganized thinking.
 - Evidence: CBT has been shown to reduce the intensity of symptoms and improve quality of life.
- Family Intervention and Psychoeducation
 - Key for improving medication adherence and supporting families in coping with the challenges of schizophrenia.
 - Evidence: Family psychoeducation has been shown to reduce relapse rates and improve overall patient outcomes.
- Electroconvulsive Therapy (ECT)
 - Considered for treatment-resistant schizophrenia, particularly in patients who are severely symptomatic or have co-occurring mood disorders.
 - Evidence: ECT can be highly effective for patients who fail to respond to pharmacotherapy.





Future Directions in Schizophrenia Treatment

. Personalized Medicine

- Ongoing research aims to better match treatments with individual genetic profiles, enhancing efficacy and minimizing side effects.

New Drug Classes

- Investigational treatments include glutamate modulators and novel dopamine-serotonin agents that may offer new mechanisms



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