

RESOURCES

FOR

I THINK I MIGHT HAVE DID
MINI-COURSE

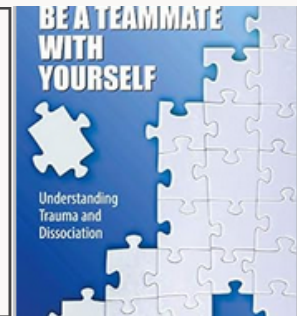


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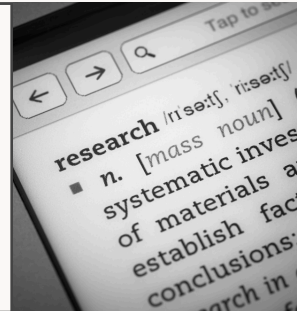
SOURCES CITED

Be a Teammate with Yourself: Understanding Trauma and Dissociation

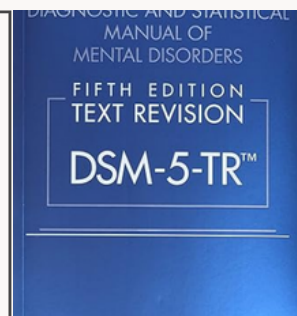
By Colin Ross, M.D., and Hong Wang Fung



Madden, N. E. (2004). Psychologists' Skepticism and Knowledge about Dissociative Identity Disorders in Adolescents.



Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)
American Psychiatric Association



<https://screening.mhanational.org/screening-tools/psychosis/>

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Understanding Psychosis

What is psychosis?

Psychosis refers to a collection of symptoms that affect the mind, where there has been some loss of contact with reality. During an episode of psychosis, a person's thoughts and perceptions are disrupted and they may have difficulty recognizing what is real and what is not.

Who develops psychosis?

It is difficult to know the number of people who experience psychosis. Studies estimate that between 15 and 100 people out of 100,000 develop psychosis each year.

Psychosis often begins in young adulthood when a person is in their late teens to mid-20s. However, people can experience a psychotic episode at younger and older ages and as a part of many disorders and illnesses. For instance, older adults with neurological disorders may be at higher risk for psychosis.

What are the signs and symptoms of psychosis?

People with psychosis typically experience delusions (false beliefs, for example, that people on television are sending them special messages or that others are trying to hurt them) and hallucinations (seeing or hearing things that others do not, such as hearing voices telling them to do something or criticizing them). Other symptoms can include incoherent or nonsense speech and behavior that is inappropriate for the situation.

However, a person will often show changes in their behavior before psychosis develops. Behavioral warning signs for psychosis include:

- Suspiciousness, paranoid ideas, or uneasiness with others
- Trouble thinking clearly and logically

- Withdrawing socially and spending a lot more time alone
- Unusual or overly intense ideas, strange feelings, or a lack of feelings
- Decline in self-care or personal hygiene
- Disruption of sleep, including difficulty falling asleep and reduced sleep time
- Difficulty telling reality from fantasy
- Confused speech or trouble communicating
- Sudden drop in grades or job performance

Alongside these symptoms, a person with psychosis may also experience more general changes in behavior that include:

- Emotional disruption
- Anxiety
- Lack of motivation
- Difficulty functioning overall

In some cases, a person experiencing a psychotic episode may behave in confusing and unpredictable ways and may harm themselves or become threatening or violent toward others. The risk of violence and suicide decreases with treatment for psychosis, so it is important to seek help. If you find that you are experiencing these changes in behavior or notice them in a friend or family member and they begin to intensify or do not go away, reach out to a health care provider.

The National Institute of Mental Health (NIMH) has information on ways to get help and find a health care provider or access treatment at www.nimh.nih.gov/findhelp.

If you or someone you know is struggling or having thoughts of suicide, call or text the 988 Suicide & Crisis Lifeline at **988** or chat at 988lifeline.org. In life-threatening situations, call **911**.

What causes psychosis?

There is no one cause of psychosis. Psychosis appears to result from a complex combination of genetic risk, differences in brain development, and exposure to stressors or trauma. Psychosis may be a symptom of a mental illness, such as schizophrenia, bipolar disorder, or severe depression. However, a person can experience psychosis and never be diagnosed with schizophrenia or any other disorder.

For older adults, psychosis symptoms can be part of a physical or mental illness that emerges later in life. Psychosis can also be a symptom of some diseases of older age, including Parkinson's disease, Alzheimer's disease, and related dementias.

Other possible causes of psychosis include sleep deprivation, certain prescription medications, and the misuse of alcohol or drugs. A mental illness, such as schizophrenia, is typically diagnosed by excluding these other causes.

A qualified mental health professional (such as a psychologist, psychiatrist, or social worker) can provide a thorough assessment and accurate diagnosis. Find tips to help prepare for and get the most out of your visit at www.nimh.nih.gov/talkingtips. For additional resources, including questions to ask your health care provider, visit the Agency for Healthcare Research and Quality at www.ahrq.gov/questions.



How is psychosis treated?

Studies have shown that it is common for a person to have psychotic symptoms for more than a year before receiving treatment. Reducing this duration of untreated psychosis is critical because early treatment often means better recovery. A qualified psychologist, psychiatrist, or social worker can make a diagnosis and help develop a treatment plan.

Treatment of psychosis usually includes antipsychotic medication. There are several different types of antipsychotic medications, and they have different side effects, so it is important to work with a health care provider to determine the medication that is most effective with the fewest side effects.

Treatment also often includes other elements. There is substantial research support for coordinated specialty care, which is a multi-element, recovery-oriented team approach to treating psychosis that promotes easy access to care and shared decision-making among specialists, the person experiencing psychosis, and family members. People experience better outcomes from coordinated specialty care if they begin treatment as soon as possible after psychotic symptoms emerge.

Coordinated specialty care is now the standard of care for early psychosis, according to "The American Psychiatric Association Practice Guideline for the Treatment of Patients With Schizophrenia."

NIMH research on coordinated specialty care

The Recovery After an Initial Schizophrenia Episode (RAISE) research project, supported by NIMH, established coordinated specialty care as an effective treatment for early psychosis and identified important elements for helping people lead productive, independent lives. Learn more about the RAISE studies at www.nimh.nih.gov/raise.

NIMH continues to prioritize research on and expansion of treatments for early psychosis with the launch of the Early Psychosis Intervention Network (EPINET) in 2019. Through EPINET, NIMH funded awards to establish a national data coordinating center and regional scientific hubs connected to more than 100 coordinated specialty care programs that provide early psychosis treatment in 17 states. The EPINET website provides resources for researchers, health care providers, administrators, and people experiencing psychosis and their families. The website is found at <https://nationalepinet.org>.

Coordinated specialty care consists of multiple components:

- **Individual or group psychotherapy** is tailored to a person's recovery goals. Cognitive and behavioral therapies focus on developing the knowledge and skills necessary to build resilience and cope with aspects of psychosis while maintaining and achieving personal goals.
- **Family support and education programs** teach family members about psychosis as well as coping, communication, and problem-solving skills. Family members who are informed and involved are more prepared to help loved ones through the recovery process.
- **Medication management** (also called pharmacotherapy) means tailoring medication to a person's specific needs by selecting the appropriate type and dose of medication to help reduce psychosis symptoms. Like all medications, antipsychotic medications have risks and benefits. People should talk with a health care provider about side effects,



medication costs, and dosage preferences (daily pill or monthly injection).

- **Supported employment and education services** focus on return to work or school, using the support of a coach to help people achieve their goals.
- **Case management** provides opportunities for people with psychosis to work with a case manager to address practical problems and improve access to needed support services.

Learn more about the components of coordinated specialty care at www.nimh.nih.gov/raise.

People with psychosis should be involved in their treatment planning and consulted in making decisions about their care. Their needs and goals should drive the treatment programs, which will help them stay engaged throughout the recovery process.

It is important to find a mental health professional who is trained in psychosis treatment and who makes the person feel comfortable. With early diagnosis and appropriate treatment, it is possible to recover from psychosis. Some people who receive early treatment never have another psychotic episode. For other people, recovery means the ability to lead a fulfilling and productive life, even if psychotic symptoms sometimes return.

Clinical trials studying psychosis and related disorders

NIMH supports a wide range of research, including clinical trials that look at new ways to prevent, detect, or treat diseases and conditions, such as psychosis. The goal of a clinical trial is to determine if a new test or treatment works and is safe. Although people may benefit from being part of a clinical trial, they should know that the primary purpose of a clinical trial is to gain new scientific knowledge so that others can be better helped in the future.

Researchers at NIMH and around the country conduct clinical trials with people experiencing psychosis and healthy volunteers. Talk to a health care provider about clinical trials, their benefits and risks, and whether one is right for you. For more information and to find a clinical trial, visit www.nimh.nih.gov/clinicaltrials.



How can I find help?

NIMH does not endorse specific psychosis clinics or evaluate individual practitioners' professional qualifications or competencies. However, several organizations are available to assist in finding a treatment program in your area. The following is not a comprehensive list of all programs, and a program's inclusion on the list does not constitute an endorsement by NIMH.

- **Early Assessment and Support Alliance (EASA):** EASA offers a National Early Psychosis Directory that lists early psychosis programs across the United States. The directory is available at www.easacommunity.org/national-directory.php. For more information about EASA, visit www.easacommunity.org.
- **Early Psychosis Intervention Network (EPINET):** EPINET's Early Psychosis Intervention Network Clinics provide treatment and services to individuals with early psychosis across 17 states. The list of states with early psychosis clinics is found at <https://nationalepinet.org/epinet-clinics>. For more information about EPINET, visit <https://nationalepinet.org>.
- **National Alliance on Mental Illness (NAMI):** The NAMI HelpLine can connect you with the NAMI office in your state and help you find programs close to home.

Find ways to get help at www.nami.org/help.

Also, you can talk with someone at the NAMI HelpLine, Monday–Friday, 10:00 a.m.–10:00 p.m. ET, by:

- Calling 1-800-950-NAMI (6264)
- Texting “HelpLine” to 62640
- Emailing helpline@nami.org

For more information about NAMI, visit www.nami.org.

- **Psychosis-Risk and Early Psychosis Program Network (PEPPNET):** PEPPNET supports an Early Psychosis Program Directory that provides services to people at risk for or experiencing early psychosis. The directory is available at <https://med.stanford.edu/peppnet/interactivedirectory.html>.

For more information about PEPPNET, visit <https://med.stanford.edu/peppnet>.

- **Substance Abuse and Mental Health Services Administration (SAMHSA):** SAMHSA has an Early Serious Mental Illness Treatment Locator for finding mental health treatment facilities and programs. Find a facility in your state at www.samhsa.gov/esmi-treatment-locator.

For more information about SAMHSA, visit www.samhsa.gov.

For more information

MedlinePlus (National Library of Medicine)

<https://medlineplus.gov>
(en español: <https://medlineplus.gov/spanish>)

ClinicalTrials.gov

www.clinicaltrials.gov
(en español: <https://salud.nih.gov/investigacion-clinica>)

National Institute of Mental Health

Office of Science Policy, Planning, and Communications
Phone: 1-866-615-6464
Email: nimhinfo@nih.gov
www.nimh.nih.gov

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