FACT SHEET: First Episode Psychosis

Facts About Psychosis

☐ The word *psychosis* is used to describe conditions that affect the mind when there has been some loss of contact with reality.

☐ Psychosis often begins when a person is in his or her late teens to mid-twenties.

☐ Psychosis can be a symptom of a mental illness or a physical condition.

☐ Psychosis can be caused by some medications, alcohol or drug abuse.

☐ Three out of 100 people will experience psychosis at some time in their lives.

☐ About 100,000 adolescents and young adults in the US experience first episode psychosis each year.

☐ Psychosis can include hallucinations (seeing, hearing, smelling, tasting or feeling something that is not real).

☐ Psychosis can include paranoia or delusions (believing in something that is not real even when presented with facts).

☐ Psychosis can include disordered thoughts and speech.

☐ Psychosis affects people from all walks of life.

**MYTH:** A person with psychotic symptoms is dangerous.

**FACT:** People experiencing psychosis may behave strangely, they may hear voices, or see things that don’t exist. They may be frightened and confused or withdrawn. However, it is more likely that these people will harm themselves than someone else. It is important to help a person with psychotic symptoms get treatment as quickly as possible.

**Treatment**

☐ Psychosis can be treated and early treatment increases the chance of a successful recovery.

☐ 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 important because early treatment often means a better recovery.

☐ Research supports a variety of treatments for first episode psychosis, especially coordinated specialty care (CSC). CSC involves the following components:

  - *Individual or group psychotherapy* is typically based on cognitive behavior therapy (CBT) principles. CBT helps people solve their current problems. The CBT therapist helps the patient learn how to identify distorted or unhelpful thinking patterns, recognize and change inaccurate beliefs, relate to others in more positive ways, and change problematic behaviors.
Family support and education teaches family members about psychosis, coping, communication, and problem-solving skills. Family members who are informed and involved are more prepared to help loved ones through the recovery process.

Medications (also called pharmacotherapy) help reduce psychosis symptoms. Like all medications, antipsychotic drugs have risks and benefits. Clients should talk with their health care providers about side effects, medication costs, and dosage preferences (daily pill or monthly injection).

Supported Employment/Education (SEE) services help clients return to work or school and achieve their personal goals. Emphasis is on rapid placement in a work or school setting combined with coaching and support to ensure success.

Case Management helps clients with problem solving. The case manager may offer solutions to address practical problems, and coordinate social services across multiple areas of need.

It is important for individuals with psychosis to be involved in their treatment planning. Their needs and goals should drive their individual 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 client feel comfortable.

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