

Schizophrenia; an essay by Shelby Simmons

By : loversgonewrong444

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Schizophrenia

By: Shelby S

Schizophrenia is a complex mental disorder that makes it difficult to tell the difference between real and unreal experiences, think logically, have normal emotional responses, behave normally in social situations. Mental health experts are not sure what causes it. However, genetic factors appear to play a role.

Schizophrenia was originally discovered by Emil Kraepelin in the late nineteenth century and was named dementia praecox because it was discovered as a form of dementia that occurred in mostly young people.

Eugen Bleuler later renamed it schizophrenia, "fragmented mind", when discovering that its symptoms were long lasting but could be cured naturally over time, unlike the manic depressive illness and dementia that up until that point they were comparing it to.

Certain environmental events may trigger schizophrenia in people who are genetically at risk for it. You are more likely to develop schizophrenia if you have a family member with the disease. Schizophrenia affects

both men and women equally. It usually begins in the teen years or young adulthood, but may begin later in life. It tends to begin later in women, and is more mild. Childhood-onset schizophrenia begins after age 5.

Childhood schizophrenia is rare and can be difficult to tell apart from other developmental disorders of childhood, such as autism. Symptoms usually develop slowly over months or years. Sometimes you may have many

symptoms, and at other times you may only have a few.

People with any type of schizophrenia may have difficulty keeping friends and working. They may also have problems with anxiety, depression, and suicidal thoughts or behaviors.

At first, you may have the following symptoms, Irritable or tense feeling, difficulty sleeping, difficulty concentrating. As the illness continues, problems with thinking, emotions and behavior develop. Other symptoms include,

lack of emotion, strongly held beliefs that are not based in reality Hearing or seeing things that are not there Problems paying attention, thoughts "jump" between unrelated topics symptoms can vary, depending on the type of schizophrenia they have.

There are no medical tests to diagnose schizophrenia. A psychiatrist should examine the patient to make the diagnosis. The diagnosis is made based on a thorough interview of the person and family members.

The doctor will ask questions about:

How long the symptoms have lasted, how the person's ability to function has changed, developmental background, genetic and family history, and how well past medications have worked

Brain scans (MRI) and blood tests may help to rule out other disorders that have similar symptoms to schizophrenia.

The views in the early part of the twentieth century. The distinction between schizophrenia (dementia praecox) and bipolar disorder, proposed by Kraepelin in 1896, was the subject of

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vigorous debate in the first decades of this century. The debate addressed fundamental questions about the principles underlying the nosology of psychiatric disorders, and the issues raised remain as relevant today as at the

time they were formulated. A meta-analysis of a sample of Kraepelin's primary data suggests that his original classification was consistent with the empirical evidence. However, heeding his critics,

Kraepelin modified considerably his earlier views and proposed a conceptual model of the pathogenesis of schizophrenia and affective psychosis that is consonant with present-day ideas arising out of neuroscience and genetics. The lesson to be drawn is that nosological arguments should be put on hold until basic understanding is gained of the specific mechanisms of syndromogenesis across diagnostic boundaries.

The view of schizophrenia in today's society. Schizophrenia, from a psychological perspective, is approached through the lenses of social and psychological factors such as parental/family influences, cultural/social environment, and results of psychological tests. There are many psychological hypotheses that professionals have come up with that may link to the development of schizophrenia; anything from environmental stress, to genetic make-up, to brain activity. Some include Schizophrenic mothers, parents' marital relationship, disordered family communication, social environment.

Giving someone a label of a mental disorder creates difficulty for that person's self-esteem. Some other difficulties may include, obtaining insurance, employment, biases of others, etc. It is up to the professional to examine the patient and diagnose what is best for the patient and their family. Another large difficulty, in treatments, is cost. Most middle to low income countries put less than one percent of health expenditure toward mental health and many countries, such as Asia and Africa, have about one psychiatrist per million people. That is why many in other cultures rely on spiritual healers rather than medical professionals. Society's views

on mental illness or people with any sort of handicap have been similar to minorities or a less privileged group. Through the centuries or even in the past few years the mentally ill have been stigmatized. For example,

many cultures believed that mental illness was the workings of the devil or that it is an illness that can be caught like a common cold, person to person. A modern stigma that is seen today are the feelings of resentment from

family members targeted toward the Schizophrenic family member, this could result in mistreating or fear toward all mentally ill. Another example of society's views toward mentally ill is in television and media. Our society

as a whole has a great hunger for real-life horror stories and the term crazy is attributed to many who appear as different or out of the normal. The question is who is it that decides who is normal, this meaning human. Do

normal brain functions and correct behavior create a normal human being?

How you would be treated if you had this illness, is with medications. Antipsychotic medications are the most effective treatment for schizophrenia. They change the balance of chemicals in the brain and can help

control symptoms. These medications are usually helpful, but they can cause side effects. Many of these side effects can be improved, and should not prevent people from seeking treatment for this serious condition. You

could also possibly go to a few therapy sessions and if they seemed to help you, you would keep going.

The way I view this disorder is just like how I view the bipolar mental disorder. With time and treatment, (for

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what I've researched for this essay) I believe someone with schizophrenia you CAN live a normal

lifestyle, with a few drawbacks of course with possibly their friends, (losing) and their insurance. But, even though this disorder doesn't affect me personally, and closely, it does affect me in the real world after highschool. I

will most likely have to deal with someone with a mental disorder. Especially going into the job branch that I am wanting to do after highschool. A lot of people need to remember that when they point fingers, and whisper.

there's always three more pointing back at themselves. And remeber that even with a disorder, it doesn't make anyone less of a human being.

Thank You.

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