

Psychosis

This factsheet explains what psychosis is and its possible causes and treatments. You will find it useful if you are affected by psychosis or if you have a friend or family member who is affected.



KEY POINTS

- Psychosis is a medical term used to describe hearing or seeing things that do not exist, or believing things that other people do not.
- Common examples include hearing voices or believing that people are trying to do you harm.
- You can experience psychosis for a wide variety of reasons. For example it can be due to having a mental illness such as schizophrenia or bipolar disorder. It may be caused by drug use, brain injury or extreme stress.
- There is no one single cause of psychosis but researchers believe that genes, biological factors and environment may play a part.
- In the NHS, you should be offered medication and talking therapy to help with your symptoms.
- To access treatment for psychosis, you usually need to have an assessment by specialist mental health services, such as the Community Mental Health Team (CMHT).
- If you are experiencing very severe psychotic symptoms, you may need more urgent help such as going into hospital.
- There are different perspectives on how we should deal with psychosis. This includes listening to the voices or trying to understand the meaning of the unusual beliefs.

This factsheet covers:

1. [What is psychosis?](#)
2. [What conditions are linked with psychosis?](#)
3. [What causes psychosis?](#)
4. [How is psychosis treated?](#)
5. [What if I am not happy with my treatment?](#)
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1. What is psychosis?

Psychosis is a medical term. It describes symptoms people have when they experience, believe or view things around them differently to other people. Some people don't find it helpful to think about psychosis a mental illness.¹

If you have psychosis, you might see or hear things that others may not, or believe things other people do not. Some people describe it as a "break from reality". You may also hear terms such as "psychotic symptoms", "psychotic episode" or "psychotic experience" describing the same thing.

In mental health care, these experiences are viewed as symptoms of mental illness.² A report from the British Psychological Society has said that the use of experiences is more neutral than the term symptoms.³ We will use experience in order to ensure this factsheet relates to everyone who reads it. As this report points out it can be difficult to discuss medical terms in a psychological way. Because of this there may be some overlap between medical and neutral terminology throughout this factsheet.

If someone has psychosis they may not be aware of this and believe their experiences are real. About 1 in every 100 people will experience a psychotic episode in their lifetime.⁴

Typical examples of psychosis include the following.

Hallucinations

These are when you see, hear or feel things which are not actually there.⁵ For example:

- hearing voices,
- seeing things which other people do not see,
- feeling someone touching you who is not there, or
- smelling things which other people cannot.

Delusions

These are beliefs that are not true and may seem irrational to others.⁶ For example you may believe:

- that you are being followed by secret agents or members of the public,
- that people are out to get you or trying to kill you. This can be strangers or family members,
- that something has been planted in your brain to monitor your thoughts, or
- you have special powers, are on a special mission or in some cases that you are a God.

You may not always find these experience distressing, although people do. You can stay in work and function at a high level in your life even if you have these experiences.

Cognitive Experiences

Cognitive experiences are ones that relate to mental action; such as learning, remembering and functioning.

Some cognitive experiences are associated with psychosis are:

- being unable to sustain attention,
- memory problems
- Unable to take on information
- Poor decision making

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2. What conditions are linked with psychosis?

Psychosis is a set of experiences which can be referred to as a condition. You might have this experience if you have one of the following conditions.

Schizophrenia

You are likely to get a diagnosis of schizophrenia if you experience a mixture of what medical professionals call 'positive' symptoms and 'negative' symptoms. In this section we use the term symptom instead of experience as these are medical terms you may come across if you are having medical treatment.

Positive symptoms are called this because they are something you experience in addition' to your normal experience. They include:

- hallucinations,
- delusions, or
- disorganised thinking, this is when you switch from one topic to another with no clear link between the two.

Negative symptoms are called this because they take something away from your normal experience. They include:

- no motivation to do anything,
- not saying much,
- not making eye contact, or

- not interacting much with other people.

You can have a combination of negative and positive symptoms. This means schizophrenia can affect your day-to-day life until you get treatment. Although some people recover completely from schizophrenia, it is likely to be a long term condition. You can manage it with the right treatment and support.⁷

Bipolar Disorder

This is a mood disorder where you switch from experiencing extreme highs, such as elevated mood and increased activity, to extreme lows. These highs and lows are called mania and depression. If you experience manic symptoms you may also experience psychosis. For example, you may believe you have special powers or are on a special mission.⁸ Not everyone with bipolar disorder will experience psychosis.

Schizoaffective disorder

People with a diagnosis of schizoaffective disorder may experience bipolar disorder and schizophrenia. Because some of the experiences of bipolar disorder and schizophrenia overlap, psychiatrists can find it difficult to make a diagnosis of schizoaffective disorder.⁹

Drug induced psychosis

People who use or withdraw from alcohol and drugs can experience psychosis. These experiences may last a long time and lead to doctors diagnosing you with a psychotic illness.¹⁰

Psychotic depression

If you have a diagnosis of depression you can feel low, lack motivation and energy, feel guilty and lose your appetite or sleep poorly. If you have a diagnosis of clinical depression, you may get psychotic experiences. These are usually negative and self blaming. You may believe that you are responsible for something when you are not.¹¹

Postpartum (puerperal) psychosis

If you have psychotic experiences after giving birth, this is known as postpartum psychosis. This can happen straight away or up to three months after birth.

Women with experiencing postpartum psychosis may feel very confused, and experience brief hallucinations.¹²

Organic psychosis

Head injury, or a physical illness that affects how your brain works, can cause experience of psychosis. People often have memory problems or feel confused as well as having psychotic experiences.¹³

Delusional disorder

Psychiatrists might diagnose you with a delusional disorder if you have a single firmly held belief that is not true, but might not seem particularly out of the ordinary either. For example, you may feel convinced that your

partner is deceiving you even if they are not. You don't have hallucinations or negative symptoms with this disorder.¹⁴

Reaction psychosis or Brief psychotic episode

You might have experiences of psychosis after a major stressful event in your life, such as a death in the family, or change of living circumstances. Experiences can be severe, but most people who have reaction psychosis make a quick recovery, which can take up to a month.¹⁵

Go to www.rethink.org for specific information about.

- Schizophrenia
- Bipolar disorder
- Schizoaffective disorder
- Depression
- Personality disorders
- Hearing voices

Or call 0121 5227007 and ask for the information to be sent to you.

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3. What causes psychosis?

There is no single cause of experiencing psychosis . Researchers believe genetic, biological and environmental factors all play a part.¹⁶

Genetic causes

If you have a relative with psychosis, you are more likely to experience the condition. On average, around 1 in 100 people will experience psychosis. But 15 in 100 people with a parent who has psychosis will experience psychosis. People who have two biological parents with a psychotic illness are even more likely to experience psychosis.¹⁷

You can find more information about '**Does mental illness run in families?**' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

Scientists have found genes that play a role in experiencing psychosis, but no single gene is responsible.¹⁸

Brain Chemicals

Dopamine is a neurotransmitter. This is a chemical that passes information from one brain cell to another. Too much dopamine can lead to hallucinations, delusions and disorganised thinking. Scientists do not know exactly what causes the increase in dopamine in the first place. It could be due to the other factors, for example, genetics or environment.¹⁹

Childhood experiences

There is some evidence that abuse or trauma in childhood can lead to experiencing psychosis at some point in your life. Research has compared people who experience psychosis with people who do not. There was a

higher than average rate of abuse in childhood in the people who experience psychosis compared to people who do not. However, many people with psychosis have not experienced abuse in childhood. Not everyone who has experienced abuse develops psychosis.²⁰

Birth complications

People who had complications at birth have an increased risk of developing psychotic illnesses.²¹ These complications can include, such as being born prematurely or who didn't get enough oxygen. However, many babies who are born prematurely and have other complications at birth do not develop psychosis. People who had normal births can develop psychosis.

Drugs

Using street drugs increases the risk of experiencing psychosis. However, this may depend on if you have a certain type of gene that makes you more vulnerable to these effects.

Researchers think that a particular ingredient in cannabis (known as THC) can trigger psychosis. New types of cannabis, like skunk, have a lot more THC.²²

Using drugs such as amphetamines, crystal meth or cocaine, can increase your chance of developing psychosis.²³

Stress

When you are stressed, your brain releases a chemical called cortisol. This can increase the risk of psychosis.²⁴ Some people are more likely to develop psychotic symptoms in stressful situations than others.

Inner city living, social migration, social exclusion

You may have a greater risk of experiencing psychosis if you are born and brought up in a city than the countryside. This might be because people in cities are more likely to be isolated or use drugs.

Black people living in England have a higher risk of experiencing psychosis than white people. But black people living in Jamaica, Trinidad and Barbados are no more likely to develop psychosis than white people in England. Black people in England may be more likely to be on a low income socially excluded or isolated.²⁵

Who is at risk of experiencing psychosis?

Anyone can experience a psychotic illness. However some groups are more likely to experience psychosis than others. As mentioned above, black people are more likely to be affected than white people.²⁶

You are more likely to have a first episode of psychosis when you are younger. Men and women are affected equally, however.

The average age for first experiencing psychosis is younger in men, often in their teens and early 20s. Women who develop psychosis are more likely to do so in their early 20s.²⁷

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4. How is psychosis treated?

What treatment should I be offered?

The National Institute for Health and Care Excellence (NICE) has guidance on how the NHS should treat different health conditions. The NHS does not have to follow this guidance, but it has to take it into account. There are guidelines on:

- young people with psychosis and schizophrenia,
- adults with schizophrenia, psychosis or schizoaffective disorder
- young people and adults with bipolar disorder,
- adults with depression.

You can find all of the NICE guidelines at www.nice.org.uk.

Early intervention teams

If you have your first episode of psychosis, you should be referred to an 'early intervention team' for initial treatment. NICE guidance states this should be the case no matter what age you are.²⁸ These specialist teams provide treatment and support. They are made up of psychiatrists, psychologists, mental health nurses, social workers and support workers. Early intervention services are run differently in different parts of the country. If there is not a service in your area, then you should have access to a crisis or home treatment team.

You can find more information about '**Early intervention teams – services for early psychosis**' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

Medication

Some people find that they do not start to recover until they get the right medication. Medications such as Olanzapine, Risperidone and Clozapine can be important factors in recovery.

You can find more information about '**Antipsychotics**' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

Medication called 'antipsychotics' can help treat symptoms of psychosis. Your doctor should give you information about antipsychotics including side effects. You and your doctor should choose the medication together.²⁹

Doctors will review your medication at least once a year.³⁰

It is important to get your medication right. Not all medications will suit you. Some will not improve your symptoms and may cause side effects. If you

are on a medication that is not working, you should discuss this with the professional in charge of your care.

You can find more information about '**Medication – choice and managing problems**' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

Cognitive Behavioural Therapy (CBT)

You should also have access to 'talking treatments' such as cognitive behavioural therapy (CBT). CBT can help you understand your experiences and any upsetting and worrying thoughts and beliefs. You can discuss new ways of thinking about them and dealing with them. CBT doesn't get rid of the symptoms, but may help you cope better and make you feel less distressed.

Further information can be found in our '**Talking therapies**' factsheet.

If you have bipolar disorder and experience psychosis, your treatment may be different. Your doctor may prescribe you a different medication to stabilise your mood rather offer you an antipsychotic.³¹ Although antipsychotics may be prescribed to stabilise your mood.

You can find more information about '**Bipolar disorder**' and '**Mood stabilisers**' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

As well as specific treatment, you may also get support from mental health services through the Care Programme Approach (CPA). This usually involves having a care co-ordinator who will develop a care plan with you.

You can find more information about our '**Care Programme Approach**' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

Physical health

People who experience mental illness, such as schizophrenia, are at more risk of health issues.³² They can include being overweight, having coronary heart disease and diabetes. This may be due to your genes, lifestyle choices, such as smoking and diet, or side effects from medication.

Because of the health risks NICE made some recommendations.³³

- When you start taking antipsychotic medication, you should have a full physical health check, including weight, blood pressure and other blood tests. Doctors should repeat these checks regularly.
- Health professionals should offer you a combined healthy eating and physical activity programme.
- A healthcare professional should give you help to stop smoking.

Your symptoms of treatment may affect some physical health problems.

5. What if I am not happy with my treatment?

If you are not happy with the treatment you then you can:

- talk to your doctor about your treatment and ask for a second opinion if you feel it would help,
- get an advocate to help you speak your doctor,
- contact Patient Advice and Liaison Service (PALS) and see whether they can help, or
- make a complaint.

There is more information about these options below:

Second opinion

You should talk to your doctor about your treatment first and see if you can resolve the situation with them. You can mention the NICE guidelines if you feel they are not offering you the right treatment.

If your doctor does not think of any other treatment options you could ask for a second opinion. You are not legally entitled to a second opinion but your doctor might agree to it if it would help with treatment options.

Advocacy

An advocate is someone who is separate from the mental health service but understands the system and your rights. They can come to a meeting with you and your doctor and make sure you get what you are entitled to. Advocates help you make sure you are being heard. You can search online to see if there are any local advocacy services in your area or the Rethink Mental Illness Advice Service could search for you.

'PALS'

The Patient Advice and Liaison Service (PALS) at your NHS trust can try and help you with any problems or issues you have with an NHS service. You can find your local PALS' details at [http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-\(PALS\)/LocationSearch/363](http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-(PALS)/LocationSearch/363).

You can find out more about:

- Second opinions
- Advocacy
- Complaints

at www.rethink.org. Or contact 0121 522 7007 and ask for a copy to be sent to you.

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6. Different views on psychosis

Some people and cultures have different ideas about what causes mental illness. Depression and anxiety may be thought of as being caused by physical pain or discomfort. There can also be defences between the way you may view your own mental illness. You may feel that your psychotic symptoms are caused by ghosts or evil spirits for example. You may find it difficult to tell your doctor about this

Some encourage people with psychosis to embrace their symptoms and understand their meanings. The psychologist Rufus May believes that delusions can be symptoms of deeper psychological distress which people should work through.³⁴ For example, if someone feels their being is being controlled by outside forces, this might stem from feelings of lack of control in their life.

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7. Information for carers, friends and relatives

If you think someone is experiencing psychotic symptoms you may want them to see a doctor. This can be difficult if they do not believe they are ill, this is called 'lacking insight'.

Sometimes a person's psychotic symptoms are serious and may cause them harm. If you think someone is in a crisis you can:

- call their GP and tell them,
- call an ambulance or 999,
- use your nearest relative powers to ask for a Mental Health Act assessment, or
- bring them to A&E.

As a carer, friend or family member of someone living with psychosis, you might find that you also need support. It is important to get support you want or need. You could check if there are any local support groups for carers, friends and relatives in your area.

If you feel you need more support to care for your loved one you could ask your local authority for a carer's assessment. You can do this assessment with the person you care for or on your own.

If the person you care for is supported by a mental health team you should be involved with decisions about care planning. This can only happen if the person you care for agrees. There are laws about confidentiality that services have to follow. They cannot give you information unless the person you care for agrees. The team can ask for permission from them and ask what they are happy for you or others to know. This would include any care plans. You can get the person you care for to sign a consent form to give to the mental health team. This will mean they can share information with you.

You can find more information about:

- Getting help in a crisis

- Are you worried about someone's mental health?
- Dealing with unusual thoughts and behaviours
- Supporting someone with a mental illness
- Carers' assessment and supporting planning
- Confidentiality and information sharing – for carers, friends and relatives'

www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

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FURTHER
READING

Back to Life, Back to Normality: Cognitive Therapy, Recovery and Psychosis by Douglas Turkington et al. (Cambridge University Press, 2009)

This is a self-help guide for people who have psychotic symptoms and their carers. It helps readers use Cognitive Therapy techniques to control their symptoms and delay or prevent becoming unwell again.

The First Episode of Psychosis: A guide for patients and their families by M. Compton & B. Broussard (OUP USA, 2010)

This is a book covering a range of illnesses as well as issues such as stigma and a glossary of medical terms.

Rufus May

He is a psychologist who has alternative perspectives on the cause and management of psychosis. His website contains articles, useful resources and further reading.

Website: www.rufusmay.com

USEFUL
CONTACTS

The Royal College of Psychiatrists

This is an organization with a website that has information about a variety of mental illnesses that are associated with psychotic symptoms.

Telephone: 020 7235 2351

Address: 21 Prescot Street, London, E1 8BB

Email: reception@rcpsych.ac.uk

Website: <http://www.rcpsych.ac.uk/>

Voice Collective

This is an organization with a website that has information about voices, visions, coping, recovery, getting help in a crisis and peer support groups for young people aged 12 to 18. It also contains useful information for carers.

Telephone: 020 7911 0822

Address: Mind in Camden, Barnes House, 9-15 Camden Road, London, NW1 9LQ

Email: info@voicecollective.co.uk

Website: www.voicecollective.co.uk



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This factsheet is available
in large print.



Rethink Mental Illness Advice Service

Phone 0300 5000 927

Monday to Friday, 9:30am to 4pm
(excluding bank holidays)

Email advice@rethink.org

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Drop us a line at: feedback@rethink.org

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PO Box 17106
Birmingham B9 9LL

or call us on 0300 5000 927.

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Need more help?

Go to www.rethink.org for information on symptoms, treatments, money and benefits and your rights.

Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

Need to talk to an adviser?

If you need practical advice, call us on 0300 5000 927 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

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