Schizoaffective Disorder

Schizoaffective disorder is a chronic mental health condition characterized primarily by symptoms of schizophrenia, such as hallucinations or delusions, and symptoms of a mood disorder, such as mania and depression. Many people with schizoaffective disorder are often incorrectly diagnosed at first with bipolar disorder or schizophrenia because it shares symptoms of multiple mental health conditions.

Schizoaffective disorder is seen in about 0.3% of the population. Men and women experience schizoaffective disorder at the same rate, but men often develop the illness at an earlier age.

**Symptoms**
Just like with any mental illness, people with schizoaffective disorder experience symptoms differently. Depending on the type of mood disorder diagnosed, people will experience different symptoms:

- Hallucinations
- Delusions
- Disorganized thinking
- Depressed mood
- Manic behavior

**Causes**
The exact cause of schizoaffective disorder is unknown. A combination of causes may contribute to its development.

- **Genetics.** Schizoaffective disorder tends to run in families.
- **Brain chemistry and structure.** Brain function and structure may be different in ways that science is only beginning to understand. Brain scans are helping to advance research in this area.
- **Stress.** Stressful events such as a death in the family, end of a marriage or loss of a job can trigger symptoms or an onset of the illness.
- **Drug use.** Psychoactive drugs such as LSD have been linked to the development of schizoaffective disorder.

**Diagnosis**
Schizoaffective disorder can be difficult to diagnose because it has symptoms of both schizophrenia and depression or bipolar disorder. To be diagnosed with schizoaffective disorder a person must have the following symptoms:

- For bipolar type, hallucinations or delusions must be present for at least 2 weeks without an episode of depression or mania.
- A major depressive episode. Even a significant lack of interest or pleasure is not enough.
• Episodes of depression or mania are present for the majority of the time of the illness.
• Social impairment that inhibits functioning on a regular basis.
• Symptoms that cannot be explained by drug use or another medical condition.

**Treatment**
People with schizoaffective disorder are often treated with a combination of medications and psychotherapy. How well treatment works depends on the type of schizoaffective disorder, its severity and its duration.

**Medications.** The only medication approved by the FDA specifically to treat schizoaffective disorder is the antipsychotic drug paliperidone (Invega). However, some medications approved for the treatment of other mental health conditions may be helpful for schizoaffective disorder. These medications include:

• **Antipsychotics.** A health care provider will prescribe antipsychotics to relieve symptoms of psychosis, such as delusions and hallucinations.
• **Antidepressants.** When schizoaffective disorder is depressive-type antidepressants can alleviate feelings of sadness, despair and trouble concentrating.
• **Mood stabilizers.** When bipolar disorder is the underlying mood disorder, mood stabilizers can help stabilize the highs and lows.

**Psychotherapy.** Family involvement, psychosocial strategies, self-care peer support, psychotherapy and integrated care for co-occurring substance abuse can all be part of an individual support plan.

• **Cognitive behavioral therapy (CBT)** helps change the negative thinking and behavior associated with feelings of depression. The goal of this therapy is to recognize negative thoughts and to teach coping strategies. With conditions like schizoaffective disorder that have symptoms of psychosis, additional cognitive therapy is added to basic CBT (CBTp). CBTp helps people develop coping strategies for persistent symptoms that do not respond to medicine.
• **Electroconvulsive Treatment (ECT).** For cases where medication and psychotherapy do not work for a person with schizoaffective disorder, ECT may be worth considering. ECT involves transmitting short electrical impulses into the brain. Although ECT is a highly effective treatment for severe depression, it is not the first choice in treating schizoaffective disorder.

See more at: [http://www.nami.org/Learn-More/Mental-Health-Conditions/Schizoaffective-Disorder](http://www.nami.org/Learn-More/Mental-Health-Conditions/Schizoaffective-Disorder)

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