The symptoms of schizophrenia are not “one size fits all”. In fact, schizophrenia affects everyone differently. But knowing what symptoms to look for can help you recognize them sooner… and get help faster. Remember, symptoms generally come in clusters.

Schizophrenia can cause symptoms classified as both “positive” and “negative”.

Knowing whether your loved one experiences positive or negative symptoms (or both) is important, since certain treatments are better at addressing certain types of symptoms.

Positive symptoms are those that add behaviours or feelings to the person’s life, such as:

- Hallucinations (seeing/hearing/feeling things that are not experienced by others)
- Delusions (believing strongly in things that are not true)
- Extreme obsessions (about law enforcers, sex, or religion for example)
- Laughter at odd times, bizarre facial expressions or strange mannerisms
- Talking to oneself
- Feelings of paranoia, anxiety or confusion (often due to hallucinations or delusions)

Negative symptoms are those that subtract (or take something away) from his or her life, such as:

- A lack of energy, motivation, or interest in life
- Showing little or no emotion
- Withdrawal from others
- Depression*
- Difficulties with attention, concentration, memory, planning and organization, which can impair one’s working life or academic studies

*Note: Depression may be evident either as a part of the illness or the emotional impact on the person’s psychological makeup.
SEE THE SIGNS—BOTH EARLY ON OR AS A RESULT OF A RELAPSE

Diagnosing schizophrenia can take a long time, in part because early warning signs are often (unintentionally) ignored. This could be because the symptoms come and go, or because they can be difficult to differentiate from regular teenage apprehension, fear and anxiety (if your loved one happens to be in that age group). Knowing what to watch for can help you get your loved one on the road to recovery sooner.

Early warning signs of schizophrenia include:
- A range of negative symptoms (see list on the previous page)
- Unusual outbursts or antisocial behaviour
- Talking to oneself or laughing out of the blue
- Difficulties sleeping or feeling over-tired
- Feeling paranoid or suspicious
- Sudden obsessions with sex, law enforcement, religion (beyond the cultural norm)

Once schizophrenia is diagnosed, the hope is that symptoms will be controlled for good (and in many individuals, this is the case). But a relapse—a return or worsening of symptoms—can still happen. A relapse is not to be seen as a failure but an opportunity for the person to learn signs of an impending relapse, and to discover what helps them to pass through a relapse. A crisis situation or “psychotic episode” is also possible (when the person with schizophrenia can’t tell the difference between what is real and what is not). Recognizing early signs of a relapse may help you take action before a crisis occurs.

Signs of a relapse or possible crisis situation include:
- Visual hallucinations or hearing voices
- Paranoid thinking (fear of harm to oneself or a loved one)
- Agitation and/or hostile behaviour
- Threatening or attempting suicide

Encourage your loved one to stay a step ahead of relapses by avoiding actions that trigger them, such as: not taking their medication, using street drugs or alcohol, poor sleeping habits or unnecessary stress.

HOW TO “HELP” IF A CRISIS OCCURS

Hear them out:
- Avoid arguing with your loved one during a psychotic episode—reassure them as much as possible, and go along with what they want as long as no one is in danger.
- Use non-threatening phrases like “I don’t know”, “What do you think?” and “Help me understand”.
- Utilize active listening and mirroring emotions.

Vade confrontation:
- Avoid eye contact as well as facing them head-on.
- Distance yourself physically, as they may want more space than usual.
- Stay calm and speak softly but firmly.

Leave if you need to:
- Wherever you are, make sure both of you have a clear way out—no one should feel cornered.
- Seek outside help if they threaten harm to themselves or someone else.

Prepare—just in case:
- Look into the laws in your province on involuntary hospitalization.
- Put together an Advanced Emergency Plan, which should include a list of emergency contacts with phone numbers, along with information about your loved one’s medications, any allergies, insurance coverage and their health card number. This written plan can be used to get your loved one the medical help they need as quickly as possible in the event of a psychotic episode.

For more information on living with psychosis and how to help a loved one with schizophrenia, visit www.earlypsychosisintervention.ca.