**Psychotic Disorder**

# Abstract

Psychotic disorders are the conditions that are usually associated with psychosis, or perceptions and thoughts. Psychotic disorders are severe mental problems, which cause false perceptions and abnormal thinking to the victims. The affected persons are unable to make proper judgments, behave appropriately, communicate effectively, understand reality, think clearly, and respond emotionally to things happening around them. Types of psychotic disorders include schizoaffective disorder, Schizophrenia disorder, Schizophreniform disorder, delusional disorder, and brief psychotic disorder. Even though the causes of psychotic disorders are not known, environmental and genetic factors are associated with it. The symptoms of psychotic disorders are observed from the alteration of someone’s perceptions and thoughts, and they include hallucinations, distorted speech, delusion, and depression. Usually, the diagnosis of the psychosis revolves around understanding history and conducting the neurological and physical examination. Antipsychotic medications are among the useful treatments of psychotic disorders. Addition to it is cognitive behavioral therapy. Avoidance of substance substances may help to prevent psychosis.

**Introduction**

Psychosis are conditions that cause some loss of normal contact with reality, and it usually affects the mind. In such a situation, the individual’s perceptions and thoughts are disturbed and configuring the right things from wrong ones becomes confusing to them (Fraser et al., 2007). Concerning this, psychotic disorders are described as severe mental problems, which cause false perceptions and abnormal thinking to the victims. The experience of a range of extreme symptoms of psychotic disorders such as delusions and hallucinations make people with this condition to lose contact with reality. These terms make it hard for the affected persons to make proper judgments, behave appropriately, communicate effectively, understand reality, think clearly, and respond emotionally to things happening around them. Despite the fact that psychotic disorders severely affect mental stability of an individual, they can still be treated. Moreover, the effects of psychotic disorder in both men and female are the same, and the conditions are most commonly found in people in their late teens. Types of psychotic disorders include schizoaffective disorder, Schizophrenia disorder, Schizophreniform disorder, and brief psychotic disorder. Therefore, the paper will focus on the discussion of psychotic disorder.

A psychotic patient may not necessarily have the outward characteristics of being ill as would be witnessed in another form of ill-health conditions. Psychosis in some cases may cause bizarre behaviors indicating that the condition is more apparent. The behaviors of psychotic patients vary widely as the illness becomes more severe (Zarate et al., 2000). The psychotic illness has characteristics that affect individual’s lack of emotion, personality, and movement. It may be difficult to predict the behaviors of people with the psychotic disorder. Psychosis is the primary symptom of psychotic disorders. However, many disorders including non- psychiatric medical illness have psychosis symptoms. Examples of such conditions include brain tumors, severe injury to the head, and epilepsy may develop psychosis. Drugs of abuse such as PCP, cocaine, or amphetamines are a common cause of psychosis.

# Types of Psychotic Disorders

## 2.1 Schizoaffective Disorder

The absence of mood symptoms gives a good experience of the existence of schizoaffective disorder although in most cases, a person has this type of psychosis, symptoms of mood disturbance and schizophrenia accompany them. The experience can help either alternate over time or be done at the same time. The person suffering from this psychotic disorder must have had in the absence of mood symptoms hallucinations or delusions. The two types of subtypes of schizoaffective disorder include a depressive type that is more common in older people and bipolar type usually found in young adults. Medical conditions cannot result in the disturbance.

## 2.2 Schizophrenia Disorder

It is a mental illness characterized by the presence of psychotic symptoms. The condition makes an individual’s body not to function correctly on a day-to-day basis until they receive psychotropic medication and healthy skills of daily living. The most common psychotic disorder that affects the majority of people is schizophrenia. Patients with this type of condition usually experience hallucinations, changes in behavior, and delusions that last for a period of more than one six months (Rössler et al., 2005). Anyone showing a decline in social function at workplace or school is in most cases diagnosed with this type of disorder. It is also found that men are mostly stricken by psychosis associated with schizophrenia than their female counterparts. However, the condition can happen to anyone, and it is possible to recover after undergoing proper diagnosis. Schizophrenia is a mental problem that affects the way people think, act, and feels. At this point, these patients find it difficult to distinguish between the imaginary things and what is real.

## 2.3 Schizophreniform Disorder

The disorder is characterized by mood disturbance, which may resemble bipolar disorder. In this case, there are drastic shifts in the ability and mood to configure real things from illusions. The presence of these psychosis symptoms hinders one’s ability to go about their daily activities. The condition requires thorough assessment from the mental health professional to determine if an individual suffers from this illness because the situation is complex in nature. Disorganized speech, catatonic behaviors, hallucinations, and delusions are the main symptoms of the schizophreniform disorder. Individuals are only diagnosed with the psychosis when they have shown two or more of these symptoms for not less than one month. The mood disorder and schizoaffective disorder that has psychotic features must be ruled out, and a medical condition should have caused them.

## 2.4 Brief Psychotic Disorder

The brief psychotic disorder has symptoms that last for at least one day and not longer than a month. The symptoms of this disorder appear suddenly in response to highly stressful events such as being a victim of rape crime. The symptoms of this psychosis may be severe but are usually short-lived. During that period, such individuals may not be aware of their bizarre behavior. Most patients who suffer from brief psychotic disorder may exhibit disorganized speech, hallucinations, and delusions. Significant emotional turmoil can be experienced by such individuals making them greatly confused. When not monitored, such individuals may risk committing suicide. It is only possible to diagnose an individual with the brief psychotic disorder after ruling out schizoaffective disorder, mood disorder, and schizophrenia. The psychosis in most cases follows a period of considerable disappears and stress as quickly as it comes. For a psychosis to be considered a brief psychotic disorder, it must come and go within one month. Healthcare professionals conduct a mental health interview to determine any history and the presence of symptoms to evaluate if a person suffers from the brief psychotic disorder.

## 2.5 Delusional Disorder

It is a condition of mental health that involves holding strong and false beliefs pertinent to a given experience. The delusions are usually things that could be happening in one’s life, but in a real sense, they do not exist. Any person diagnosed with this condition can be determined if such individuals are battling with a true to fixed beliefs that prove to be false in the serious rational discussion. Most psychotic individuals have strong feelings in being irrational with no basis of reality. The diagnosis of psychosis is made when the assessment has indicated that substances or medical conditions have not caused the delusion. The subtypes of delusion disorder are as follows.

**2.5.1 Somatic type** – the people with this condition believe that they have deformities and physical defects or a medical condition.

**2.5.2 Jealous type** - such a person has a firm belief that other people are having an affair, and this remains to them as the only truth.

**2.5.3 Erotomanic type** – such individuals have a belief that someone of higher social status is in love them, and that remains to be reliable truth.

## 2.6 Shared Psychotic Disorder

It is the type of illness where delusional beliefs are transferred to another person. In this case, the complication usually involves a married couple or two-family members. The first person to develop delusion is termed as more dominant whereas the other one who adopts the delusions tend to be more suggestible. The delusion is often similar to the one that the already diagnosed person is possessing. Other psychotic disorders must be ruled out if a person has to be diagnosed with this kind of illness. No medical condition or substances must cause delusion.

## 2.7 Drug-Induced Psychosis

The use too much alcohol and illegal drugs such as cocaine, methamphetamine, marijuana, and amphetamines may in specific incidences cause psychotic symptoms to appear on an individual. Additionally, hallucinogenic drugs like LSD usually cause users to see things which in a real sense do not exist, but the effects they pose are temporary. Similarly, the symptoms of psychosis can result from the prescription of some drugs such as the stimulants and steroids. In this case, the symptoms of psychosis are resolved once the effects of these drugs or alcohol wear off. Consequently, the sudden withdrawal from taking addictive substances such as consumption of certain drugs and alcohol can also make an individual to experience psychotic symptoms. The symptoms can be rectified through medical treatment. However, sometimes the psychosis caused by the initial substance-induced psychosis persists when the person consistently uses stimulant drugs such as methamphetamine.

# 3.0 Causes of Psychotic Disorders

The actual causes of psychosis are not well known, but different results have indicated that bipolar and schizophrenia disorder may share a common genetic problem. Besides, certain chemicals have been found in people who have psychosis, and these have made the researcher term it as alteration of brain structure. Brain scans have also indicated that people with a history of psychosis have reduced gray matter. Current research studies have suggested that brain chemicals such as serotonin and dopamine have contributed to the development of psychosis.  Besides, the combination of biological factors including genetic factors has created situations in which the person becomes a greater risk of developing psychotic symptoms. These become the potential risk factors that can increase a person’s chances of developing a psychotic disorder.

## 3.1 Genetic Factors

The researchers have also indicated that there is an active genetic link between the onset of psychotic symptoms and people’s genetic history. Some individuals are born genetically predisposed toward illness, and they develop psychotic disorders due to specific environmental stressors such as a family history of the dipolar disorder. Such condition will increase chances of developing the psychotic disorder as well. Suppose one of the identical twins has developed psychotic disorder such as schizophrenia, the co-twin has 50 percent chances of developing the same illness since they both have equal genes.

## 3.2 Environmental Factors

Several environmental factors have been implicated in psychotic disorders. Some of these factors may be complications during birth and infection during pregnancy. These are events that occur early in the life of an individual. The environmental risk factors that result in psychotic conditions is the time in which an individual is born and the exposure to certain toxins, viruses, and stress. In addition, people who have been brought up in an urban environment may also experience the same condition.

## 3.3 Psychological Risks

These include troubling the standard body functions because of the history of mood problems such as major depression, bipolar disorder, and anxiety disorder.  These psychological causes often influence the type of psychotic episode experienced by someone. For example, someone with depression is prone to developing persecutory delusions.

Some researchers also have believed that postpartum psychosis soon after birth where behavioral changes occur because of fluctuations in hormonal levels and disrupted sleep patterns. A thorough medical assessment has to be conducted by the physician to rule out any form of physical illness that may cause psychosis. Medical health profession is the one to be ones who can administer proper medical test assessment for any kind of symptoms that may appear to indicate existence of psychosis.

## 4.0 Symptoms of Psychotic Disorders

The psychosis is a standard feature of psychotic disorders, and its development can be gradual or sudden, and this can be portrayed in the early warning signs. These may include depression, social withdrawal, or feeling suspicious. During this period, the changes can occur in energy level, appetite, and patterns of sleep alongside memory and thinking capacity. Consequently, symptoms of psychosis vary from individual to individual based on the type of psychotic disorder exhibited, and this may change over time. The common symptoms of psychosis are shown below.

## 4.1 Change in Behavior

It has been found that people experiencing a psychotic disorder may behave differently from their usual nature. Usually, the symptoms mentioned above are associated with the changes in behavior. In this case, such individuals may exercise unusually laughter at inappropriate times without any apparent reason. Over time such people may seem less interested in friends and their works. Eating and sleeping patterns of these people may also be affected by the existence of this illness in their bodies. Depression is another form of behavior change that can be seen from a portion of people experiencing a psychotic behavior. An attempt by people with suicidal thoughts to hurt themselves is a sign of depression, and is common with psychotic patients. Depression is a natural response to chronic mental health issues. However, in some instance, it can stand alone as a disorder.

## 4.2 False Beliefs

Delusions are false beliefs that in most cases develop among people experiencing psychotic episodes. Such persons may stick to a belief which is not shared with others as true, and they cannot change their thoughts even in the most logical argument. For instance, one can believe that outside forces are controlling their thoughts.

## 4.3 Changes in Mood and Feeling

People are experiencing a psychotic disorder often have mood swings. At some points, they may feel anxious, depressed or unusually excited. Such individuals may also show less emotion to other people around them.

## 4.4 Changes in Perception

The victims of psychosis may see, feel, taste, smell, or hear something which is not real. For instance, such people can be deep into a conversation with people who are not visible to the immediate people around them. Other people cannot hear the voices they hear, or even things they see are not there. Such changes in perception are what are termed as hallucinations.

# 5.0 Diagnosis of Psychotic Disorders

It is essential for the physicians to correctly determine the apparent symptoms of psychosis developed by an individual are an underlying medical substance or medical use disorder. The diagnosis of psychosis is made through a psychiatric evaluation where a doctor takes the responsibility of watching the behavior of a person and then asks them the kind of experience that they are going through in that condition. In the determination of whether the underlying illness causes the symptoms, the physicians are asked to use both X-ray and medical tests. If the behavioral changes to have resulted from drug or medical exposure, then the patient is considered to be with the psychosis condition, and all the assessment goes along that line. In this case, the psychotic disorder may be due to withdrawal or toxin exposure (Stahlberg et al., 2004). If both the toxin exposure and a medical cause have not been found while conducting the assessment, then the psychotic illness such as schizophrenia may be taken into consideration.

It is recommended that diagnosis to be conducted by a licensed mental-health professional who can carefully evaluate the diagnostic criteria to identify the condition from a variety of mental illnesses that show some form of resemblance. In case, the psychotic patient has failed sufficiently during the examination process, and then it is recommended that the doctor conduct serial examination and use their overall impression. The older the patient rarely develops the psychotic disorders. However, the infections of their urinary tract have been found to be causing mental status change.  The physician will examine someone who is suspected of having a psychosis in the emergency department or an office. The other health professionals who may also administer the same treatment to the psychotic patients include psychiatric nurses and nurse practitioners, licensed social workers, and mental health physician assistants. Licensed mental health professionals are the best in performing diagnosis of psychosis since they can sort through the diagnostic criteria for a variety of mental illness whose symptoms may look alike carefully during the initial stages (Stahlberg et al., 2004). The medical doctor sometimes takes the patient's history, and then a physical examination is performed that include laboratory and other tests such as computerized tomography (CT) scan of the brain.

The findings may associate with drugs or substances that a person may have been taking or psychosis. Signs of clumsiness or mild confusion may exist among people with a psychotic disorder. After a person has been diagnosed with psychotic disorder, then the doctor would rely on the family members or friends for detailed information and history of this particular patient. These may include previous level of social functioning, past medical and psychiatric problems, recent life stressors, history of mental illness in the family, person’s previous psychiatrists and other physicians, and drugs and allergies on medications and food. The duration taken by symptoms to appear can also be a way of distinguishing psychotic illness from schizophrenia in the diagnosis. Through diagnosis, it is easy to know the specific kind of psychotic symptoms that occur with delusion disorders or the manifestation of schizoaffective disorder happen with the type of nonpsychotic symptoms. Psychotic features are understood to be severe psychosis symptoms results from a significant bipolar disorder or depressive disorder.

# 5.1 Psychosis Diagnosis in Teenagers and Children

Most of the symptoms of psychosis found in young people are not the same as those experienced in adults. For example, it is normal among small children to have imaginary friends with whom they play and talk with while they feel lonely, and this does mean that they are experiencing psychotic disorder (Grossman et al., 2008). Such plays are standard for both the children and teens. However, if the behaviors of these children appear to you as psychosis, then one can go ahead and describe the behavior to the doctor who will conduct an examination to ascertain if indeed there is that complication.

# 6.0 Effects of Psychotic Disorders

When not treated, the symptoms of psychotic disorders can be severe, and this makes a person vulnerable to experience adverse effects. Below are some of the adversities that might be encountered by an individual if they fail to receive proper care regarding psychotic disorder (Grossman et al., 2008). Such individuals find it challenging to form a relationship with others, social isolation, severe behavioral and emotional disturbance, dependency on substance abuse or chemicals, difficulties with languages, attempts to commit suicide, and development of other forms of mental illness. In addition, such people cannot acquire or maintain gainful employment. Different types of disorders that a person can be diagnosed with alongside a psychotic disorder include anxiety disorder that involves pain disorder, obsessive-compulsive disorder, and tobacco use disorder.

# 7.0 Treatment of Psychotic Disorders

The treatment of psychotic disorder depends on the cause of the psychosis. The treatment is administered if the diagnosis has become evident during the evaluation. The treatment of psychosis may involve a combination of medications and therapy (Freudenreich, & Goff, 2011). Proper treatment makes most psychotic patients experience improvement in their symptoms. Moreover, home remedies are not deemed appropriate for its cure given then severity and often the chronic nature of the psychotic disorders. The most effective medications are antipsychotic, which is mostly used in treating acute psychosis and reducing any risk future psychotic episodes. Both the acute phase and maintenance phase. The acute phase is considered when there is a necessity of administering higher doses in treating the psychotic symptoms. On the other hand, the maintenance phase could be a lifelong treatment. The medication dosage is usually reduced gradually to the minimum to prevent further episodes. However, a temporary increase in dosage is necessary for situations when the symptom reappears on a lower dosage. Doing this would help prevent a relapse. Some psychotic patients still experience relapses despite the existence of continued treatment of the recurring psychotic disorders. The discontinuity of medication is the primary cause of high relapse rates for the psychosis.

Antipsychotic agents are a treatment that has enabled the majority of patients to experience substantial improvement from a more chronic psychotic disorder. The treatment of antipsychotic agents was first used in the 1950s where it has improved the lives of many psychotic patients. The effectiveness of antipsychotics has been achieved in the reduction of psychosis symptoms in conditions such as schizophrenia. The purpose of antipsychotic medications is mainly to allow the patient to function better by reducing the symptoms of the psychotic disorders, but not to cure this type of illness. It is only a well trained and experienced physician in the treatment of a severe mental illness which has the mandate of choosing the dosage medication based on the patient’s condition. Currently, newer medications have been developed to assist the psychotic patients to get treatment from these conditions, and these have fewer side effects. The best medications for psychosis in the presence of mood disorders remain to be antipsychotics. The second-generation antipsychotics are what majority of doctors are now using in the treatment of psychosis. Despite the fact that its use is spreading in the United States, World Health Organization (WHO) does not recommend its use except for the clozapine, which they state that can only be used under individual supervision. Clozapine is prescribed in situations where other antipsychotic medicines have failed to respond.

Chlorpromazine (Thorazine) was the first antipsychotic medication, and it was used for schizophrenia after its accidental discovery. It was soon followed by other medications such as fluphenazine (Prolixin), perphenazine (Trilafon), haloperidol (Haldol), thiothixene (Navane), thioridazine (Mellaril), and trifluoperazine (Stelazine). These medications are quite useful in treating positive symptoms, but they can cause side effects, in which many of them affect the neurologic system (Grossman et al., 2008). The effect of most medications takes two to four weeks to be felt by the patients. Compliance with medications has been found to be the primary challenge that faces most people with the psychotic disorder. Following this, the medication that may of great benefit to some psychotic patients is those that are only taken on the monthly or bi-weekly basis.

# 7.1 Potential Complications of Medications used to treat Psychotic Disorders

Majority of the symptoms from individuals with the psychotic disorder are related to movements. The prescribed medication may pose some side effects that result in the motor symptoms. The side effects may include dry mouth, lethargy, tremors on the hands and feet, constipation, and arduousness on one side of the jaw or neck. The most severe side effects of medications used to treat schizophrenia and other psychotic disorders are tardive dyskinesia though it is not common. The condition is mostly found in elderly persons where it is involved in twisting of the limbs or body trunk, jerking, and facial twitching or both of them. Tardive dyskinesia is not so familiar with the newer generation of medications, which are used in the treatment of schizophrenia.

Neuroleptic malignant syndrome (NMS) is a life-threatening complication though rare, and it emanates from the use of tranquilizing an antipsychotic, the renowned neuroleptic medications. The condition is characterized by extreme salivation, muscle rigidity, fever, and sweatiness. NMS should be treated as an emergency once it is suspected in the body system of the patient. Depending on the medication, sleepiness and significant weight gain are some of the other potential complications that result from antipsychotic medications. The physicians often advise their patients with psychotic disorder and have gained weight to observe proper nutrition and do some exercise. A balance on the potential benefit of both mother and the fetus of treating the illness and the potential risks of the medication to the developing fetus is necessary, and this only for pregnant women.

# 7.2 Cognitive Behavioral Therapy

The cognitive behavioral therapy (CBT) is beneficial to people with the psychotic disorder. Its primary purpose is to assist psychotic patients to recognize when they are experiencing delusions and hallucinations and then help such individuals learn that this is part of their illness. During this period, the psychotic patients need to get support and encouragement from their friends and family members. The approach has shown to effectively manage psychotic symptoms and help them in making permanent changes in their behaviors and how they think. Cognitive behavioral therapy is often helpful to control psychotic symptoms that cannot be resolved entirely with medications (Fraser et al., 2007).

# 7.3 Pathogenesis

Since there is the likelihood of reoccurrence to psychosis, there is a need for long-term treatment. However, the outcome varies from individual to individual, but it becomes worse when the disorder develops in a person at a tender age. Psychopathology is characterized by a wide an array of distressing behavioral, cognitive, and emotional symptoms of the standard body functions (Fraser et al., 2007). Psychopathology lays adverse interaction of environmental factors and multiple risk genes. It then becomes a predisposing factor to the subtle disturbances in neurotransmission of the brain to avert behavioral and emotional symptoms.

# 7.4 Prevention

It is clear those individuals who are genetically predisposed to developing psychotic disorders have a higher risk when they use drugs of abuse such as marijuana during their early and middle adolescent. Early identification and treatments of the psychotic disorders are possible if the person is familiar with the symptoms. The initial treatment of psychosis has been linked to better outcomes, instead, the current treatments for schizophrenia are considered to be providing control measures than cure. Supplementation of psychotic patients with omega-3 polyunsaturated fatty acid (PUFA) is entirely necessary because research studies have indicated that there is a reduction in omega-3 and omega-6 in patients with schizophrenia. These are ideally indicated for the prevention of psychosis.

# 8.0 Epidemiology

Early adulthood and late adolescence are the most common ages that individuals would possibly develop psychotic disorders. The research has indicated that during childhood, the psychotic disorders are rare. Females tend to have a late age of onset of this condition than their male counterparts who have an early age (Fraser et al., 2007). However, in delusion disorders, the rates are the same. Children and adolescents may experience mild hallucination, especially those of upward 15 percent. They are considered as normal developmental events but not psychosis. The prognostic factors can sometimes predict accurately patient’s eventual outcome. These factors include co-morbid, disease-specific, and demographics such as age. Epidemiology is, therefore, is the studies of disease prognosis. Sharp distinction epidemiological pattern determines the schizophrenia. Patients from low socioeconomic classes are seen to be the most common disorder, and it indicates significant cultural changes and experienced disasters. The higher risk for the subsequent brief psychotic disorder has gone through significant psychosocial stressors. There is lack of substance-induced psychotic disorder and general medical conditions in relevant epidemiological data about the psychotic disorder. The epidemiological data about the psychotic disorder is quite essential for psychological stressors.

# 9.0 Prognosis of Psychotic Disorders

Prognosis of the brief psychotic disorder is more advanced than the other psychotic disorders. The prognosis of mood disorders is similar is compared to that of brief psychotic disorder since they have psychotic features. Anyone especially, women who have a history of having a healthy level of functioning that develops the illness, and it eventually recovers best after suffering from the brief psychotic disorder. The first sign of disturbance of the prognosis for the brief psychotic disorder is a complete remission of all psychotic symptoms within one month. The diagnosed and reassessed symptoms return after one month of prognosis. A meta-analysis help assess the risk of psychotic recurrence between acute and transient psychotic disorder (ATPD), brief psychotic disorders (BPD), brief intermittent psychotic symptoms (BIPS), and brief limited intermittent psychotic symptoms (BLPS) (Freudenreich, & Goff, 2011). All these conditions do not reveal any difference in the prognosis. Several indicators of a good prognosis include the post-psychotic depressive phase and the psychotic phase.

# 10.0 Conclusion

Psychotic disorders are those complications associated with an alternation of a person’s perception and thought or psychosis. The condition causes some loss of regular contact with reality, and it usually affects the mind. Psychotic disorders are described as severe mental problems, which cause wrong perceptions and abnormal thinking to the victims. Types of psychotic disorders include schizoaffective disorder, Schizophrenia disorder, Schizophreniform disorder, and brief psychotic disorder. The environmental and genetic factors are associated with psychotic disorders as its causes even though the actual cause remains unknown. The psychological causes often influence the type of psychotic episode experienced by someone. Psychosis is the characteristic feature of the psychotic disorder. Symptoms of psychotic disorders include depression, social withdrawal, and feeling suspicious. Symptoms of psychosis vary from individual to individual based on the type of psychotic disorder exhibited, and this may change over time.

Symptoms of psychosis vary from individual to individual based on the type of psychotic disorder exhibited, and this may change over time. Medical health professionals are the one to be ones who can administer proper medical test assessment for any symptoms that may appear to indicate existence of psychosis. The apparent symptoms of psychosis developed by an individual are an underlying medical substance or medical use disorder. The diagnosis of psychosis is performed a psychiatric evaluation where a doctor takes the responsibility of watching the behavior of a person and then asks them the kind of experience that they are going through in that condition. Signs of clumsiness or mild confusion may exist among people with a psychotic disorder. After a diagnosis of psychotic disorder to a person, the doctor would rely on the family members or friends for detailed information and history of this particular patient. Psychotic features are known to be severe psychosis symptoms results from a major bipolar disorder or depressive disorder.

The effects of psychotic disorders encountered by an individual in the event that they fail to receive proper care regarding psychotic disorder include difficulty in forming relationship with others, social isolation, and severe behavioral and emotional disturbance. Additionally, dependency on substance abuse or chemicals, problems with languages, attempts to commit suicide, and developments of other forms of mental illness are other effects of psychosis. The treatment of psychosis may involve a combination of medications and therapy. Proper treatment makes most psychotic patients experience improvement in their symptoms. Antipsychotic agents are a treatment that has enabled the majority of patients to suffer substantial growth from a more chronic psychotic disorder. Newer medications have been developed to assist the psychotic patients to get treatment from these conditions, and these have fewer side effects. The second-generation antipsychotics are what majority of doctors are now using in the treatment of psychosis. The cognitive behavioral therapy (CBT) is beneficial to people with the psychotic disorder. It assists psychotic patients to recognize when they are experiencing delusions and hallucinations, and then help such individuals learn that this is part of their illness.

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