

HEALTHY MINDS
A WEEKLY COLUMN ALL ABOUT MENTAL WELLNESS
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HALLUCINATIONS AND SCHIZOPHRENIA

This week we shall talk about hallucinations (also called sensory hallucinations), and their causes; then we shall focus on the most significant cause: schizophrenia, a severe mental disorder.

Hallucinations are unusual sensory perceptions that take place while a person is conscious and awake; they are not related to any events going on outside of them. Even though they are heard, felt and/or seen, they apparently do not exist and includes hearing voices not spoken, seeing things, including patterns and lights, that are not there, or feeling a crawling sensation on or under the skin, when nothing is there. Rarely, hallucinations also include imaginary smells or tastes.

Sometimes potent recreational drugs such as psychedelics (LSD and strong marijuana) can cause visual patterns or haloes, but are usually recognized as substance related distortions by the user; powerful stimulants such as amphetamines or cocaine can often cause a crawling feeling on or under the skin, as if there were bugs present, as can alcohol and heroin.

There are many unsubstantiated stories, some from reputable sources, of “voice-to-skull” technology developed by the US army which can allegedly transmit computer-generated voices via microwaves to individual’s skulls; they appear to be hallucinations but they are not because they are purposefully produced and transmitted by others. The same technology is currently in use around some airports, but directed at birds and transmitted via microwaves to scare them away in order to protect aviation. They are sounds that are transmitted to the animals via microwaves.

Various medical causes of hallucinations, besides drug intoxication or withdrawal, include: fever (especially in children and the elderly); sensory deprivation (such as

deafness or blindness, and; severe illnesses, such as brain cancer, liver failure, or kidney failure.

Various psychiatric causes can also bring on hallucinations, and they include: delirium, dementia, psychotic depression, post-traumatic stress syndrome (PTSD), and most commonly, schizophrenia.

Schizophrenia is one of several severe mental disorders called psychoses which causes major changes in the personality and is characterized by a loss of touch with reality. It is characterized by disordered thought, delusions, hallucinations, paranoia, and sometimes by a reduction in emotional range, energy and the enjoyment of activities. To be formally diagnosed a person must show these symptoms for a least a month and be functionally impaired, either at work or in social settings. It usually begins in late adolescence through mid twenties for men, and a bit later for women, and is often caused by a chemical imbalance in the brain.

There are four basic categories of symptoms: thought disorders, perception disorders, disturbances of feelings or emotions, and behavioral disorders.

Thought disorders – Those with schizophrenia can have bizarre or unrealistic thoughts, characterized in the circular and disorganized speech that they present, often moving from one topic to another without making logical connections. Some individuals think they have super powers or wisdom, or that others are controlling their thoughts. They are said to be delusional.

Perception disorders – Some individuals have auditory hallucinations they believe are coming from outside of themselves; it may be a friend or relative, or the voice of God or The Devil. Sometimes these voices tell them to harm themselves or others. These sounds can be so disturbing that the victim turns on the TV or radio static to drown it out.

Disturbance of Emotions or Feelings – Some sufferers lose their range of emotional feeling and can no longer feel joy, sadness or humor. This is reflected in flat voice tones,

dead-pan faces, and sometimes social withdrawal; this change in personality and sociability brings negative consequences on the job, at school, or with friends and family.

Behavior disorders – Some forms of schizophrenia are characterized by certain repetitive movements, lack of blinking, or catatonia, where a person appears motionless, and cannot care for his or herself.

When a person is diagnosed with schizophrenia and other causes are ruled out (such as illicit drugs, medication reactions, syphilis, brain tumors, and others).

Patients who suffer from the low emotion/energy/motivation type of schizophrenia are harder to treat and nearly one in four must be institutionalized. Antipsychotic (or neuroleptic) drugs can greatly reduce symptoms and increase functionality. A variety of pharmaceutical products are very helpful in reducing the length and severity of psychotic episodes although there can be dangerous side effects like muscle spasms, restlessness and tremors.

Various forms of psychotherapy can be an important addition to these antipsychotic drugs, helping the patient to understand him/herself and the problems of schizophrenia, and to sort out reality from fiction. Learning to cope with problems and to solve them, and learning new social and occupational skills is also of great benefit to the sufferer. A skilled and trusted therapist can make a big difference, but with this disorder, antipsychotic drugs are essential to establishing a sense of normalcy in the patient's life.

TIP OF THE WEEK: The debate continues on the use of Tasers by the police, especially when the recipient of the 50,000 volts of electricity is mentally ill or frail. There are times when Tasers are necessary in the case of belligerent drunks or other violent suspects. However, Amnesty International USA counted over 250 deaths following Taser use over the past 6 years in just the U.S, including children. As long as police are well-trained, and use Tasers only when appropriate, and in a safe manner, then they can be used to protect the officers and innocent bystanders without killing or torturing suspects.