

SCHIZOPHRENIA (SZ) (cont)

Suicide	~ 15%
Etiology	Unknown
	Cause is multifactorial
Genetics	Significant genetic component with a complex, non-Mendelian inheritance
	Greatest risk factor → positive family hx
	Many genes involved → pt's inherit several risk genes
	→ SNP's and CNVs
Environmental	Pt's more likely to experience:
	• premature birth
	• low birth weight
	• perinatal hypoxia
	Maternal viral infxn during pregnancy (<i>especially during the 2nd trimester</i>)
Early Neurodevelopmental Defect	Brain vulnerability by genetic predisposition
	Combined with environmental factors or stressors
	→ Abnormal migration of neurons during CNS development
	→ Results in Abnormal neuronal connectivity and abnormal brain circuits
	→ Schizophrenia

SZ is more frequent in people born in cities and born between January and April (northern hemisphere)

SNPs: single nucleotide polymorphisms

CNVs: Specific copy number variations

Dopaminergic Pathways in the Brain

Nigrostriatal

Originates in the substantia nigra

Projects to the striatum

Negative Symptoms

Alogia and Poverty of Speech

- May speak very little
- Speech may have little meaningful content
- May have long delays between words and sentences

Flattening or Blunting of Affect

- May have reduced emotional expression
- May not smile or frown in response to happy or sad events
- Voices may not change tone or pitch
- May not maintain eye contact or other kinds of emotional links with people

Anhedonia and Avolition

- May seem to lose interest in and energy for pleasurable activities and achievements
- Lack of desire, drive, or motivation to pursue meaningful goals

Catatonia and Posturing

- May freeze into unusual body positions
- May stop moving entirely
- Sometimes hold rigid poses for hours and will ignore external stimuli
- May show stereotyped repetitive movements

Lack of Motivation and Social Withdrawal

- Contribute to poor-self care skills
- Difficulties maintaining employment and living independently

