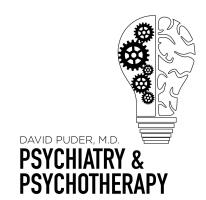
Episode 045: Schizophrenia in Film and History

David Puder, M.D., Ariana Cunningham, M.D.

This PDF is a supplement to the podcast "Psychiatry & Psychotherapy" found on iTunes, Google Play, Stitcher, Overcast, PlayerFM, PodBean, TuneIn, Podtail, Blubrry, Podfanatic



There are no conflicts of interest for this episode.

In today's episode of the podcast, Ariana Cunningham and I talk about schizophrenia. Ariana is a psychiatry resident who is also on my research team.

What is schizophrenia?

It is a psychotic disorder that typically results in hallucinations and delusions, leaving a person with impeded daily functioning. The word schizophrenia translates roughly as the "splitting of the mind," and comes from the <u>Greek</u> roots schizein ("to split") and phren- ("mind").

The onset of the disease typically occurs in young adulthood; for males, around 21 years of age, for females, around 25 years of age.

We don't know exactly what causes schizophrenia. There are certain predictors for it, and as I discussed the basics and pharmacology a <u>previous podcast</u>, frequent marijuana use can increase the risk of a psychotic or schizophrenic illness to about 4 times what it would be without <u>THC use</u>.

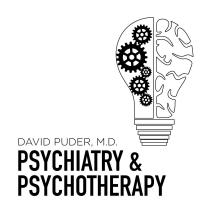
History of schizophrenia

Sometimes, in ancient literature, it can be difficult to distinguish between the different psychotic disorders, but as far as we know, the oldest available description of an illness resembling schizophrenia is thought to have existed in in the Ebers papyrus from Egypt, around 1550 BC. Throughout history, in groups with religious beliefs, the misunderstanding of the psychopathologies caused people to paint those with mental health disorders as receiving divine punishments. This theme of divine punishment continues today in some parts of the world.

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It wasn't until <u>Emil Kraeplin</u>, a german psychiatrist (1856-1926) that schizophrenia was suggested to be more biological and genetic in origin. In around 1887, Kraeplin differentiated what we call schizophrenia today from other forms of psychosis. At that time, he described schizophrenia as dementia of early life.



In 1911, Eugen Bleuler introduced schizophrenia as a word in a lecture at a psychiatric conference in Berlin (<u>Kuhn, 2004</u>). Bleuler also identified the positive and negative symptoms of schizophrenia, which we use today.

Kurt Schneider, a German psychiatrist, coined the difference between endogenous depression and reactive depression. He also improved the diagnosis of schizophrenia by creating a list of psychotic symptoms typical in schizophrenia that were termed "first rank symptoms."

His list was:

- Auditory hallucinations
- Thought insertion
- Thought broadcasting
- Thought withdrawal
- Passivity experiences
- Primary delusions
- Delusional perception (the belief that a normative perception has a certain significance)

Sigmund Freud furthered the research, believing that psychiatric illnesses may result from unconscious conflicts originating in childhood. His work eventually affected how the psychiatric world and society generally viewed the disease.

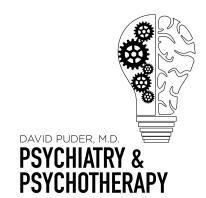
The lack of understanding of the disease is a dark history, and it is still deeply stigmatized, but psychiatry has made massive leaps in understanding schizophrenia and changing how it is viewed in modern society.

Nazi germany, the United States, and other Scandinavian countries (<u>Allen, 1997</u>) used to sterilize individuals with schizophrenia. In the Action T4 program in Nazi Germany, there was involuntary euthanasia of the mentally unwell, including people with schizophrenia. The euthanasia started in 1939, and officially discontinued in 1941 but didn't actual stop until military defeat of Nazi Germany in 1945 (<u>Lifton, 1988</u>). Dr. Karl

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Brandt and the chancellery chief Philipp Bouhler expanded the authority for doctors so they could grant anyone considered incurable a mercy killing. In reading about this event, it seems that this caused approximately 200,000 deaths.



In the 1970's, psychiatrists Robins and Guze introduced new criteria for deciding on the <u>validity</u> of a diagnostic

category (<u>Kendell, 2003</u>). By the 1980's, so much was understood about the disease that the DSM (Diagnostic and Statistical Manual of Mental Disorders) was revised. Now, schizophrenia is ranked by World Health Organization as one of the top 10 illnesses contributing to global burden of disease (<u>Murray, 1996</u>).

Unfortunately, it is still largely stigmatized, leading to an increased schizophrenia in the homeless population, some estimates showing up to 20% vs the less than 1% incidence in the US average population.

In conclusion

On the podcast episode, we discuss the media's portrayal of schizophrenia. Although media paints mentally ill as often violent, on average people with mental illness only cause 5% of violent episodes. This is just one example of how the stigma is furthered.

The more we understand about this disorder—what causes it, how we can help, how we can provide therapy and medicate and treat patients—the better. Getting rid of the stigma by learning the history and also moving beyond preconceived ideas to the newest science will also help de-isolate people with schizophrenia and help support them in communities, giving them a chance at a normal, healthy life.