

# key points

SELECTED BY

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**Psychosis is a state of mind in which a person loses** contact with reality in at least one important respect while not intoxicated with, or withdrawing from, alcohol or drugs, and while not affected by an acute physical illness that better accounts for the symptoms. Psychosis can be caused by a range of underlying conditions including schizophrenia, schizoaffective disorder, severe depression, severe mania (in bipolar disorder), delusional disorder and alcohol or substance misuse in the longer term. It can also be related to organic problems (e.g. brain tumours), trauma, stress or the side effects of medication (e.g. steroids) and may occur in patients with delirium and up to half of patients with dementia.

**Common positive symptoms of psychosis include delusions** and hallucinations. These symptoms are strongly influenced by the underlying cause of the psychosis: delusions in schizophrenia tend to be bizarre; delusions in depression negative; delusions in mania expansive. Common negative symptoms that GPs should look out for include difficulties concentrating, anxiety, depressed mood, poor sleep, suspiciousness and social withdrawal. These symptoms can be subtle and can overlap with depression.

**When a patient presents with psychotic symptoms,** it is important to take a full psychiatric history, perform a mental state examination and complete relevant investigations, as indicated in each individual case. Following assessment, a great majority, if not all, people with psychosis will be referred to specialist mental health services, often on an urgent basis, for further assessment, diagnosis and management. Generally, psychotic symptoms alone are sufficient reason for referral, but additional reasons include disturbed behaviour, suicidality, treatment resistance or failure of outpatient care.

**Treatment will depend on the cause of the psychosis:** depressive psychosis may require antipsychotic and/or antidepressant medication; severe mania in bipolar disorder may require antipsychotic and/or mood stabilising medication; schizophrenia will likely require antipsychotic medication and other measures. Substance misuse may require antipsychotic medication in the short term and counselling or rehabilitation in the longer term.

**Psychosis is now most often treated with a second** generation antipsychotic medication. Side effects can include weight gain, impaired glucose tolerance and diabetes mellitus, as well as dry mouth, sedation, possible cardiac effects, dizziness and impotence. With all antipsychotics, neuroleptic malignant syndrome is a rare adverse effect that needs to be managed in hospital.

**Before commencing antipsychotic medication, the** patient should have: an ECG; their weight and height checked; and a set of basic blood tests, including blood glucose. These should be monitored annually. Support in stopping smoking, promotion of improved diet and lifestyle, and screening for cardiac risk factors are also important.