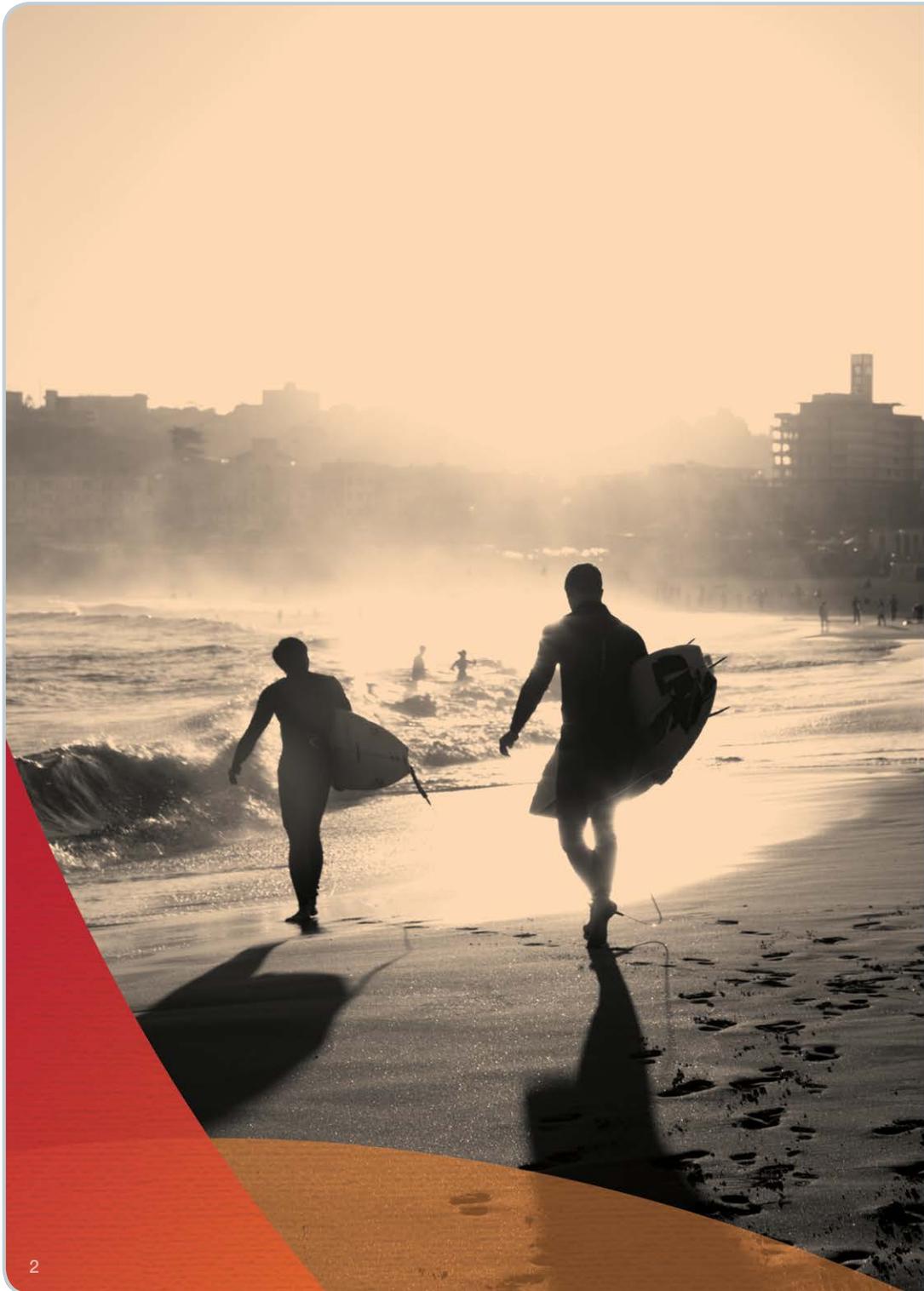




TREATMENT FOR SCHIZOPHRENIA

A GUIDE FOR CARERS



ABOUT THIS BOOKLET

You have been given this booklet because you know someone with schizophrenia, and they've made the decision to tell you about their illness and treatment. If you are caring for someone with schizophrenia, you are not alone. Around one in a hundred people will experience the symptoms of schizophrenia at some time in their lives.¹ Schizophrenia is a medical condition that affects the brain, impairing normal thought processes and can affect day-to-day life. While it is a life-long condition like diabetes or high blood pressure, it can be treated and managed with medications and supportive therapies.

For more background information on schizophrenia, refer to the booklet titled *Living well with Schizophrenia: A guide for carers*.



WHAT DOES TREATMENT FOR SCHIZOPHRENIA INVOLVE?

For people with schizophrenia, recovery can be a lifelong process as they work towards goals that they set along with their treatment team. Successful treatment works towards relief from symptoms, prevention of future episodes and restoring everyday self-care activities so the person can enjoy a meaningful life.

The treatment plan

It's important that the person with schizophrenia understands their treatment, so they can make it work best for them.

A treatment plan helps people work towards their personal goals, which may include things they will be able to do when they feel better, such as:

- returning to work
- going back to study
- getting involved in activities that are important to the person, such as seeing friends and family, or exercising.

Medications are an important part of treatment to help people live with schizophrenia. Certain medications can help to reduce or eliminate symptoms by assisting the brain to restore its usual chemical balance. But they only form part of the treatment plan.

Treatment usually involves a combination of antipsychotic medications, psychological and psychosocial treatments.

Encourage your friend or relative to stay well informed and stick to the treatment plan that they and their healthcare team have put in place.

WHO IS INVOLVED IN TREATMENT?

After a relapse, treatment will involve a team of people specialised to look after the needs of your friend or relative. A General Practitioner (GP) may have helped the person get specialist care from a psychiatrist. Some people are managed by their GP when their condition is stable.



Psychiatrist

Provides specialist assessment, treatment and care for mental illness.

Case manager/key clinician

Organises and coordinates their assessment, treatment plan and on-going treatment. They can also arrange links to other services including community agencies, employment, Centrelink and accommodation.

Nurse

A mental health nurse specialises in mental health treatment and can help administer medications.

Psychologist

Applies psychological principles to treatments that improve physical and mental wellbeing.

Social worker

Can provide psychosocial treatments and assist with welfare needs.

Occupational therapist

Promotes recovery and rehabilitation through creative or functional activities.



WHAT ARE THE MEDICATION OPTIONS FOR A PERSON WITH SCHIZOPHRENIA?

How do you know which medication is the best match for your friend or relative with schizophrenia? The first step is for the person to talk to their doctor about all of the treatment options available so that they can both decide what's best for the individual.

Antipsychotics

The main group of medications used to treat schizophrenia are called antipsychotics. They can help to reduce or eliminate symptoms by assisting the brain to restore its usual chemical balance. There are two types; typical and atypical antipsychotics.

Antipsychotics are usually taken in pill, liquid or wafer form every day. However, some antipsychotics are given every fortnight, once a month or once every 3 months as an injection in the buttock or arm, like a flu shot. This releases the drug slowly over some weeks, meaning the medication can be given less often.

Encourage your friend or relative with schizophrenia to work with their doctor to find the most suitable medication at the right dose for their needs.

HOW LONG DOES MY FRIEND OR RELATIVE HAVE TO KEEP TAKING THEIR MEDICATION?

Symptoms can come and go, and some people stop taking their medication because they feel better or think they don't need it any more.

However, people with schizophrenia can become unwell if they stop taking their medication or if they only take it sometimes. You should encourage your friend or relative to keep taking their medication as prescribed and to talk to their doctor if they have any questions about their medication.



WHAT IS THE DIFFERENCE BETWEEN ORAL AND LONG-ACTING TREATMENTS?

Long-acting treatment

Long-acting medications may be useful for people who:

- find it difficult to swallow pills
- keep forgetting to take their daily medication
- keep stopping their medications – even though they should take them to control their symptoms
- want to be actively in control of preventing relapse by ensuring medication adherence through a LAT
- find daily oral medication impacts their quality of life by restricting their everyday activities and social life
- prefer to go to an appointment to receive an injection every month or every 3 months rather than trying to remember to take a tablet once or twice each day
- have suffered relapses on oral medications

Oral medication

Oral medications may be useful for people who:

- prefer taking tablets
- need flexibility in dosing
- are comfortable taking medications without assistance
- have had no problems sticking with their treatments in the past
- don't like having injections
- have support from family or friends
- have someone who can support them taking their medication as prescribed

Encourage your friend or relative to talk to their doctor about suitable treatment options.



WHAT ARE THE SIDE EFFECTS OF ANTIPSYCHOTIC MEDICATIONS?

There are some general side effects that antipsychotics may cause in some people, including: constipation, dry mouth, drowsiness, dizziness, nausea, tiredness and sexual dysfunction.

More specifically, atypical antipsychotics may also cause weight gain and hormonal side effects while typical antipsychotics may cause side effects related to movement. It is important that the person communicates any changes in symptoms and any side effects of treatment to their treatment team.

Encourage your friend or relative to speak to their treatment team as soon as possible if they think they are experiencing side effects or if they have any questions about side effects specific to their treatment.



PSYCHOSOCIAL AND PSYCHOLOGICAL TREATMENTS



Psychosocial treatments can help people with schizophrenia to learn how to cope with the everyday challenges of living with their condition. This may take different forms:

Psychoeducation

Provides both the person with schizophrenia and their carer/family with information about schizophrenia. You will play an important role in treatment, especially when the affected person becomes unwell, so staying up to date with information helps you as a carer to manage the road ahead too.

Cognitive behavioural therapy

May be a useful treatment to help the person understand their symptoms and how to adapt to living with them.

Vocational and social rehabilitation

Can include counselling and training that focuses on social and occupational skills to help the person with schizophrenia to function better in the community.

Crisis support

Mobile clinical support is available in most areas. A health professional can speak to the person with schizophrenia over the phone and pay a visit or arrange a follow-up with the treatment team when necessary.

Counselling

Communication will be an important part of treatment for the person with schizophrenia. Their case manager can organise general counselling and support during and after a relapse.

Hospitalisation

There may come a time when a person with schizophrenia needs a place away from the stress of life, or when treatments are needed that can only be delivered in hospital. However, where possible, treatment will always occur in the least restrictive environment possible and hospitals are used only when necessary.



HELP YOUR FRIEND OR RELATIVE WITH SCHIZOPHRENIA TO DEVELOP HEALTHY HABITS

There are other things you can do to encourage your friend or relative to maintain good mental health.

You can encourage them to develop good habits and look after their physical health through:



healthy eating



getting plenty of sleep



enjoying regular exercise

By taking responsibility for their health and being aware of any health risks related to their illness or treatment, people with schizophrenia can feel more relaxed and able to cope with life's changes.

WHERE CAN I FIND OUT MORE INFORMATION?

Where can I find out more information?



The doctor and case manager will be important sources of information for you and the person you are caring for. They will be able to answer questions you may have about the prescribed medication or treatment plan.

Below is a list of some questions that you may want to ask at the next appointment, as well as space to write your own.

- What is the treatment plan?
- What are the medication options?
- Are there any expected side effects and how can they be reduced?
- Is an oral or long-acting treatment an option for my loved one?
- How long can my loved one expect to take this medication?
- Is there anything I can do to reduce the chances of my loved one experiencing a relapse?

EXPAND YOUR KNOWLEDGE



If you or someone you know would like to learn more about schizophrenia, some sources of information are listed below.

FOR CARERS

Association of Relatives and Friends of the Mentally Ill (ARAFMI)

www.arafmi.org

Carers Australia

www.carersaustralia.com.au

FOR SOMEONE WITH A MENTAL ILLNESS

Headspace

www.headspace.org.au

Lifeline

13 11 14

Mental Health Council of Australia

www.mhca.org.au

Mental Illness Fellowship of Australia Inc (MIFA)

www.mifa.org.au

Reach Out

www.reachout.com.au

Sane Australia

1800 187 263 www.sane.org

Reference: 1. Sane Australia. *Schizophrenia*. 2014.

Janssen-Cilag Pty Ltd. ABN 47 000 129 975. 1-5 Khartoum Road,
Macquarie Park NSW 2113. Phone: 1800 226 334. CP-68313.
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