

Schizoaffective Disorder

Schizoaffective disorder is a mental disorder characterized by a combination of schizophrenia symptoms, such as hallucinations or delusions, and mood disorder symptoms, such as depression or mania. Individuals with schizoaffective disorder may need assistance with daily functioning. There are two types of schizoaffective disorder, both of which include symptoms of schizophrenia.

- **Bipolar type**- contains symptoms of mania and occasionally major depression.
- **Depressive type**- contains only major depressive episodes.

Signs & Symptoms

Symptoms may vary from person to person because schizoaffective disorder affects individuals differently. People with the condition experience hallucinations or delusions, as well as symptoms of bipolar disorder or depression. The course of schizoaffective disorder commonly contains cycles of severe symptoms followed by periods of less severe symptoms. Someone with schizoaffective disorder might experience:

- **Delusions** - false beliefs that are not real.
- **Hallucinations** - hearing or seeing things that are not real.
- **Depression** - sadness, emptiness, hopelessness.
- **Mania** - sudden increase in energy and behavior that is out of character.
- **Difficulties in Daily Life** - difficulties at work, school, social activities, and with self-care.

Causes & Risk Factors

The exact cause of schizoaffective disorder is unknown, but genetics could play a role. Risk factors for developing schizoaffective disorder can include having a close blood relative who has been diagnosed with schizoaffective disorder, bipolar disorder, or schizophrenia, as well as taking mind-altering drugs or going through a traumatic or stressful event.

Diagnosis & Treatment

Schizoaffective disorder can be difficult to diagnose because it has symptoms of both schizophrenia and either depression or bipolar disorder. To be diagnosed with schizoaffective disorder, a person must have symptoms of mania or depression occurring at the same time as symptoms of schizophrenia and delusions or hallucinations for two weeks without symptoms of depression or mania. Treatment plans commonly consist of a combination of medication and psychotherapy such as cognitive behavioral therapy or family therapy. Learning how to cope with the disorder is also important for improving quality of life.

Sources – National Alliance on Mental Illness: <https://www.nami.org/Learn-More/Mental-Health-Conditions/Schizoaffective-Disorder> and Mayo Clinic: <https://www.mayoclinic.org/diseases-conditions/schizoaffective-disorder/symptoms-causes/syc-20354504>