

Patient information from BMJ

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Schizophrenia: what is it?

Having schizophrenia means you go through periods where you think and feel differently from how you normally would. You might lose touch with reality. This condition can be frightening and difficult to live with. But the right treatments can help you control your symptoms.

Here, we look at what happens in schizophrenia and at its signs and symptoms. To learn more about how schizophrenia is treated, see our leaflet *Schizophrenia: what treatments work?*

What is schizophrenia?

Schizophrenia is usually a long-term mental health condition. If you have schizophrenia your mind works differently from other people's. This can affect your thoughts, emotions, and the way you experience the world.

You might go through periods when you find it hard to tell what's really happening and what you are imagining. This is called psychosis. These confused thoughts can make you behave in an unusual way.

Medicines can help bring these symptoms under control and prevent them coming back. But you will probably need to take the medicines long term.

Most people with schizophrenia get repeated episodes of psychosis. Between episodes, they might be free of symptoms or they might have some nagging symptoms that don't go away.

We don't know exactly why some people get schizophrenia and others don't. But people who have a family history of schizophrenia seem more likely to get the illness. Research also suggests that schizophrenia is more common among people born to older fathers.

Your environment and experiences also seem to play a role. In particular, doctors think that some events that happen to you as a teenager or young adult can trigger psychosis. These events could include:

- Being under a lot of stress
- Using some recreational drugs, such as cannabis, or drinking a lot of alcohol.

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But it's important to remember that not everyone who experiences psychosis will go on to develop schizophrenia. Research shows that up to 20 in 100 people make a good recovery after a first psychotic episode.^[1]

Psychosis can also be caused by other mental health conditions like depression or bipolar disorder. A specialist doctor (called a psychiatrist) will be able to assess you and give you a better understanding about your diagnosis.

What are the symptoms?

During a period of psychosis (often called a psychotic episode), you might have beliefs that aren't true (delusions). For example, you might believe someone is trying to poison you or control your thoughts. You might also imagine things that aren't real (hallucinations).

The most common type of hallucination is hearing voices. For example, you might hear voices telling you what to do or commenting on your activities or actions. The voices might seem to be coming from inside your head or from outside it.

Other, less common hallucinations are seeing, smelling, or feeling things that are not really there.

These types of experiences are called 'positive symptoms' because you are gaining new behaviours and ways of experiencing reality.

These experiences can be very distressing. You might find it hard to believe that your experiences are part of an illness. You might feel there is nothing wrong with you. But your doctor or psychiatrist can tell you when you are ill.

Other symptoms of schizophrenia include feeling withdrawn, isolated, or emotionless. Doctors call these types of symptoms 'negative symptoms', where you're missing some of the behaviours and emotions that you used to have.

When this happens you might appear to be in a very flat mood and not:

- Care about anything
- Enjoy things that you used to enjoy
- Show any expression on your face, or
- Be able to pay attention to anything.

These symptoms can be long-lasting.

Schizophrenia can also make it hard to think in an organised way or remember things. For example:

- You might find it hard to concentrate when you are reading or writing
- Your speech might be jumbled and hard for other people to follow
- You might become very disorganised and find it hard to take care of yourself.

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Symptoms of schizophrenia tend to begin when someone is in their late teens, 20s, or 30s. For men they usually start before the age of 25, and for women before the age of 35. Symptoms can happen gradually over weeks or months or they can come on suddenly.

The symptoms of schizophrenia can make life very hard. You might find that everyday tasks take much more effort. It's common to feel very anxious or angry.

You might also find that you are thinking about death or even about committing suicide. If this happens, talk to your doctor urgently.

What will happen to me?

If you've been diagnosed with schizophrenia you might worry that you'll have to spend a lot of time in hospital and that you won't be able to live a normal life.

Schizophrenia does have a big effect on your life. But everyone is different.

Some people have long periods of time when they are free from symptoms or only have low-level symptoms that don't stop them getting on with their life.

Other people need more frequent contact with mental health professionals and social service providers (for example, for help with employment issues and housing). And some people need more time in hospital and are ill for much longer.

However much treatment you need you'll probably need to keep taking medicine, even when you are well, to keep your symptoms under control.

Other people's attitudes

The way that other people think about schizophrenia can make life harder than it needs to be. Some people are afraid that people with schizophrenia are dangerous.

It's true that some people act in a violent way when having psychotic symptoms. But most people with schizophrenia are never violent towards other people.

Your care plan

If you have been diagnosed with schizophrenia you should be given a care plan. This is where you decide with a team of health professionals on what sort of care you need.

The care plan will say how often you need to have check-ups for your schizophrenia and who you should contact if you start getting more symptoms. It should also include a plan for getting regular health checks and any support services.

If you don't already have a care plan, ask your doctor if one can be set up. That way you'll know what sort of care you should expect.

References

1. Hansen HG, Speyer H, Starzer M, et al. Clinical Recovery Among Individuals With a First-Episode Schizophrenia an Updated Systematic Review and Meta-Analysis. *Schizophr Bull.* 2023 Mar 15;49(2):297-308.

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