The following symptoms may need immediate care:

- Thoughts of suicide, self-harm, or hurting other people
- Hallucinations (seeing or hearing things that are not really there)
- Delusions (believing something that is known to be untrue, like that someone has special powers or abilities)
- Thought disorders
- Movement disorders (agitated body movements)
- Trouble focusing or paying attention
- Problems with working memory (learning something and then putting that knowledge to use)
- Reduced speaking
- Reduced expression of emotion or pleasure

**WHAT IS SCHIZOAFFECTIVE DISORDER?**

Schizoaffective disorder is a long-term mental disorder where a person experiences a combination of psychotic symptoms, like hallucinations or delusions, and mood symptoms, like depression or mania. People may have bipolar type schizoaffective disorder, which includes episodes of mania and sometimes major depression, or depressive type schizoaffective disorder, which includes only major depressive episodes.

**HOW IS SCHIZOAFFECTIVE DISORDER TREATED?**

- Antipsychotic medications are usually used to help reduce or minimize hallucinations or delusions
- Mood stabilizers or anti-depressants can help with the mood symptoms of schizoaffective disorder
- Working with a therapist or counselor in addition to taking medication can improve outcomes
  - CBTp (cognitive behavioral therapy for psychosis)
  - Supportive psychotherapy
  - Cognitive Enhancement Therapy (CET)
- Inpatient treatment, either short- or long-term, can be necessary for some people

**WHAT DO I NEED TO KNOW ABOUT MEDICATIONS FOR SCHIZOAFFECTIVE DISORDER?**

- First-generation (typical) antipsychotics
  - chlorpromazine (Thorazine), fluphenazine (Prolixin), haloperidol (Haldol), etc.
- Second-generation (atypical) antipsychotics
  - clozapine (Clozaril), paliperidone (Invega), risperidone (Risperdal), quetiapine (Seroquel), etc.
- Mood stabilizers
  - Lithium
- Antidepressants
  - SSRIs, SNRIs, MAOIs

*All of these medications have side effects which should be discussed with a health care provider*
WHAT CAN BE DONE?

- Psychosocial treatments enable people to compensate for or eliminate the barriers caused by schizoaffective disorder
- Assertive Community Treatment (ACT) provides comprehensive treatment for people with serious mental illness by providing individualized direct services and proactively addressing potential problems
- Peer support groups encourage involvement in recovery by helping people work on social skills with others
- Complementary health approaches to discuss with your doctor include increasing intake of omega-3 fatty acids that may reduce symptoms
- Pinpointing your stressors and triggers can help address symptoms early before they develop into a serious episode
- Using drugs or alcohol reduces the effectiveness of treatments for schizoaffective disorder, and make it more difficult to follow a treatment plan
  - Avoiding/reducing use of these substances is important in controlling symptoms
  - If you are having trouble controlling drug or alcohol use, seek treatment
- Ask your doctor the following questions:
  - When will I start to feel better? What symptoms will this treatment relieve?
  - What might the side effects of this treatment be? How can I cope with them?
  - What are the risks associated with this treatment?
  - How can I recognize problems if they happen?
  - Is there anything I can do to make this treatment more effective?

WHAT ELSE DO I NEED TO KNOW ABOUT SCHIZOAFFECTIVE DISORDER?

- Take all your medication as prescribed, and make sure all your providers know your medications and side effects you have. Avoid changes without talking to your providers
- Keep up-to-date on any bloodwork or other tests your provider recommends
- Psychotic disorders can run in families, but not everyone with a family history develops the disorder, and people without a family history can also have schizoaffective disorder
- There is not always an identified “cause” for the condition

REFERENCES/ADDITIONAL RESOURCES

- In the U.S., call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255). Use that same number and press “1” to reach the Veterans Crisis Line.