

The Positive and Negative Symptoms of Schizophrenia

INTRODUCTION

Schizophrenia is a psychotic disorder in which a person may exhibit a wide range of different cognitive, behavioral, and emotional dysfunctions.¹ These are categorized into positive symptoms and negative symptoms.

Positive symptoms are those in which the person displays behaviors or has experiences that are distorted or excessive.² Negative symptoms refer to emotions and behaviors that are expressed at a lower rate or absent, compared with how the person normally feels and behaves.² Not all people with schizophrenia will experience all of these symptoms.

Understanding the positive and negative symptoms of schizophrenia is important because they each have a different course, require separate treatment approaches, and are associated with different outcomes.¹

POSITIVE SYMPTOMS

Positive symptoms are grouped into four categories: delusions, hallucinations, disorganized thought/speech, and disorganized behavior.

Delusions

Delusions are persistent, strong beliefs that conflict with reality. The person adheres to their belief even when presented with evidence to the contrary.

¹ Some types of delusions are:

- Persecutory, meaning the person believes someone is trying to harm them (e.g., “The FBI is out to get me”).
- Referential, meaning the person thinks events or cues are directed at them (e.g., “That song on the radio was actually written about me”).
- Bizarre, meaning the person has highly implausible beliefs at odds with their culture or society (e.g., “Last night, aliens visited me and removed one of my kidneys”).

Hallucinations

Hallucinations are false sensory perceptions that seem real to the person but are not truly occurring.¹ They include:

- Auditory hallucinations (i.e., hearing voices or other sounds).¹
- Visual hallucinations (e.g., seeing a person or flashes of light).³
- Tactile hallucinations (e.g., feeling bugs crawling under your skin).³

Disorganized thoughts/speech

Disorganized thinking is evident when the individual uses speech that is illogical, incoherent, or otherwise disorganized or difficult to follow.¹ This could manifest as:

- Talking about topics completely unrelated to the conversation (i.e., tangentiality).¹
- Using made-up words (i.e., neologisms)⁴ or violating rules of grammar (i.e., “word salad”).¹

Disorganized or abnormal motor behavior

This includes a wide range of abnormal psychomotor activities,⁵ which can significantly limit the person’s ability to function.¹ It can include behaviors such as:

- Holding inappropriate or odd body postures (a form of catatonia).¹
- Talking to oneself, smiling, or laughing inappropriately.⁵

NEGATIVE SYMPTOMS

Poor outcomes in schizophrenia, such as high morbidity and significant functional impairment, are largely due to negative symptoms.² Negative symptoms can be difficult for clinicians to recognize because patients may not have insight into their negative symptoms and are more likely to present with positive symptoms instead.²

Diminished emotional expression

Diminished emotional expression is a particularly common feature of schizophrenia. This manifests as a blunted affect as well as a lack of behaviors that convey emotional expression, like hand gestures, voice intonation, facial expressions, and eye contact.^{1,6}

Avolition

Avolition occurs when a person reduces or avoids purposeful activities; for example, not going to work or not maintaining personal hygiene.⁷

Alogia

Alogia is a lack of speech that is spontaneously generated or elaborative; use of terse, meaningless responses; or, in some cases, not speaking at all.^{6,8}

Anhedonia

Anhedonia occurs when an individual no longer experiences enjoyment from participating in activities they previously found pleasurable.¹

Asociality

Asociality occurs when a person lacks interest in and motivation for engaging in social relationships; in some cases, they may also reduce their actual participation in social activities.⁵

References

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