



## New UAB schizophrenia clinic treats teens quickly after first diagnosis

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By **Val Walton--The Birmingham News**



BIRMINGHAM, Alabama -- The University of Alabama at Birmingham has started a first-of-its-kind clinic in Alabama to quickly treat teenagers after a diagnosis of schizophrenia.

The First Episode Schizophrenia Clinic uses an aggressive approach to treat and manage symptoms with a strong emphasis on education

and having families involved in the care.

Dr. Adrienne Lahti, professor in the UAB Department of Psychiatry and Behavioral Neurobiology, said time is of the essence for the medical care of schizophrenia, a serious brain illness in which people may hear voices and are unable to tell what's real from what is imagined.

Teens may develop schizophrenia as early as 16, although it may be hard to diagnose at first.

Lahti said it's not uncommon for parents, unprepared for what is happening, to take a wait-and-see approach.

"What happens when someone develops schizophrenia, or any kind of psychosis, is what I call the double crisis," Lahti said. "There is a crisis because someone is sick, and the family does not understand what is happening. They have a son who had a girlfriend in school, and one day this person is saying all kinds of bizarre things."

She said there is often a delay to treat in hope that the child will get better.

But this can be a critical period, Lahti said.

"It looks like at that time there is probably some kind of toxic effect that takes place," she said. "People are losing brain matter, and the IQ is dropping."

She said the longer it takes to treat the illness, the worse the outcome for the patient.

According to the National Institute of Mental Health, symptoms of schizophrenia normally start between ages 16 and 30, with men developing the symptoms at a younger age than women.

Several factors may contribute to the illness, including genetics, because it tends to run in families. The symptoms can be mild or severe.

"We never know how it goes," Lahti said. "But it's a crisis."

The symptoms can include hallucinations, delusions or agitated body movements. Those affected can become isolated, talk in a dull voice or have difficulty showing emotions. They also can have difficulty paying attention or using information to make decisions, according to NIMH.

UAB's new clinic, which Lahti said is one of a few of its kind in the country, also takes a comprehensive response to treat teen patients after first diagnosis. Care is personal and individualized. Lahti said most patients first show up for care in the emergency room.

She said it's important for family members to be educated about the illness, its management and treatment.

There is no cure for schizophrenia, but several types of antipsychotic medications can help. The medications can cause side effects, Lahti said, including weight gain. Sometimes a patient may have to try different medications to determine which works best.

She said having family involved in a patient's care is important because the patient may be in denial.

The clinic also works to make sure there is support, Lahti said, including through the local chapter of the National Alliance on Mental Illness.

Doug Williams, a past president of NAMI in Birmingham, applauded the clinic.

"Anything that can be done for early intervention would be good," said Williams, who has three children living with mental illness. "That is a very good move."

Linda Stalters, founder and chairman of the board of the Schizophrenia and Related Disorders Alliance of America, agreed.

"The thought is we don't usually find out about the illness until much later in the progression of the disease," said Stalters, a retired advanced practice nurse psychotherapist living in Houston. "They are often misdiagnosed early on, diagnosed with depression."

Stalters said once people begin having delusions and have a psychotic break, treatment becomes more challenging, depending on what part of the brain is affected. Early intervention is a great thing for a teen, who can receive treatment and learn how to manage just as others with disabilities do, she said.

Lahti said support for teens and parents is necessary because the diagnosis can be traumatic for a teen, who is already dealing with peer pressure and developing social skills. It's also important for the teen to remain in school and maintain a sense of normalcy as long and as much as possible.

"They are still kids," she said.

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