

First Episode Psychosis

First Episode Psychosis programs serve people 15 to 40 with early signs of psychosis. Psychosis can be treated, and early treatment increases the chance of a successful recovery.

About psychosis

The word psychosis is used to describe conditions that affect the mind when there has been some loss of contact with reality. Psychosis can include hallucinations, paranoia or delusions, and disordered thoughts and speech, and can affect people from all walks of life.

Psychosis often begins when a person is in his or her late teens to mid-twenties. Psychosis can be a symptom of a mental illness such as schizophrenia, or caused by medications, alcohol or drug abuse. Three out of 100 people will experience psychosis at some time in their lives, and about 100,000 adolescents and young adults in the US experience first episode psychosis each year.

Early treatment is critical

Reducing the time it takes for a person experiencing psychosis to get treatment is important because early treatment often means a successful recovery. Yet, studies have shown that it is common for a person to have psychotic symptoms for more than a year before receiving treatment.

Coordinated Specialty Care is a recovery-oriented treatment program for people with first episode psychosis. Coordinated Specialty Care promotes shared decision-making and uses a team of specialists who work with the client to create a personal treatment plan. The specialists offer psychotherapy, medication management, family education and support, case management, and work or education support depending on the individual's needs and preferences.

In Minnesota, there are currently two Twin Cities pilot sites:

- HCMC for 30 people
- U of MN Psychiatry for 60 people

Over the next two years, these sites will recruit and work with individuals and families experiencing their first episode of psychosis.

Left untreated, psychosis can lead to disruptions in school and work, strained family relations, and separation from friends.

The longer the symptoms go untreated, the greater the risk of additional problems.

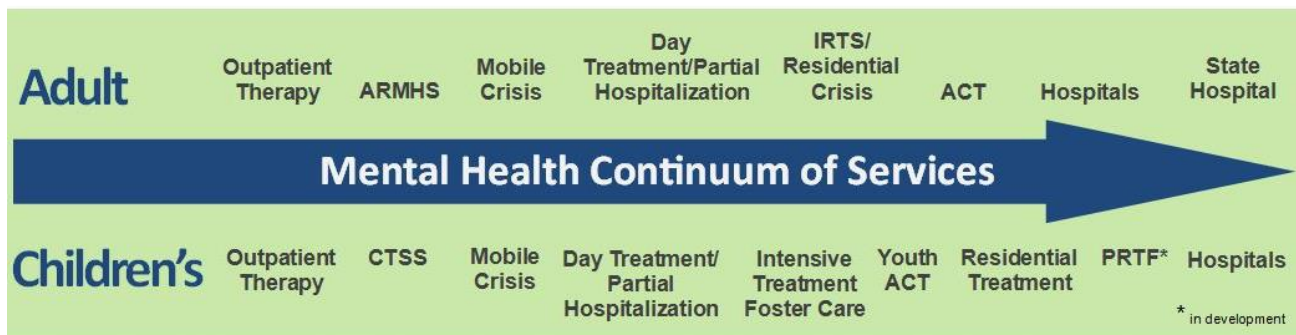
History

In 2008, the National Institute of Mental Health launched the Recovery After an Initial Schizophrenia Episode (RAISE) study. RAISE examined different aspects of treatment for people who were experiencing first episode psychosis. The RAISE study showed that getting services and supports early can reduce the effects of a first episode of psychosis, positively affect a person’s overall outcomes and increase functioning related to employment and education.

As a result, in 2014 Congress required all 50 states to set aside 5 percent of their Mental Health Block Grant for to support clients with first episode psychosis. For more information, www.nimh.nih.gov/health/topics/schizophrenia/raise)

About mental health

DHS is committed to promoting and supporting the mental health and development of all Minnesotans. DHS believes that these services must be based in research and lead to measurable reduction in mental health symptoms and increases in strengths and functional abilities.



ARMHS—Adult Rehabilitative Mental Health Services IRTS—Intensive Residential Treatment Services ACT—Assertive Community Treatment
CTSS—Children’s Therapeutic Support Services PRTF— Psychiatric Residential Treatment Facility

Mental health matters at every stage of life and requires a continuum of services ranging from prevention to recovery.

For more information, visit <http://mn.gov/dhs>