

Paranoia; Voices; Visions DON'T PANIC!

How to better understand our clients who are paranoid,
hearing voices or seeing things

And how to get them the help they need



**Frontline
Network
Partner**



Outline

- What are delusions & hallucinations?
- Causes of delusions and hallucinations
- What does the type of delusion tell us?
- What does the type of hallucination tell us?
- Formal Thought Disorder
- General Approach
- Case Studies

Beliefs/Delusions

Normal
Belief

Overvalued
Idea

Delusion

St
Martin
in
the
Fields

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Delusions



Delusions

- No perfect definition
- False belief which is firmly sustained and based on incorrect inference about reality. This belief is held despite evidence to the contrary...
...and is not accounted for by the person's culture or religion
- **Certainty** - the patient believes the delusion absolutely
- **Incorrigibility** - the belief cannot be shaken
- **Impossibility** - the delusion is without doubt untrue

Hallucinations

- No perfect definition (but less controversial than delusions)
- Sensory perception which is experienced despite there being no external stimulus, and that has the compelling sense of reality

Pseudo Hallucinations

- Internal vs External
- Not necessarily harmless
- Hypnagogic vs Hypnopompic

Pause



Physical (Organic) Causes

BRAIN

- Brain Disorders
- Brain Injury
- Delirium

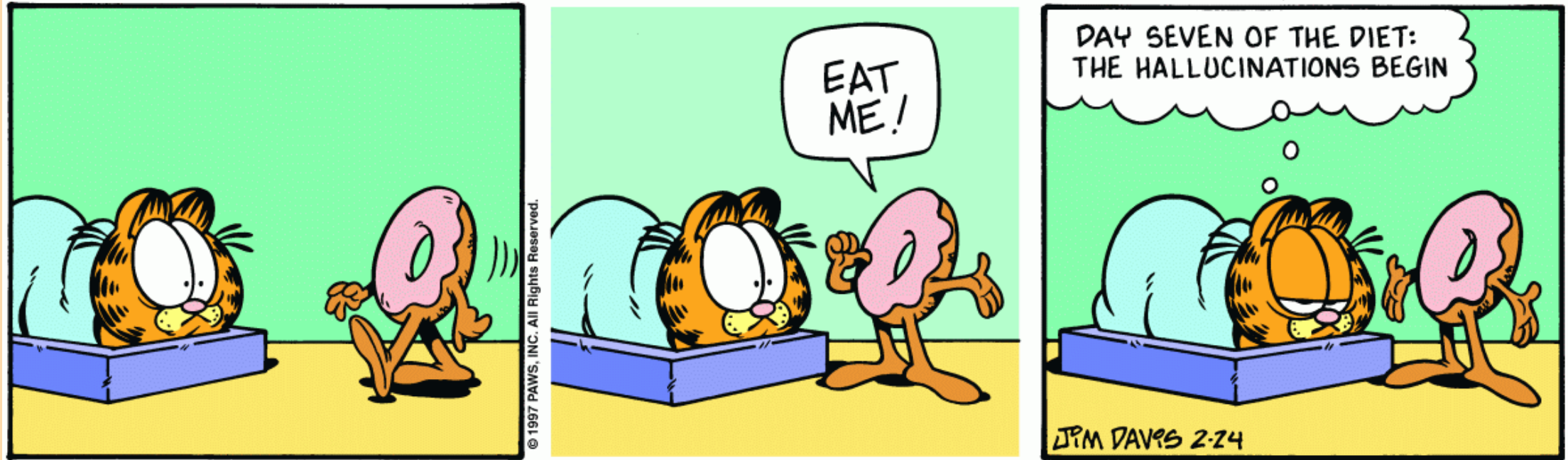
DRUGS

- Substances of Abuse
- Medication

ENVIRONMENTAL

- Lack of sleep
- Visual Problems
- Hunger

Physical (Organic) Causes



Mental Health (Non-organic) Causes

MOOD DISORDER

- Severe Depression
- Bipolar Disorder

PSYCHOTIC DISORDER

- Schizophrenia
- Schizoaffective Disorder
- Delusional Disorder
- Postpartum psychosis
- Brief Psychotic Disorder

DISTRESS

- Personality Disorder
- Bereavement
- Abuse or Trauma

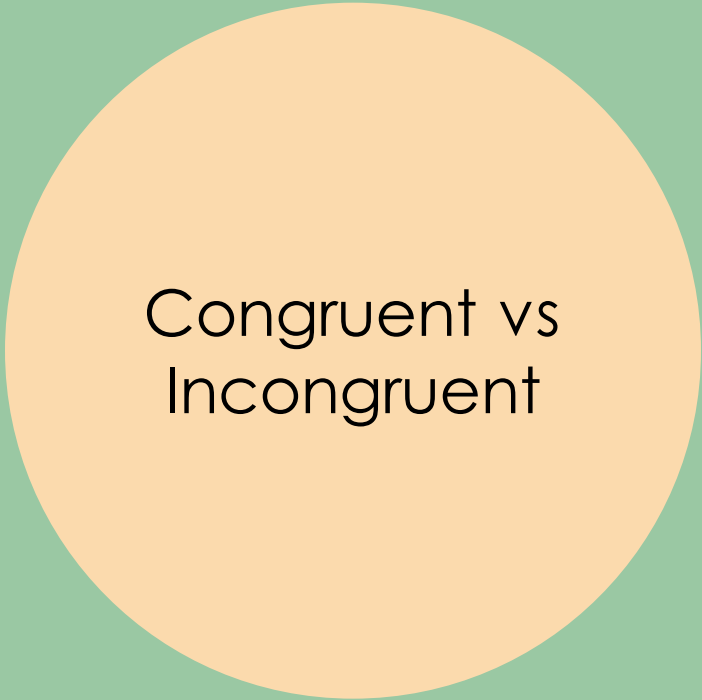
Mini Pause



Delusions - Descriptions



Primary vs
Secondary



Congruent vs
Incongruent



One topic vs
Many

Delusions - Types

Persecutory

Grandiose

Somatic

Infidelity

Capgras

Erotomania

Cotard

Hallucinations - Types

SMELL

(think brain)

TOUCH

(Think substances)

SIGHT

(Think
substances,
delirium, mood)

Auditory Hallucinations - Types

2nd person

Speaking to you

Usually mood disorder,
especially if congruent

3rd person

Speaking about you or
someone else

More suggestive of a
primary psychotic disorder

Formal Thought Disorder

- Problem is not **what** you are thinking (content), but **how** you are thinking (form)
- A core symptom of a psychotic disorder and points to severity and worse prognosis.
- Can result in worsening cognition and general disorganization.
- Poverty of speech, Poverty of content of speech, Pressure of speech, Distractible speech
- Tangentiality, Derailment, Incoherence, Illogicality
- Clanging, Neologism, Perseveration, Echolalia
- Blocking, Stilted speech

Pause



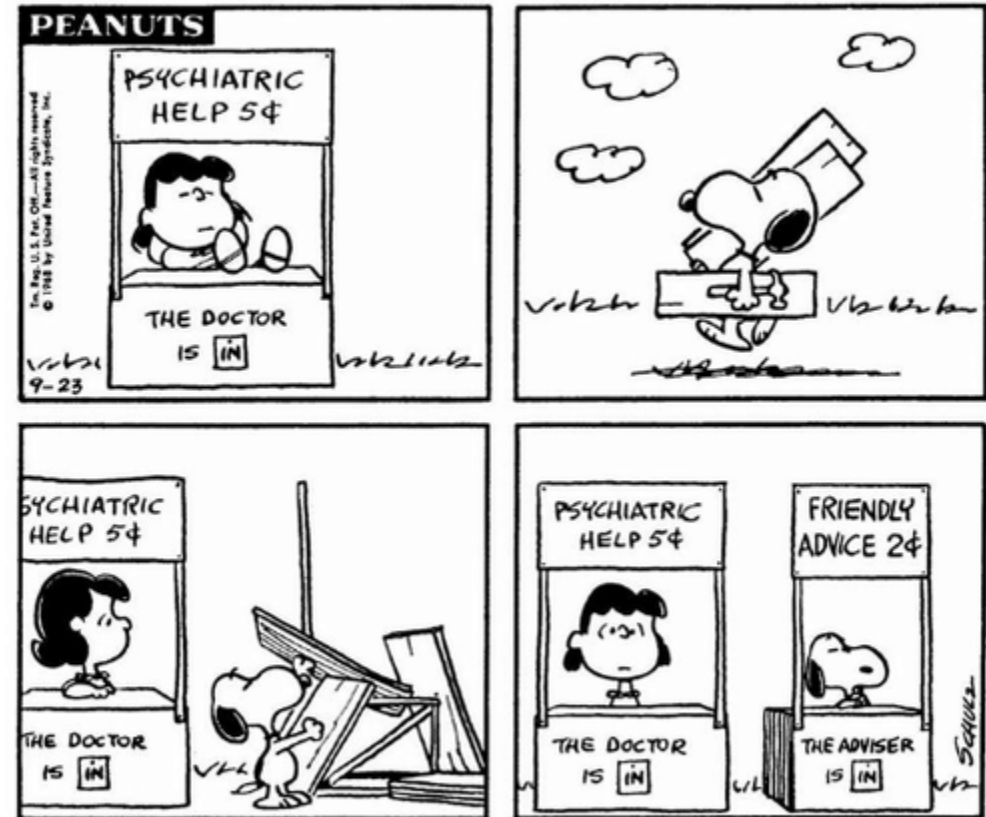
Approach

Calm

Caring

Curious

(but Cautious)



Approach – things to consider

Are they and others safe?

How unwell are they?

Why now?

What might be going on in their body?

What might be going on in their mind?

What might be going on in their environment?

The End



Questions?