### Person
- 3/4 men and 2/3 women who experience psychosis have a first episode before 35 years old. There is also an incidence peak for women in their mid-late 40s.
- Black Caribbean ethnicity increases the risk of psychosis in England (OR 4.87), although there are also higher rates in first and second generation immigrants, & people from North Africa.
- Main symptoms: hallucinations (hearing voices, see/feel/taste/smell things that aren’t there), delusions (strong beliefs that are untrue, perhaps being persecuted or being very powerful), confused thoughts, lack of self-awareness.
- A psychotic episode may be caused by an existing mental health disorder such as schizophrenia, bipolar disorder, stress, anxiety or depression.
- Alcohol or drug misuse (including withdrawal) can trigger an episode.

### Family & Friends
- People with psychosis are more likely to be victims of violence than perpetrators.
- Behaviours may have led them to be isolated from friends and family – from spending more time in their own room to losing all contact.
- May have experienced trauma in childhood (such as abuse).
- May be family history of psychosis.

### Environment
- Risk of homelessness, especially if person has been violent or aggressive.
- Likely to live in an urban area.
- Higher rates of first episode psychosis are found in young populations - such as universities.
- May be from an ethnic minority living in a predominantly white British area.
- Isolation - may have dropped out of college or be unemployed.
- Psychotic illness is 10 times higher in the prison population (9% remanded men & 21% remanded women, 6% sentenced men & 10% sentenced women).
- Ipswich and Forest Heath have higher predicted incidence than other Suffolk councils.

### Physical health
- An episode may be triggered by: lack of sleep, malaria, Alzheimer’s, Parkinson’s, multiple sclerosis, hypoglycaemia.
- Regular cannabis use appears to increase the risk of psychosis.

### Needs
- Early Intervention in Psychosis - treatment should start within 2 weeks of first episode.
- Treatment for people with an "at risk mental state" to reduce the likelihood of a "first episode of psychosis".

### Statistics
- Suffolk crude predicted incidence rate: 18.4 per 100,000 (16-64 year olds, Psymaptic.org), equivalent to: 83 predicted new cases of psychosis per year in Suffolk (people aged 16-64, CI 65,102).
- England weighted average incidence is 31.7 cases per 100,000 people.
- 1.01% prevalence of severe mental illness (all ages) in Gt Yarmouth & Waveney, significantly above England (0.92%). Ipswich & East Suffolk (0.85%), and West Suffolk (0.79%) are significantly lower than the national figure.
- GP prescribing of drugs for psychoses per 1,000 population is significantly higher in Great Yarmouth & Waveney (101.9) than England (62.4), which is significantly higher than Ipswich & East Suffolk (59.3) and West Suffolk (56.4).

### Current support
- Primary Care - GPs
- Norfolk & Suffolk NHS Foundation Trust
- Anti-psychotic medication
- Psychological treatment: Cognitive Behavioural Therapy

### Gaps
- Service specification that follows NICE guidance recommendations
- Train in risk assessment & care in a crisis
- Dual diagnosis
- Urgency of Early Intervention in Psychosis assessment

**Useful links**
- NICE Implementing Early Intervention in Psychosis guidance

**ICD-10:** Schizophrenia, schizotypal and delusional disorders (F20-F29)  
**DSM-V:** Schizoaffective disorder, Schizoid personality disorder, Schizophrenia