PEPP Psychoeducation Memo Sheet

Learning about psychosis



CANNABIS & PSYCHOSIS?

FREQUENT CANNABIS USE, IN SIGNIFICANT QUANTITIES AND STARTED AT AN EARLY AGE, ARE ALL FACTORS AS-SOCIATED WITH A GREATER RISK OF PSYCHOSIS What: Loss of contact with reality. Can be a symptom of several conditions

Who: About 3% of people will experience psychosis

When: Mostly in late adolescence and early adulthood

Why: Caused by an association between biopsychological vulnerabilities (genetics, heredity) and biopsychosocial stressors (lack of sleep, drug use, moving house, relationship breakup, school pressure, etc.)

Main symptoms:

♦ Hallucinations :

Perceiving through the senses a stimulation that does not exist

Delusions :

False belief (i.e. having magical powers, being followed by the mafia, etc.)

♦ Thought disorganization

Difficulty following the thread of the conversation, inventing new words, speech incoherence, etc.

Altered emotions

Frequent change of mood, affective neutrality

Negative symptoms

Apathy, lack of motivation and interest, poverty of speech, etc.

Treatment_

WITH TREATMENT, 80% RECOVER AFTER 1 YEAR, AND 90% AFTER 2 YEARS

Medication

Psychological coping strategies

Lifestyle and stress management

Support

PEPP Follow-up: 2-3 years

Objective: Functional recovery and quality of life

Medication:

- Antipsychotics (pill or injection)
- Antidepressants
- Mood stabilizers
- Medication to mitigate side effects

RELAPSES ARE COMMON IN THE RECOVERY JOURNEY



Our PEPP MUHC Program

The involvement

of loved ones is a protective factor

Case-manager:

Resource person for the youth/family Coordinates care. Regular follow-up

Psychiatrist or nurse practitioner:

Medical follow-up. Frequency varies according to the evolution

Availibilities:

8h-16h Monday to Friday

Multiple services available:

- ♦ PEPP groups
- Psychotherapy
- Music therapy
- Cognitive remediation
- ♦ Peer-support
- ♦ School counseling
- Work reintegration services
- ♦ Housing
- Legal resources



How can I support my loved one in the presence of symptoms?

Hallucinations or delusions:

- Recognize the emotions experienced (do not invalidate their experience)
- ♦ ↓ stimuli
- Distractions (earplugs, music, videos, etc.)
- Relaxation exercises
- Provide reassurance regarding their safety
- « In case of need » medication

Negative symptoms:

- Be patient (takes longer to recover)
- Encourage participation in activities and in socializing
- ♦ Accept refusal
- Recognize the effort needed for the activation

Cognitive symptoms:

- Limit choices
- Short and clear sentences
- Ask to repeat to make sure they understand
- Remove distractions when needs to focus.
- Adjust your expectations

while encouraging independence represents a challenge

Providing support

Resources:

♦ PEPP MUHC

Phone: 514 934-1934 *34599

Website: https://muhc.ca/pepp-home

- ◆AMI Québec (mostly anglophone): amiquebec.org
- ◆AQPAMM -L'association québécoise des parents et amis de

la personne atteinte de maladie mentale: aqpamm.ca

- ◆ Friends for Mental Health: asmfmh.org
- ◆ CCEIP—Canadian consortium for early intervention for psychosis:

www.earlypsychosisintervention.ca/



