If you refer to your community mental health service (Areas 1, 2 and 10) they will notify us and DETECT will initiate a comprehensive assessment within **72 hours**.







DETECT is a pilot project in the Eastern Region (Areas 1, 2 and 10) funded by the Hospitaller Order of St. John of God and the HSE and dedicated to reduce the duration of untreated psychosis and provide a specialised assessment for the community mental health teams of this region.

## Referring a patient with confirmed or suspected psychosis

You do not need to change your practice in any way. Simply, refer confirmed or suspected cases of psychosis to your community mental health service who will in turn notify us.









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## **Early Psychosis**

An information leaflet for **General Practitioners** 









The average length of **untreated** first episode psychosis in Dublin is 2 years

The longer the duration of untreated psychosis the greater the likelihood of suicidal acts

The longer the duration of untreated psychosis the less likelihood there is of full recovery

Early detection and effective treatment

are associated with substantially improved
outcomes

Identifying psychosis is comparable to other serious illnesses such as breast cancer or meningitis where early detection is crucial. However, General Practitioners often face the difficult task of having to specifically elicit the symptoms of psychosis.

The following questions may be of assistance.

## Questions phrased in a way to help you elicit psychotic phenomena from a patient

Sometimes people have experiences that other people can't really understand. For example, sometimes people feel like they are under the control of some person or force that they can't explain, ...that the radio or TV are referring to you, ...that others can read your mind?

Sometimes people hear noises or voices when no-one is speaking and there is nothing to explain what they are hearing? Do you ever have something like that happening? If yes, what do they say? How many are there? Do they seem to be having a conversation among themselves about you? Do they comment on what you are doing?

Is someone trying to hurt you or plot against you?

Is anything interfering with your thinking? Some people feel as if thoughts are being put into their heads that are not their own. Do you ever feel that your thoughts are broadcast out loud so that other people can hear what you are thinking, ...feeling that thoughts are being taken out of your head against your will?

If a patient answers yes to any of the above, it is likely they have a psychotic illness and require treatment.

Patients experiencing their first early psychotic symptoms may deny or conceal such experiences but if it is your clinical sense that a psychosis is emerging, please refer.

## **Prodromal Symptoms**

It is more difficult to identify the earlier (prodromal) symptoms of psychosis because prodromal symptoms are non-specific. Common prodromal symptoms are;

Deteriorating self-care	Ideas of reference
<ul> <li>Suspiciousness</li> </ul>	Social withdrawal
Impaired concentration	Decreased motivation
Suicidal thinking	<ul> <li>Impaired function at school or work</li> </ul>

Questions to elicit these earlier symptoms are provided in the F.E.P General Practice Guide (a one page laminated sheet available from our offices if you have not received one).

Keeping a watching brief on such symptoms is important.

If they are persistent and unexplained or involves suicidal thinking a specialist opinion is available from your local community mental health service who will involve DETECT if appropriate.