The Epidemiology of Schizophrenia

For the first time in one volume, an international team of leading researchers and practitioners have come together to provide a comprehensive, contemporary, epidemiological overview of this multifaceted and mysterious disorder and address some of the age-old questions it raises. What is the genetic contribution to schizophrenia? Do pregnancy and birth complications increase the risk for schizophrenia? Is the incidence of schizophrenia decreasing? Why is the rate higher among immigrants and in those born in cities? Controversial issues such as the validity of dimensional classifications of schizophrenia and the continuum between psychosis and ‘normality’ are explored in depth. Separate chapters are devoted to topics of particular relevance to schizophrenia such as suicide, violence and substance abuse.

Drawing together the findings from the social, genetic, developmental and classical epidemiology of schizophrenia, this text will prove an invaluable resource for both clinicians and researchers.

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The Epidemiology of Schizophrenia

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The epidemiology of schizophrenia / editors Robin M. Murray . . . [et al.].

Published by the Press Syndicate of the University of Cambridge
The Pitt Building, Trumpington Street, Cambridge, United Kingdom

Cambridge University Press
The Edinburgh Building, Cambridge CB2 2RU, UK
40 West 20th Street, New York, NY 10011-4211, USA
477 Williamstown Road, Port Melbourne, VIC 3207, Australia
Ruiz de Alarcón 13, 28014 Madrid, Spain
Dock House, The Waterfront, Cape Town 8001, South Africa

http://www.cambridge.org

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First published 2003

Printed in the United Kingdom at the University Press, Cambridge

Typeface Minion 10.5/14pt System QuarkXPress™ [se]

A catalogue record for this book is available from the British Library

Library of Congress Cataloguing in Publication data

The epidemiology of schizophrenia / editors Robin M. Murray . . . [et al.].

p. cm.
Includes bibliographical references and index.
ISBN 0 521 77540 X (hb.)

ISBN 0 521 77540 X hardback

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Preface

The aim of this book is to weave together the diverse threads of epidemiological research in schizophrenia into a single volume that captures the new and exciting themes that have been emerging over recent years. Diverse topics are juxtaposed to expose synergy and to reveal new avenues of work, while the power of the epidemiological method runs throughout the book. The sections correspond to different subdisciplines within epidemiology: social, genetic and developmental epidemiology, with additional sections for special and emerging issues relevant to the epidemiological study of schizophrenia. Despite the multiple authorship, we have tried to maintain a unified approach to epidemiological thinking throughout the book. Authors were asked to concentrate on findings that have been established through robust epidemiological investigation.

The book provides an overview of the current state of epidemiological knowledge and research in schizophrenia and is intended as a reference for those involved in research about schizophrenia or in clinical work with individuals who suffer from schizophrenia. We have placed much emphasis on findings that may elucidate the causes of this complex illness. No previous training in epidemiology is assumed and a glossary of epidemiological terms is included at the back of the book. The editors are based in the UK, the USA and the Netherlands and are all engaged in schizophrenia. We are very fortunate in having gathered together a talented and internationally respected group of contributors and we thank them for their enthusiastic participation.

The editors
Foreword

Schizophrenia may be the leading unsolved disease afflicting humans. Ranked fourth among causes of disability worldwide, the disease syndrome is associated with an immense financial burden for clinical care and living support across the 50 or so years that the average patient is identified as ill. Secondary costs in lost productivity, homelessness and entanglement with law enforcement are also high, but the most poignant burden of illness is experienced by patients and their families. Subtle impairments in information processing and neurointegrative function are often present from birth, curtailing achievement and social engagement years before hallucinations, delusions, disorganized thought and behaviour make public the presence of illness and the need for treatment. Erosion of the fundamental building blocks of human experience lead to a reduced level of functioning and quality of life. Stigma further pains and isolates the person who suffers from this illness. The picture is also complicated by low drive and restricted affect in many patients, and dysphoric mood and suicide in others. Patients are at increased risk for drug abuse, and intense nicotine consumption causes additional health problems. Although illness manifestations, treatment response, course pattern and functional outcome are quite variable, most life stories reflect serious adverse effects of schizophrenia.

Treatment remains a part-way technology. Antipsychotic drugs and supportive and educationally oriented psychosocial therapies reduce psychotic symptoms and relapse rate, but no treatment is documented as efficacious for primary negative symptom and cognitive impairments. Little wonder that the long-term disease effects were modified little during the 20th century. Neither cure or prevention is yet in sight. Investigation of this illness syndrome is especially challenging because human behaviour is complex, the human brain is the most difficult organ system to manipulate and access experimentally, tissue pathology is not yet determined, and model systems (including animal preparations) are partial and difficult to validate. Finally, it is not yet known whether one disease or many resides in the schizophrenia syndrome.

This view of schizophrenia issues a clarion call for epidemiology.
Substantial progress in understanding schizophrenia aetiopathophysiology is dependent on discovery of cause. It is here that the aetiological discipline of epidemiology provides the most compelling data. Skewed distribution of cases in identified populations has led to discovery of risk factors that, in turn, now organize the search for specific aetiological variables. The range of inquiry is necessarily broad, for increased risk for schizophrenia is associated with geography, season of birth, migration, urbanization, gestational insult, birth complications, physical and social developmental patterns and, of course, genes. There are also interesting comorbid groupings relating schizophrenia to violence, suicide, drug abuse and reduced lifespan. These studies in schizophrenia are profoundly important in understanding this disease (or diseases), but methodology and concepts in psychiatric epidemiology are not well understood by the nonspecialist. There has been considerable recent accumulation of knowledge in this field, and the time is right for a succinct and critical presentation of concepts, methods and facts regarding the epidemiology of schizophrenia.

Murray, Jones, Susser, van Os and Cannon have organized a text that is both thorough and readable. For the student of schizophrenia, it will provide a contemporaneous review and critical interpretation of the rich data generated in epidemiological investigations. For the generalist and the informed lay reader, it is plainly presented and highly informative. Each chapter stands on its own but is carefully integrated and cross-referenced with other chapters. With a distinguished group of authors, it is especially pleasing that the writing styles and chapter organization are consistent, providing seamless transitions from topic to topic. I found this text generously informative and believe that both the serious and the casual student of schizophrenia will profit from time spent with this book.

William Carpenter