



Integrated Health Topic:
Audio Hallucinations In Teens and Adolescents

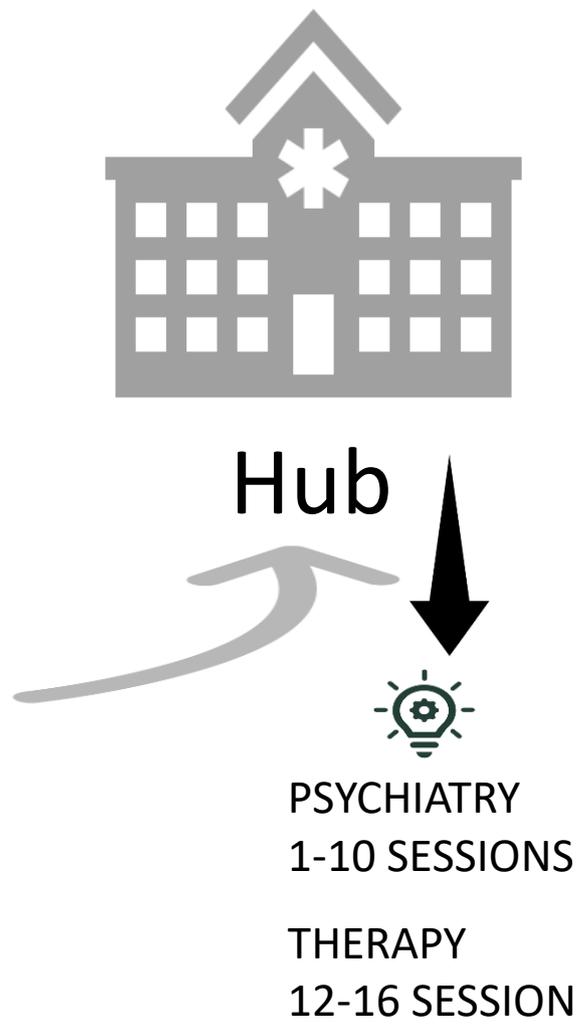
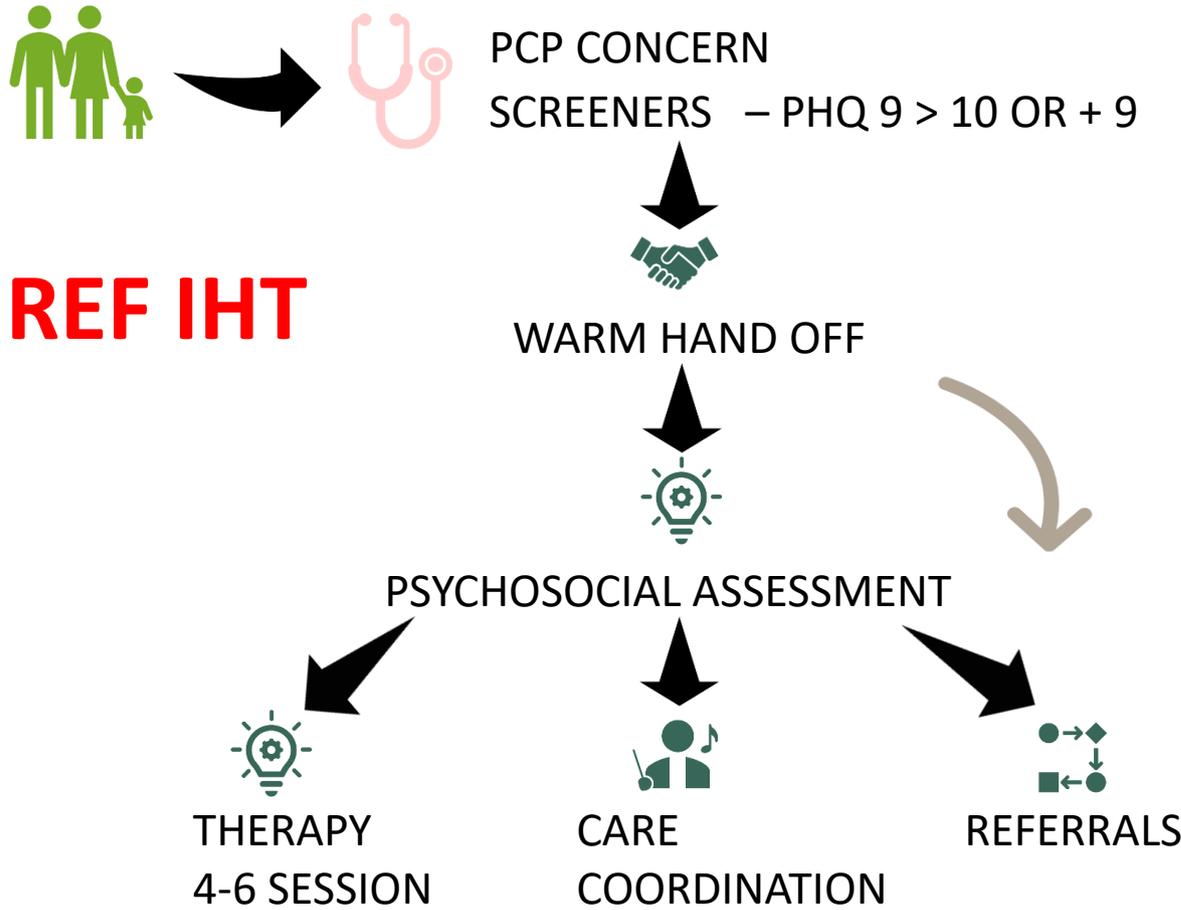
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Introduction

No disclosures



MHI Flow





Knowledge OWL

- PPTs, Recordings, Choice Articles



Agenda

- What is Psychosis?
- Schizophrenia
- Audio Hallucinations (AH) in teens and children
- What to do?

What is Psychosis?

- Definitions have shifted over time
- Collection of symptoms, typically chronic, often progressive
 - Symptoms can include
 - “Positive Symptoms”
 - Disorganized thinking, Audio Hallucinations, Visual Hallucinations, Ideas of reference, Paranoia. Delusions – be care with imaginary friends
 - “Negative” Symptoms
 - Social withdrawal, avolition, poverty of speech
 - ? Cognitive symptoms

Psychotic Illness and Depression

- “Psychotic Illness” – chronic, progress, strong genetics
 - Schizophrenia, Schizoaffective disorder
 - Bipolar disorder with psychotic features
 - Depression with Psychosis
 - Substance induced psychosis
- NOT Delirium, dementia, neurological syndromes (watch out for Autoimmune encephalitis)

Schizophrenia

- Schizophrenia symptoms generally start in the early to mid 20s
- Neurodevelopmental disease with strong genetic component
- Uncommon for children to be diagnosed with schizophrenia
 - **Early-onset schizophrenia (EOS) 14 – 18 yo**
 - < 1%
 - **Very early-onset schizophrenia (VEOS or COS) < = 13 yo**
 - extremely rare ~ 1 / 10,000 - 40,000



Schizophrenia

- Psychotic illness generally feels confusing, distressing, seems to be external phenomena beyond the individual's control.
- In contrast, Highly descriptive, detailed, organized, specific reports are less likely to represent true psychosis.
- Look for presence of disorganized thinking and behavior and deterioration in functioning.
- Overt signs of the illness should be evident on the MSE.



Schizophrenia

- Assessment for common comorbid conditions, such as substance abuse or cognitive delays.
- Life-threatening symptoms, such as suicidal behavior or severe aggressive behaviors, must be prioritized in the treatment plan.
- There are no neuroimaging, psychological, or laboratory tests that establish a diagnosis of schizophrenia or other psychotic illness.

Schizophrenia Workup

- When neurologic symptoms are present or an electroencephalogram.
- Toxicology screens are indicated for acute onset or exacerbations of psychosis when exposure to drugs of abuse cannot otherwise be ruled out.
- Genetic testing is indicated if there are associated dysmorphic or syndromic features.
- Specific syndromes or diseases.
 - amino acid screens for inborn errors of metabolism, ceruloplasmin for Wilson disease, porphobilinogen for acute intermittent porphyria), RPR, Heavy Metals.
- Broad screening for rare medical conditions is not likely to be informative in individuals.

Audio Hallucinations in Teens and Children

- Audio Hallucinations in children are common
 - **Up to 17 % of 9-12 Yo have reported AH/VH (Maijer et al., 2019)**
- Unlikely due to psychotic illness
 - **BUT** - patients with schizophrenia have been shown to have increased blood flow the Auditory Cortex during audio hallucinations on fMRI (Dierks et al., 1999)
- **It is likely that most youth with AH don't have a biological marker, or underling organic pathophysiology**



Causes for Auditory Hallucinations

- Depression
- Trauma
- Anxiety
- Adjustment
- Low Self esteem
- Psychological tendencies (jumping to conclusions)
- Cultural Factors



What to Do?

- “Curious-but-cautious” approach
- Normalize but further explore
- Safety
- Maslow’s Hierarchy
- Further psychological assessment
- Medications are only primary for confirmed psychotic illness
- Medications can be used as adjunct for depression

What to Do?

- Screeners can help
 - PHQ9, SCARED, ACES
 - Educate family to minimize stigma (this is common and doesn't necessarily mean this is schizophrenia etc)
 - Therapy referral
 - Psychiatric consultation, typically after therapy referral



What to Do?

- Resources
 - IHT
 - SMARTCARE
 - DOC TO DOC – 858-880-6405
 - Families (for therapy referrals) – 858-956-5900

References

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