

DISCERNING SCHIZOPHRENIA

PART 5 – FAILURE TO DIAGNOSE

The schizophrenia construct fails on at least five counts.

1. Failure to define

2. Failure to distinguish

3. Failure to diagnose

a. Malingering

b. Guilt

c. Divine judgment

d. Demon possession

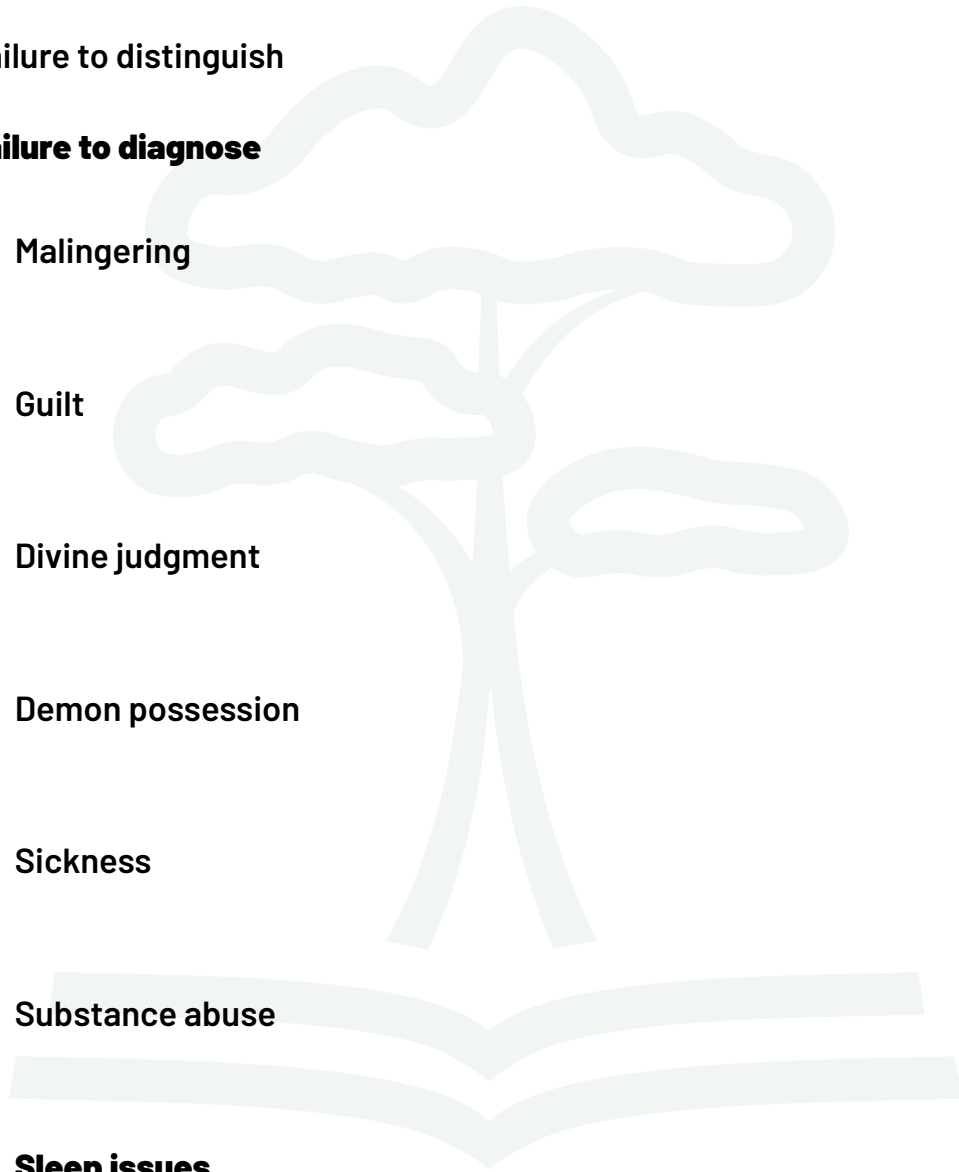
e. Sickness

f. Substance abuse

g. Sleep issues

4. Failure to discern

5. Failure to deliver



QUOTES

1. "If in the ascetic life early morning prayer was combined with late night vigils, there is little wonder that many early mystics saw what they thought were visions and heard what they supposed were revelations from God. Since they held a strong belief in present direct revelation and miracles, it is not surprising that the perceptual disturbances resulting from sleep loss that brought about hallucinations often took the form of (or were interpreted as) revelations. A study of the practices of the ascetics forces one to conclude that it was probably sin against their bodies, rather than holiness derives from ascetic practices, that was at the bottom of the mysticism so often associated with hermits, monastics, and others."¹
— Jay Adams
2. "The sobering reality is that severe sleep problems produce states of psychosis. The existence of poor or absent sleep easily explains why psychosis is correlated with heart disease, strokes, Huntington's disease, postpartum struggles and pain, valid genetic problems, encephalitis, and many other related actual medical issues."² — Daniel Berger II
3. "In 1959, a 32-year old disc jockey conducted a 'no sleep' marathon to raise money for the March of Dimes. He stayed awake for 200 hours, which is 8.33 days. After five days without sleep, he had some hallucinations, in which he saw flames pouring from a drawer and thought a doctor's tweed suit was composed of worms. Although he managed to complete day-time broadcasts, his nights were haunted by feelings that he was in mortal danger. He slept for thirteen hours at the end of the marathon and was back to normal (other than slight feelings of depression for several months)."³ — Robert D. Smith, M. D.
4. "When a counselee suffers from organic problems of a perceptual sort, it is important for both him and the counselor to recognize that nothing is wrong with his mind; he is *not* mentally ill. The problem is with the data that are fed to the mind by the senses. The brain operates properly but on the basis of incorrect data. In other words, if it looks (wrongly) to me like a chair has left the ground and is now moving rapidly through the air toward my head, my brain (rightly, on the basis of these wrong data) signals to my body to jump aside. The data are false, so the movement seems bizarre. The behavior is not bizarre, however; it is perfectly intelligible on the basis that has just been explained. There is no mental illness involved. Understandably, others who are getting true data by their senses begin to wonder about my sanity; before long I may wonder too.

Many people for various reasons get into situations where they have perceptual difficulties. If, for example, a counselee runs his hand over a table top that he knows (by looking) has a smooth surface, but it feels hairy, he may begin to wonder about his sanity. Yet there is nothing wrong with his sanity. The problem is that his sense of touch is providing inaccurate data as the result of a chemical disorder arising either from an original inside malfunction in

¹ Jay Adams, *The Christian Counselor's Manual* (Grand Rapids, MI: Zondervan, 1973), 386.

² Daniel Berger, *The Schizophrenic Unicorn* (Taylors, SC: Alethia International Ministries), 227.

³ Robert D. Smith, *The Christian Counselor's Medical Desk Reference* (Stanley, NC: Timeless Texts, 2000), 128.

his body chemistry, or as the result of chemical malfunction that has been caused by drugs, lack of sleep, etc.”⁴ — Jay Adams

5. “Two or more days of sleep loss may lead to any or all of the effects of LSD [a known hallucinatory drug].”⁵ — Jay Adams
6. “Researchers/psychiatrists for major psychiatric journals—*The Schizophrenia Bulletin*, *Molecular Psychiatry*, *Schizophrenia Research*, *The Psychiatric Times*, *Medscape Psychiatry*, *The American Journal of Psychiatry*, and *Frontiers in Pharmacology* among many others—all recognize that sleep disruption and insomnia are major underlying contributors or precise causes to the state of psychosis that leads psychiatrists and other clinicians to label many people as schizophrenic.”⁶ — Daniel Berger II
7. “Collectively, the evidence strongly suggests that sleep and circadian disruption is not only a symptom of schizophrenia but also plays an important causal role in this disorder. The alterations in dopamine signaling that occur in schizophrenia are likely to be central to this role. Dopamine is well-documented to be involved in the regulation of the sleep/wake cycle, in which it acts to promote wakefulness, such that elevated dopamine levels can disturb sleep.”⁷ — Anna Ashton
8. “Last night if you slept, and I very much hope that you did, when you went into dream sleep you became flagrantly psychotic, and, in fact, you did that several times throughout the night during those REM cycles.”⁸ — Matthew Walker
9. “There are, then, at least three known organic possibilities behind the bizarre behavior labeled ‘schizophrenia’: bodily (glandular) malfunction, drug abuse, sleep loss. All of these causes have been lumped under the unfortunate classification, schizophrenia.”⁹ — Jay Adams

⁴ Jay Adams, *The Christian Counselor's Manual* (Grand Rapids, MI: Zondervan, 1973), 385.

⁵ Jay Adams, *The Christian Counselor's Manual*, 387.

⁶ Daniel Berger, *The Schizophrenic Unicorn*, 68.

⁷ Quoted by Berger, *The Schizophrenic Unicorn*, 126.

⁸ Quoted by Berger in *The Schizophrenic Unicorn*, 404.

⁹ Jay Adams, *The Christian Counselor's Manual* (Grand Rapids, MI: Zondervan, 1973), 384–385.