

## **What is Anosognosia?**

Anosognosia is a condition where a person who has suffered a traumatic brain injury or has a mental illness is unaware of their impairments. This means they don't recognize their cognitive, social, physical, sensory, motor, or perceptual deficits caused by the disorder. Because they don't acknowledge their condition, they may not cooperate with treatment. Thus maintaining a positive approach, showing concern and empathy, and providing a structured environment are helpful to avoid negative outcomes.

Anosognosia isn't just denial; the brain can't process the fact that their thoughts and perceptions are not accurate. It's estimated that 50% of people with schizophrenia have this condition, which is one reason they might refuse medication.

The condition can be selective, meaning a person might recognize one deficit but not another, and it can vary in severity and depending on the situation. Moreover, it is not an all or nothing response – so in a moment someone can have a clear understanding of their diagnosis and in the second moment they think they are perfectly well. Mood can also affect the degree of anosognosia.

## **What are its symptoms and causes?**

At this moment, there is not sufficient research to determine the exact causes of anosognosia. However, it is generally more common in individuals who have suffered a traumatic brain injury. Anosognosia is also common in individuals with mental disorders such as schizophrenia. The symptoms of anosognosia vary widely between individuals and can differ in severity and context. The main symptom of the condition, however, is that patients can't recognize their illness.

## **How is it diagnosed?**

Anosognosia is usually diagnosed through a combination of questionnaires and observation of the patient's behaviour towards their diagnosis. It can often be differentiated from denial of illness by examining the individual's reaction to information about their disorder. For instance, a person with anosognosia might briefly recognize their disorder when confronted but soon forget and remain unaware of it. In contrast, individuals who deny their illness are aware of its existence and may become angry when reminded of their symptoms.

Diagnosing anosognosia can take several months, as individuals with mental and/or physical illnesses might create semi-reasonable explanations for their disorder or combine real and imagined details to form false answers.

## **Treatment options?**

In most cases, anosognosia often resolves over time. However, there are options to help navigate this condition:

1. **Cognitive Behavioral Therapy (CBT)**: While CBT might not directly alleviate anosognosia, it can help patients cope with their disorder.
2. **Motivational enhancement therapy (MET)**: is a type of talk therapy designed to help someone understand the benefits of changing their behaviour.
3. **Medications**: Individuals with schizophrenia often become more aware of their disorder when they take their medications.

### **The challenge?**

The main challenge with anosognosia is that patients often don't seek treatment. They may refuse to follow treatment plans, including taking medications, and might need to be coerced to do so. People with mental disorders and anosognosia are more likely to show violent behaviour than those without anosognosia.

While there is no way to prevent anosognosia, people with mental disorders often feel better when they take their medication.

### **What is the biology behind the condition?**

Everyone constantly updates their self-image based on new experiences. This process relies on the brain's frontal lobe to take in, organise, and integrate new information about ourselves. When the frontal lobe is damaged, as in illnesses like schizophrenia this ability is impaired, making it hard to update one's self-image properly.

### **Who is at risk?**

Anosognosia is much more common in individuals who have suffered head trauma or have a mental illness.

### **How does it relate to schizophrenia and psychosis?**

Poor insight, or anosognosia, is a symptom of schizophrenia. Around 57% to 98% of patients with schizophrenia experience anosognosia.

People with anosognosia believe they are perfectly healthy, making it hard for them to take their medication. This refusal worsens schizophrenia symptoms and increases the risk of psychotic relapse, violence, involuntary hospitalization, hallucinations, and suicidal thoughts. Frequent relapses cause more brain damage and longer recovery times. Therefore, it is crucial for patients with schizophrenia to take their medication, although this is often challenging.

### **Approaching the Situation**

- Family members, nurses, and healthcare practitioners should maintain a calm and positive attitude when dealing with a patient. Avoid confrontations about the illness and focus on the patient's goals, like keeping a job or living independently. This approach might encourage them to see a mental health professional, even if they don't think they need it, which can lead to therapy and other treatments.

For more information, Please refer to:

- <https://my.clevelandclinic.org/health/diseases/22832-anosognosia>
- <https://www.akinmh.com/articles/anosognosia-a-practical-explanation-for-families-navigating-schizophrenia/>