# Schizophrenia in Canada



## SCHIZOPHRENIA is a psychotic disorder that can affect the way a person interacts with and understands the world.

Symptoms of active schizophrenia include delusions, hallucinations, disorganized speech and/or behaviour, and impaired cognitive ability. The severity, duration and frequency of these symptoms can cause social and occupational challenges.

Causes of schizophrenia are not fully understood. Structural changes in the brain and genetics, combined with lifestyle and environmental factors, may play a role.

WHILE THERE IS NO CURE FOR SCHIZOPHRENIA, PROGRAMS AND TREATMENTS ARE AVAILABLE TO HELP MANAGE SYMPTOMS IN THE COMMUNITY AND AT WORK. REDUCING PUBLIC MISUNDERSTANDING AND FEAR OF THE DISEASE CAN REDUCE STIGMA AND SUPPORT AFFECTED INDIVIDUALS.2

# According to national data (2016-2017), of Canadians aged 10+:3

lout of 100 were living with diagnosed schizophrenia.



56% were men



44% were women



About 30% of newly diagnosed cases were aged **20 to 34** years old.

Among this group, the rate of new cases was more than 2x higher in men compared to women. In general, men experience an earlier onset of schizophrenia than women.



The all-cause **mortality** rate in people diagnosed with schizophrenia was 2.8x higher than those without.





Of people aged 1+, over 147,500 Canadians used health services for schizophrenia.3





**60%** were men **40%** were women

## HAVE RATES OF SCHIZOPHRENIA CHANGED OVER TIME?

2002-2016:

The number of Canadians living with diagnosed schizophrenia INCREASED

by an average of 3% per year.<sup>3</sup>



The number of new cases **DECLINED** during this period.3,4



The Canadian Chronic Disease Surveillance System (CCDSS) is supported by a pan-Canadian partnership between the Public Health Agency of Canada and all provinces and territories. Schizophrenia data in CCDSS are updated biennially.

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- 3. Canadian Chronic Diseases Surveillance System (CCDSS), August 2019. Schizophrenia (aged 10+); and use of health services for schizophrenia (aged 1+). CCDSS data are based on people with diagnosed schizophrenia who had contact with the health system during the data collection period, which may underestimate the total number of people diagnosed with schizophrenia during a lifetime. Saskatchewan data from year 2016-2017 were not available. Nunavut data were excluded before 2005-2006. Yukon data were excluded before 2010-2011. Crude rates were based on randomly rounded counts to an adjacent multiple of 10.
- Declining of incidence rates of schizophrenia may be influenced by changes in population health status, clinical diagnostic and screening practices, or administrative practices within provinces, such as physician billing methods. For more information: Hamm, N.C., Pelletier, L., Ellison, J., Tennenhouse, L., Reimer, K., Paterson, J.M., Puchtinger, R., Bartholomew, S., Phillips, K.A.M., and Lix, L.M. 2019. Original quantitative research trends in chronic disease incidence rates from the Canadian Chronic Disease Surveillance System. Health promotion and chronic disease prevention in Canada: research, policy and practice, 39(6-7), 216.



