



Schizophrenia: The Consequence of Psychiatry's Neglect of Moral Medicine

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ABOUT THE STUDY

Schizophrenia is a mental disorder characterized by symptoms such as delusions, hallucinations, and disorganized thinking. It is one of the most challenging mental disorders to diagnose and treat, and the causes of the disorder are still unclear. This commentary will argue that schizophrenia is a symptom of psychiatry's reluctance to enter the moral era of medicine.

Schizophrenia and psychiatry's reluctance to enter the moral era of medicine

The moral era of medicine refers to a paradigm shift in medicine that occurred in the mid-20th century. This shift involved recognition of the importance of ethical principles in medical practice, such as patient autonomy, beneficence, non-maleficence, and justice. The moral era of medicine challenged the traditional biomedical model of medicine, which focused on the biological aspects of disease and the treatment of symptoms rather than the patient's overall well-being.

Schizophrenia is a mental disorder that has been traditionally approached through a biomedical model of medicine. The focus has been on the biological causes of the disorder, such as genetics and brain chemistry, and the treatment of symptoms through medication. This approach has led to a limited understanding of the disorder and a narrow focus on symptom relief rather than the patient's overall well-being.

Furthermore, the stigma associated with schizophrenia has contributed to psychiatry's reluctance to enter the moral era of medicine. Schizophrenia has been associated with violence, unpredictability, and dangerousness, leading to stigmatization and discrimination against people with the disorder. This stigma has led to a focus on controlling the symptoms of schizophrenia rather than addressing the underlying causes of the disorder.

The biomedical approach to schizophrenia has also led to a reliance on medication as the primary treatment for the disorder. While medication can be effective in reducing the symptoms of schizophrenia, it does not address the underlying causes of the disorder, such as social isolation, trauma, and discrimination. This narrow focus on medication as the primary treatment for schizophrenia has led to a neglect of psychosocial interventions, such as cognitive-behavioural therapy, family therapy, and social support that can help people with schizophrenia recover and lead fulfilling lives.

The reluctance of psychiatry to enter the moral era of medicine has also led to a lack of focus on the social determinants of mental health. Social determinants of mental health refer to the social, economic, and environmental factors that influence mental health outcomes. Factors such as poverty, social isolation, discrimination, and trauma can increase the risk of developing mental health disorders such as schizophrenia. However, the biomedical approach to schizophrenia has ignored these factors, leading to a narrow understanding of the disorder and a focus on symptom relief rather than the patient's overall well-being.

In conclusion, schizophrenia is a symptom of psychiatry's reluctance to enter the moral era of medicine. The biomedical approach to schizophrenia has led to a limited understanding of the disorder, a narrow focus on symptom relief, and a neglect of psychosocial interventions and social determinants of mental health. Addressing the underlying causes of schizophrenia, such as social isolation, trauma, and discrimination, requires a paradigm shift in psychiatry towards a more holistic approach that considers the patient's overall well-being and the social determinants of mental health. Only then can we hope to provide effective treatment for people with schizophrenia and reduce the stigma and discrimination associated with the disorder.

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