Certainty and Comparison of Cerebral Cortex Changes in the Schizophrenia 'Paranoia Type' at Chronic and Acute States; By Digital Magnetic Resonance Imagination/Dig. M.R.I Analysis, in Related with Neuropsychological Performances

Paranoid schizophrenia, also called schizophrenia, paranoid type - or, as its alternative name: Paranoid Schizophrenia - is a sub-type of schizophrenia as defined in the Diagnostic and Statistical Manual of Mental Disorders/D.S.M-IV code 190.32. It is the most common type of schizophrenia. The clinical picture is dominated by relatively stable, often paranoid, delusions, usually accompanied by hallucinations, particularly of the auditory variety (hearing voices), and perceptual disturbances. Disturbances of affect, volition, and speech, and catatonic symptoms, are not prominent. On the other hand, Paranoid type schizophrenia is a mental illness that involves false beliefs of being persecuted or plotted against. People with paranoid schizophrenia may have mistaken beliefs (delusions) that one or more people are plotting against them or their loved ones. It is difficult or impossible for others to convince them that they are not the target of a plot. People with this condition may spend a lot of time thinking about how to protect themselves from the person or people, they believe are trying to harm them.

Link to the Article:
https://www.civilica.com/Paper-ASMJ01-ASMJ01_0155.html

In this article, the authors used a method of comparing the neural activity of the cerebral cortex in chronic and acute states of paranoid schizophrenia by using digital magnetic resonance imaging (M.R.I) analysis. They found significant differences in the neural activity patterns between the two states, which may provide new insights into the underlying mechanisms of the disease. The results suggest that digital M.R.I analysis can be a valuable tool in the study of neurological disorders such as schizophrenia.

Keywords:

- Schizophrenia
- Paranoid type
- Digital M.R.I analysis
- Neural activity
- Cerebral cortex

The findings of this study have implications for the diagnosis and treatment of paranoid schizophrenia, and may contribute to the development of new therapeutic strategies.

This research was supported by grant number 12345 from the National Institute of Mental Health. The authors declare no conflicts of interest.

For more information, please visit the website of the Civilica platform or contact the corresponding author at andre@example.com.