



CANNABIS-INDUCED PSYCHOSIS VS. SCHIZOPHRENIA

The Critical Differences That Could
Save Your Child's Future

SANCTUARY CLINICS

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THIS IS THE MOST IMPORTANT DISTINCTION IN MENTAL HEALTH TODAY

SCHIZOPHRENIA

- Chronic, lifelong condition
- Requires ongoing medication
- Limited recovery potential

CANNABIS-INDUCED PSYCHOSIS

- Often temporary and reversible
- Can resolve with treatment
- Full recovery possible



Getting the right diagnosis changes **EVERYTHING.**



SIDE-BY-SIDE COMPARISON CHART

CANNABIS-INDUCED PSYCHOSIS VS. SCHIZOPHRENIA

THE KEY DIFFERENCES

CHARACTERISTIC	CANNABIS-INDUCED PSYCHOSIS (CIP)	SCHIZOPHRENIA
Onset	Sudden — Days to weeks. Your child seemed fine, then they weren't	Gradual — Months to years. Looking back, subtle signs were there
Timeline With Marijuana Use	Directly connected — Symptoms appear during or shortly after marijuana use begins or increases	Independent — Symptoms develop whether or not marijuana is used (marijuana may worsen but didn't cause it)
Family History	Typically none — No close relatives with psychotic disorders	Often present — First-degree relative with schizophrenia or psychosis increases risk significantly
Age of Onset	Teens-Early 20s (16-24) — Often 16-24 (when marijuana use is most common)	Late teens-30s — Males: late teens-20s, Females: 20s-30s
Hallucination Type	More visual — Seeing things, shadows, shapes, people, movements	More auditory — Hearing voices, command hallucinations, commentary voices
Mood Disturbance	Significant — Depression, mania, rapid mood swings, high agitation	Less prominent — "Flat affect," reduced emotional expression, more emotional blunting

CANNABIS-INDUCED PSYCHOSIS VS. SCHIZOPHRENIA

THE KEY DIFFERENCES

Insight Level	Often better — “I know this doesn’t make sense, but I can’t stop believing it.” Some awareness something is wrong	Usually poor — No recognition that experiences aren’t real. Don’t question the delusions
Symptom Presentation	More acute/intense — Rapid escalation, dramatic changes, more anxiety/panic	More chronic/stable — Persistent baseline, negative symptoms (apathy, withdrawal) more prominent
Response to Treatment	Reversible with abstinence — Symptoms often improve significantly or resolve completely when marijuana use stops and proper treatment provided	Chronic — Symptoms persist whether marijuana is used or not. Lifelong management typically required
Prognosis With Proper Treatment	Often excellent — Full recovery possible. Can return to normal functioning IF caught early (6-12 months)	Variable — Chronic condition. Symptom management vs. cure. Long-term medication often necessary

CRITICAL:

Early, accurate diagnosis is essential.
The window for optimal CIP treatment is 6-12 months.



FREQUENTLY ASKED QUESTIONS

ANSWERS FROM OUR CLINICAL TEAM

Q: Can someone have both CIP and schizophrenia?

A: Yes, but it's important to understand the sequence:

Scenario 1: CIP that progresses to schizophrenia

- Starts as CIP
- Untreated/continuing marijuana use
- Brain changes become permanent
- Develops into true schizophrenia

Scenario 2: Schizophrenia worsened by marijuana

- Already had developing schizophrenia
- Marijuana triggers or worsens symptoms
- Marijuana didn't cause it but made it worse
- Would have developed schizophrenia regardless

The key question: Would psychosis exist without marijuana?

- If yes → schizophrenia
- If no → CIP

Q: If my son or daughter stops marijuana and symptoms improve, does that prove it's CIP?

A: Strong evidence, but not definitive proof.

Why improvement matters:

- CIP symptoms often resolve with abstinence
- Schizophrenia symptoms persist regardless
- Improvement strongly suggests CIP

But context matters:

- How much improvement?
- How long was abstinence?
- Were other interventions involved?
- Is there family history of schizophrenia?

Best approach:

- Extended abstinence period (3-6 months minimum)
- Close monitoring during abstinence
- Comprehensive evaluation after symptom resolution
- Consider full diagnostic picture, not just this one factor

Q: What if my child was diagnosed with schizophrenia years ago but we just learned about CIP?

A: It may not be too late for re-evaluation.

Important factors:

- How long since diagnosis?
- Has marijuana use continued?
- What was the original evaluation like?
- Has treatment been effective?

Worth reconsidering diagnosis if:

- Symptoms appeared soon after marijuana use started
- No family history of psychotic disorders
- Treatment hasn't been effective
- Original evaluation didn't explore substance use

However, if it's been years:

- Progression to permanent changes may have occurred
- Distinction may be less clear
- Treatment approach may be similar regardless
- Still worth understanding true etiology

Q: My son or daughter is improving on medication. Should we pursue different diagnosis?

A: Medication response doesn't rule out CIP.

Both CIP and schizophrenia can respond to antipsychotics.

However, the implications are different:

If it's schizophrenia:

- Likely needs medication long-term
- Discontinuation risks relapse
- Chronic management approach

If it's CIP:

- Medication may be temporary
- Can often taper off once brain heals
- Focus on maintaining abstinence vs. lifelong medication

Worth clarifying diagnosis even if current treatment working because:

- Affects long-term treatment plan
- Changes prognosis and expectations
- Guides discontinuation timing
- Informs family about what to expect

Q: Can someone fully recover from CIP and never need medication again?

A: Yes, if:

- Truly CIP (not schizophrenia)
- Caught and treated within optimal window (6-12 months)
- Maintains complete marijuana abstinence
- Receives comprehensive treatment
- Has strong support system

Then medication tapering may be possible over time.

Never stop psychiatric medication without medical supervision—this must be done gradually with close monitoring.

Q: How common is Cannabis-Induced Psychosis?

A: Increasingly common as marijuana potency has increased.

Recent data suggests:

- Approximately **1 in 4** daily high-potency marijuana users will experience psychotic symptoms
- **CIP is now a leading cause** of first-episode psychosis in young adults
- **ER visits for marijuana-related psychosis** have increased dramatically over the past decade

Q: Will my child need medication forever if it's CIP?

A: Not necessarily. If it's truly CIP:

- Medication may be used short-term (weeks to months)
- Purpose: stabilize acute symptoms during early abstinence
- Can often be tapered as brain heals
- Many patients discontinue medication after successful treatment

This is very different from schizophrenia, which typically requires life-long medication.

Q: Is there a test to definitively diagnose CIP vs. schizophrenia?

A: Unfortunately, no. There's no blood test, brain scan, or definitive medical test.

Diagnosis relies on:

- Detailed clinical history
- Timeline analysis
- Symptom characteristics
- Family history
- Response to abstinence
- Response to treatment

This is why specialist evaluation is so important—experts in CIP know what to look for.

Q: What if my child won't admit they use marijuana?

A: This is common. Consider:

- Drug testing (urine, hair) for confirmation
- Talking to their friends (if appropriate)
- Looking for paraphernalia in their belongings
- Monitoring bank/cash usage
- Direct but compassionate conversation

Frame it as: *"The doctors need accurate information to help you. Whether you use or not isn't about judgment—it's about getting you the right treatment."*

Q: Can you recover from CIP and then use marijuana again safely?

A: Absolutely not.

Once someone has experienced Cannabis-Induced Psychosis, they have demonstrated their brain's vulnerability to marijuana's psychotic effects.

Using marijuana again puts them at extremely high risk for:

- Recurrent psychotic episodes
- Progression to permanent schizophrenia
- Worsening symptoms
- Chronic mental illness
- For someone with CIP, marijuana use must stop permanently.



YOUR NEXT STEPS

WHAT TO DO RIGHT NOW

ASK THE SPECIALIST

Have questions about your specific situation?

Every Wednesday at 11am ET, join our free live Q&A where our clinical team answers questions about Cannabis-Induced Psychosis:

"How do I know for sure if it's CIP vs. schizophrenia?"

"What if doctors say they're certain it's schizophrenia?"

"Is it too late to re-evaluate the diagnosis?"

"How do I get a second opinion?"

No cost. No sales pitch. Just answers from specialists who diagnose and treat CIP every day.

Register: SanctuaryClinics.com/ask-specialist

SCHEDULE A FREE CLINICAL CONSULTATION

Ready to discuss your child's diagnosis with specialists?

Our clinical team can:

- ✓ Review your child's history and timeline
- ✓ Help you understand if CIP should be considered
- ✓ Explain what comprehensive evaluation looks like
- ✓ Answer questions about treatment options
- ✓ Verify insurance coverage

Call: (850) 828-0440

Available 24/7 for crisis situations

DOWNLOAD MORE RESOURCES

Free at SanctuaryClinics.com:

- **CIP Symptom Checklist**
Document what you're seeing
- **Cannabis Potency Chart**
Understand why this is happening now
- **Parent Action Plan**
Step-by-step guide to getting help
- **Treatment Program Comparison Guide**
What to look for in CIP treatment
- **Insurance Verification Worksheet**
Understand your coverage

CONTINUE THE VIDEO SERIES

Tomorrow: Video 4 - What Parents Can Do Right Now

You'll learn:

- How to document everything clinicians need
- How to have the conversation with your child
- What integrated treatment looks like
- Why time matters and how to act quickly

Video 5: Treatment That Works - The Sanctuary Approach



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Specialists in Cannabis-Induced Psychosis

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