



# CANNABIS-INDUCED PSYCHOSIS VS. SCHIZOPHRENIA

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The Critical Differences That Could  
Save Your Child's Future

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

# CANNABIS-INDUCED PSYCHOSIS VS. SCHIZOPHRENIA

## THE KEY DIFFERENCES

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



## SANCTUARY CLINICS

**Specialists in Cannabis-Induced Psychosis**

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