Psychotic disorders are clinically characterized by delusions, hallucinations, thought disorder and affective symptoms. Such symptoms can regularly be seen in the group of schizophrenic diseases, but also after organic brain lesions by tumours, infections or traumatic brain tissue destructions. Common to all these psychotic syndromes is that most pronounced brain tissue alterations can be seen in limbic structures, especially in the anterior and medial temporal lobe, or in higher cortical association areas closely related to the limbic system (so-called paralimbic structures).

Moreover, the high prevalence of schizophrenia-like symptoms in phencyclidine or ketamine induced psychosis as well as in NMDA autoimmune encephalitis indicates that the NMDA subtype of glutamate receptors might play a major role in the pathogenesis of psychotic disorders.

Recently, pathology of glial cells (oligodendrocytes, astrocytes, microglia cells) was found in schizophrenia as well as indicators of autoimmune / inflammatory components suggesting that beside pathology of neurons glial cells and chronic inflammatory factors may contribute to the etiology of psychotic syndromes.