Depression: General Information

Life is full of good times and bad, of happiness and sorrow. But when you are feeling "down" for more than a few weeks or you have difficulty functioning in daily life, you may be suffering from a common, yet serious medical illness - called clinical depression.

Anyone Can Have Clinical Depression
Every year more than 18 million Americans suffer from clinical depression. Young or old, man or woman, regardless of race or income - anyone can experience clinical depression. Depression can cause people to lose the pleasure from daily life, it can complicate other medical conditions - it can be serious enough to lead to suicide.

Yet, this suffering is unnecessary. Clinical depression is a very treatable medical illness. So why don't many people seek the help they need?

Clinical depression often goes untreated because people don't recognize the many symptoms. They may know some symptoms, such as sadness and withdrawal, but they are unaware of others, including anxiety, irritability and sleeplessness. Some incorrectly believe that only people whose depression lasts for months, or who have completely lost their ability to function, have "real - or "clinical" - depression.

Many people even wrongly think that depression is "normal" for older people, young adults, new mothers, menopausal women, or those with a chronic illness. The truth is, clinical depression is never "normal," no matter what your age or life situation.

Also, people need to know that treatment for clinical depression really works - and to learn how to go about finding the treatment they need.

Depression Is Not Grief
It is normal to feel sadness after the death of a friend or family member. Indeed, most of us experience great sadness at times in our lives, perhaps from a divorce, moving away from family and friends, losing a job, even losing our good health due to illness. But, most people cope with these losses without becoming clinically depressed. If the sadness or depressed mood continues for a long period of time, the person may be experiencing clinical depression, and should seek professional help.

You Cannot Treat Clinical Depression On Your Own
Some people are embarrassed to get help for depression, or they are reluctant to talk about how they are feeling. Others believe that depression will just go away on its own, and that they should just "tough it out." Such views are simply wrong: like any other serious illness, clinical depression requires professional treatment. Talking to friends, family members and clergy can
often give people the support needed when going through life's difficult times. However, for those with clinical depression, such support is no substitute for the care of a health professional. Remember, clinical depression is a serious illness that you cannot treat on your own.

You May Need To Help Your Loved One
People with clinical depression often do not have the motivation or energy to seek treatment. This means that it is very important that friends and family help. The best way to express concern when someone is depressed is by guiding the depressed person to seek treatment. Depression can even cause confusion and withdrawal. Therefore, it may be helpful for family or friends to accompany the depressed person to the initial health professional's evaluation, to ask questions and note instructions.

Learning To Recognize Clinical Depression
Does This Sound Like You?
"For weeks, I was always on the verge of tears. I thought I had fallen into a black hole that I couldn't get out of. Was I going to feel this way forever?"

"Even though I was always tired, I kept waking up early in the morning. And, I completely lost my appetite. Everyone irritated me: people at work, my husband and kids."

"My family and friends noticed that I just wasn't "myself" anymore. I didn't enjoy the things I used to: playing golf, going out, and even having sex. It became so difficult to concentrate at work that I felt worthless, like I couldn't do anything well."

Not everyone experiences clinical depression in the same way. Different people have different symptoms. To help you decide whether an evaluation for clinical depression is needed, review the following checklist of symptoms and mark the symptoms that apply. See your doctor or a qualified mental health professional if you experience FIVE or more of these symptoms for longer than two weeks or if the symptoms are severe enough to interfere with your daily routine. A thorough physical examination to rule out other illnesses may be recommended.

Symptoms Of Clinical Depression:

- A persistent sad, anxious or "empty" mood
- Sleeping too little or sleeping too much
- Reduced appetite and weight loss, or increase appetite and weight gain
- Loss of interest or pleasure in activities once enjoyed
- Restlessness or irritability
- Persistent physical symptoms that don't respond to treatment (such as headaches, chronic pain, or constipation and other digestive disorders)
- Difficulty concentrating, remembering, or making decisions
- Fatigue or loss of energy
- Feeling guilty, hopeless or worthless
- Thoughts of death or suicide

Clinical Depression Is One Of The Most Treatable Illnesses
Clinical depression is very treatable and getting treatment can save lives. In fact, more than 80 percent of people with depression can be treated successfully with medication, psychotherapy or a
combination of both. Only qualified health professional can diagnose if someone has clinical depression.
But, knowing the symptoms of clinical depression can help you talk with a health professional. As with many illnesses, if treatment is needed, the earlier it begins, the more effective it can be. And, early treatment increases the likelihood of preventing serious recurrences.

The most commonly used treatments are antidepressant medications, psychotherapy, or a combination of the two. The choice of treatment depends on how severe the depressive symptoms are and the history of the illness. When you talk to your doctor or mental health professional, make sure they are informed about all treatment options.

**Psychotherapy**
Talking with a trained mental health professional can help teach better ways of handling problems. Therapy can be effective in treating clinical depression, especially depression that is less severe. Scientific studies have shown that short term (10-20 weeks) courses of therapy are often helpful in treating depression.

*Cognitive-behavioral therapy* helps change negative styles of thinking and behaving that may contribute to clinical depression.

*Interpersonal therapy* focuses on dealing more effectively with other people, working to change relationships that can cause or worsen clinical depression.

**Medication**
Recent research strongly supports the use of medication for the more severe episodes of clinical depression. Antidepressant medication acts on chemical pathways of the brain. There are many very effective antidepressants. The two most common types are selective serotonin reuptake inhibitors (SSRIs) and Tricyclic antidepressants (TCAs).

Antidepressant medications are not habit-forming. It may take as little as one week or as many as eight weeks before you notice an improvement. It is usually recommended that medications be taken for at least 4 to 9 months after the depressive symptoms have improved. Those with chronic depression may need to stay on medication to prevent or lessen further episodes.

A doctor who knows about treating clinical depression should monitor people taking antidepressants to ensure the best treatment with the fewest side effects.

**Electroconvulsive Therapy (ECT)**
Electroconvulsive therapy (ECT) may be recommended in cases when people cannot take or do not improve with medication; when the risk of suicide is high; or if someone is debilitated due to another physical illness. ECT has been refined, so it is a safer and more effective treatment that can save lives. It remains a controversial treatment for some people who may experience troubling side effects such as memory loss. A thorough discussion between patient and doctor needs to take place when ECT is being considered.

**Commonly Asked Questions About Clinical Depression:**

*How do I get help for clinical depression?*
The first step is to talk to your doctor. Bring in your checklist and explain the symptoms you have been experiencing. He or she may recommend a physical checkup to fin if there is any underlying physical cause for the depressive symptoms. If clinical depression is diagnosed, then your
A physician, health maintenance organization or a local mental health association may make referrals to a mental health specialist. Mental health professionals include psychiatrists, psychologists, counselors and social workers. Psychiatrists can prescribe antidepressant drugs because they are physicians. Mental health professionals, who are not physicians, can provide psychotherapy and often work with psychiatrists and family physicians to ensure that their patients receive medications they may need.

**How do I pay for treatment for clinical depression?**

If you have a private insurance or a health maintenance organization (HMO) plan, your cost for treatment may be covered. A mental health benefit should be included in your overall health benefit. Contact your health insurance provider for details on your complete coverage for treatment of clinical depression.

If you do not have insurance or are unable to afford treatment, your community may have publicly-funded mental health centers and other mental health programs that calculate the cost of many services according to what you can afford to pay. This is called sliding scale or sliding-fee basis of payment. So, even if you have little or no money, services may still be available. Some mental health professionals in private practice may also accept patients on a sliding-fee basis.

**What are the causes of clinical depression?**

Many things can contribute to clinical depression. Sometimes, a number of factors seem to be involved, while for others a single factor appears to trigger the illness. In some cases, people become depressed for no apparent reason. Regardless of the factors involved, clinical depression needs to be diagnosed and treated.

- People with depression typically have too little or too much of certain brain chemicals, called "neurotransmitter." Changes in these brain chemicals may cause, or contribute to, clinical depression.

- Women are twice as likely as men to experience clinical depression. While the reasons for these are still unclear, they may include the hormonal changes women go through during menstruation, pregnancy, childbirth and menopause. Other reasons may include the stress of the many roles and responsibilities women have, including homemaker, mother, employee and spouse. And, in some cases, being a victim of abuse, of poverty or of low self-esteem may contribute to an increased risk of clinical depression.

- Clinical depression is more likely to occur with certain illnesses, such as cancer, stroke, heart disease, Parkinson's disease, Alzheimer's disease, diabetes and hormonal disorders. This is called "co-occurring depression." Co-occurring depression can often be treated in addition to the physical illness. It is important that you report any depressive symptoms to your doctor.

- Some medications can actually cause clinical depression, therefore, it is important to tell your doctor all the medications you are taking. A family history of clinical depression increases the risk for developing the illness. However, clinical depression can also occur in people who have had no family members with depression.

- People with negative thinking patterns - people who are pessimistic, have low self-esteem, worry too much or feel they have little control over life events - are more likely to develop clinical depression.
Difficult life events, including divorce, financial problems, moving to a new place, the death of a loved one, or any significant loss, may trigger an episode of clinical depression.

Making The Most Of Your Treatment

Make treatment a partnership. 
Treatment is a partnership between the person with clinical depression and their health care provider. Be sure to discuss treatment options and voice your concerns with your doctor or therapist. Become informed - ask questions and demand answers.

Continue your treatment. 
Don't stop taking your antidepressant medication too soon or without your doctor's knowledge. Carefully follow your doctor's instructions to be sure you take a sufficient dose. Inform your doctor about any side effects.

Change your treatment or get a second opinion. 
Treatment changes may be necessary if there is no improvement after six to eight weeks of treatment, or if symptoms worsen. Trying another treatment approach, another medication, or getting a second opinion from another health care professional may be appropriate.

Join a patient support group. 
In addition to treatment, participation in a patient support group can also be very helpful during the recovery process. Support group members share their experience - with the illness, learn coping skills and exchange information on community providers.

Take care of yourself. 
Take good care of yourself during treatment for clinical depression. Be sure to get plenty of rest, sunshine, and exercise and eat nutritious, well-balanced meals. Reducing the stress in your life will also help. Many people also find strength and support through their religious and spiritual affiliations. Share this pamphlet with your family and friends and ask for extra support and understanding.

You can enjoy your life again! With recognition and treatment, clinical depression can be overcome.

Mental Health America of Franklin County is a private, not-for-profit organization, established in 1956. We help people navigate the mental health system. We are dedicated to promoting mental health in Franklin County through advocacy, education, and support services. Our programs include: information and referral to community mental health and alcohol/drug services; free support groups for people with mental illness and their families; an Ombudsman program that assists clients in navigating the mental health and alcohol/drug system; mental health screenings in English and Spanish; Pro Bono Counseling Program where underinsured and uninsured individuals can receive free counseling; community and professional mental health education including Get Connected; maternal mental health support and advocacy (POEM); and a quarterly newsletter featuring legislative updates and new happenings at MHAFC. We receive funding from the Franklin County ADAMH Board, United Way of Central Ohio, individuals, foundations, and corporations. To become a member or find out more information, please visit us online at www.mhafc.org.