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Guide to Depression

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Depression



Everyone feels 'low,' 'down in the dumps,' 'blue,' or like they 'can't be bothered' from time to time and you may well describe this as being depressed. These ups and downs of life are common and normal and generally pass quickly without seriously affecting your life. However true clinical depression is more extreme.

Clinical depression is a mood disorder that causes distressing symptoms that affects how you think, feel and handle daily activities such as sleeping, eating and working. To be diagnosed with clinical depression, symptoms must be present for most of the day, nearly every day for at least 2 weeks and are severe enough to interfere with your normal day to day activities.

The key symptoms are:

- Persistent sadness or low mood – this may be with or without weepiness
- Marked loss of interest or pleasure in activities

Other symptoms include tiredness or loss of energy, disturbed sleep, changes in appetite, agitation or slowing movements, poor concentration, or indecisiveness – even simple tasks you've done before seem difficult, feeling worthless and having recurring thoughts of death. This is not usually a fear of death more a preoccupation with death and dying.

To be diagnosed with **clinical depression** you must have at least 5 out of these 9 symptoms with at least one core symptom and they must cause distress or impair your functioning such as affecting your work performance and are not due to a medication side-effect, drug, or alcohol misuse or to a physical condition such as an underactive thyroid.

With depression it is also common to develop physical symptoms such as headaches, palpitations when you feel your heart racing, chest pains as well as general aches and pains. In fact, it is often because of these physical symptoms that people attend the doctors as they are concerned that they may have a physical condition – when it turns out that it has been depression that has been the cause of their symptoms.

It should be noted that the opposite is also true and that sometimes serious physical conditions can also result in the development of depression.

Some people with severe depression also develop delusions and/or hallucinations. These are called psychotic symptoms. Others can experience swings between mood states from depression to mania. This is known as bipolar disorder and can significantly affect mood. However, as the mania can also cause psychotic symptoms it can also be considered a psychotic disorder.

Mild	Moderate	Severe
<p>Normally have 5 of the symptoms described to be diagnosed</p> <p>Individual would not have more than six of these symptoms</p> <p>Normal functioning is only mildly impaired</p>	<p>Normally have more than 5 of the symptoms and usually also both core symptoms to make diagnosis.</p> <p>Severity and effect on function is between mild and severe</p>	<p>Normally would have most or all the 9 symptoms.</p> <p>Symptoms markedly interfere with normal functioning.</p>

The severity of depression can vary from person to person and is generally divided into mild, moderate, and severe. There is also subthreshold depression where the person has fewer than the 5 symptoms to make a diagnosis so is NOT classed as depression. However, the symptoms can be troublesome and distressing and if persists for more than 2 years is sometimes called dysthymia.

The exact cause of depression is unknown – anyone can develop it. However, some people are more prone to it. There does appear to be a genetic factor involved as it can appear to run through families. It can also be triggered by a life event when it is known as reactive depression in response to events such as bereavement, redundancy, illness etc. There also appears to be an affect caused by gender as well as women tend to develop depression more often than men.

In many, though it appears to result from a combination of an already low mood with some life problem resulting into a spiral down into depression.

Depression is also more common in people who are having to deal with serious or severe physical diseases such as cancer. It can also be the sign of an underlying undiagnosed medical condition which may at first seem to mimic depression. These conditions include an underactive thyroid gland, a head injury, an underactive pituitary gland, early dementia as well as certain drugs both prescribed and illegal whose side effects mimic depression. When your health professional assesses your symptoms, they will be on the lookout for these diseases and may order tests to rule them out if suspected.



Depression is treatable and recovery is not only possible but likely!

Treatment for depression fall into two main types: medication and psychological therapies

Most people with depression will get better, even without treatment but in this case may take several months or longer.

Living with depression can be difficult and distressing not only for the person but also their family and friends so many opt for or are recommended treatment, particularly when the depression is moderate or severe.

Treatment for depression generally falls into two main types – medication and talking therapies.

Antidepressant medication can help elevate your mood, improve sleep and concentration, and allow you to function more normally and increase your ability to deal with any problems or difficult circumstances. However, they do not usually work straightaway.

It can take 2 - 4 weeks before any changes may be noticed. Because of this some stop taking the medicine after a week as they feel it is not helping – but you need to give it time and take the medication for the full recommended course.

Stopping the medication too early can result in depression also quickly returning. It can also result in withdrawal effects. Like all medications they do come with side effects – discussing these with your prescribing health professional early is a good idea

Psychological (talking) therapies have been shown to be another good way of treating depression. Talking allows you to talk about your feelings, relationships, and difficulties. It gives you the time to gain insight and understanding of your problems and to learn new coping skills.

There are a range of different psychological therapies including cognitive behavioural therapy (CBT), interpersonal therapy (IPT), behavioural activation and person-centred therapy. CBT and IPT are the most used. CBT can be delivered using a variety of different format through computer-based learning, through group-based settings as well as one-to-one sessions.

CBT is based on the idea that certain ways of thinking can trigger or fuel some mental health problems such as depression. The aim of treatment is to change your ways of thinking to avoid these ideas and to help your thought patterns be more realistic and helpful.

IPT is sometimes used instead of CBT and is based on the idea that your personal relationships may play a large role in affecting your mood and mental health. IPT can be helpful when issues such as bereavement or dispute with others are contributing to your depression.

Both treatments, medication and talking, can be of great benefit and help you learn skills which you can continue to use after you have recovered from your illness.