Depression

Introduction

Depression is a disorder that involves the brain and affects thoughts, moods, feelings, behavior and even physical health. People used to think it was "all in your head" and that if you really tried, you could "snap out of it" or just "get over it." But doctors now know that depression is not a weakness, and it's not something you can treat on your own. Depression is a medical disorder with a biological and chemical basis.

Sometimes a stressful life event triggers depression. Other times depression seems to occur spontaneously with no identifiable specific cause. Depression is much more than grieving or a bout of the blues.

Depression may occur only once in a person's life. Often, however, it occurs as repeated episodes over a lifetime, with periods free of depression in between. Or it may be a chronic condition, requiring ongoing treatment over a lifetime.

Signs and symptoms

- Loss of interest and pleasure in normal daily activities. You lose interest in or pleasure from activities that you used to enjoy.
- Depressed mood. You feel sad, helpless or hopeless, and may have crying spells.
- Sleep disturbances. Sleeping too much or having problems sleeping can be a sign you're depressed. Waking in the middle of the night or early in the morning and not being able to get back to sleep are typical.
- Impaired thinking or concentration. You may have trouble concentrating or making decisions and have problems with memory.
- Changes in weight. An increased or reduced appetite and unexplained weight gain or loss may indicate depression.
- Agitation. You may seem restless, agitated, irritable and easily annoyed.
- Fatigue or slowing of body movements. You feel weariness and lack of energy nearly every day. You may feel as tired in the morning as you did when you went to bed the night before. You may feel like you're doing everything in slow motion, or you may speak in a slow, monotonous tone.
- Low self-esteem. You feel worthless and have excessive guilt.
- Less interest in sex. If you were sexually active before developing depression, you may notice a dramatic decrease in your level of interest in having sexual relations.
- Thoughts of death. You have a persistent negative view of yourself, your situation and the future. You may have thoughts of death, dying or suicide.

Depression can also cause a wide variety of physical symptoms:

- Gastrointestinal problems (indigestion, constipation or diarrhea),
- Headache and backache.
- Anxiety.
Cause

There's no single known cause for depression, here are the suggested factors that is believed it contributes to depression:

- **Hereditry.** Researchers have identified several genes that may be involved in bipolar disorder, and they're looking for genes linked to other types of depression. But not everyone with a family history of depression develops the disorder, and conversely, people with no family history of the disorder can become depressed.
- **Stress.** Stressful life events, particularly a loss or threatened loss of a loved one or a job, can trigger depression.
- **Medications.** Long-term use of certain medications, such as some drugs used to control high blood pressure, sleeping pills or, occasionally, birth control pills may cause symptoms of depression in some people.
- **Illnesses.** Having a chronic illness, such as heart disease, stroke, diabetes, cancer or Alzheimer's disease, puts you at higher risk of developing depression. Having an underactive thyroid (hypothyroidism), even mildly, also can cause depression.
- **Personality.** Certain personality traits, such as having low self-esteem and being overly dependent, self-critical, pessimistic and easily overwhelmed by stress, can make you more vulnerable to depression.
- **Postpartum depression.** It's common for mothers to feel a mild form of distress that usually occurs a few days to weeks after giving birth. During this time you may have feelings of sadness, anger, anxiety, irritability and incompetence. A more severe form of the baby blues, called postpartum depression, also can affect new mothers.
- **Hormones.** Women experience depression about twice as much as men, which leads researchers to believe hormonal factors may play a role in the development of depression.
- **Alcohol, nicotine and drug abuse.** Experts once thought that people with depression used alcohol, nicotine and mood-altering drugs as a way to ease depression. But using these substances may actually contribute to depression and anxiety disorders.

Risk factors

Depression affects all ages and all races. women experience depression twice as men. Gender differences in depression may be due in part to biological causes, such as hormones and different levels of neurotransmitters.

Other factors that may put you at an increased risk of depression include a family history of the disorder, pregnancy or stressful life events, such as the loss of a loved one or a job.

When to seek medical advice

If you show little interest in once-enjoyable activities, if you feel sad, helpless, tired or worthless, and if your eating and sleeping habits have changed greatly, see your doctor to determine if you have depression. If you know someone who exhibits the characteristics of depression, encourage him or her to seek professional help.

Treatment
The development of newer antidepressant medications and mood-stabilizing drugs has improved the treatment of depression. Medications can relieve symptoms of depression and have become the first line of treatment for most types of the disorder.

Treatment may also include behavioral therapy, which may help you cope with ongoing problems that may trigger or contribute to depression. A combination of medications and a brief course of behavioral therapy usually is effective if you have mild to moderate depression. If you're severely depressed, initial treatment usually is with medications. Once you improve, behavioral therapy can be more effective.

Doctors usually treat depression in two stages. Acute treatment with medications helps relieve symptoms until you feel well. Once your symptoms ease, maintenance treatment typically continues for four to nine months to prevent a relapse. It's important to keep taking your medication even though you feel fine and are back to your usual activities. Episodes of depression recur in the majority of people who have one episode, but continuing treatment greatly reduces your risk of a rapid relapse. If you've had two or more previous episodes of depression, your doctor may suggest long-term treatment with antidepressants.

Medication classes

- Selective serotonin reuptake inhibitors (SSRIs).
- Tricyclic and tetracyclic antidepressants.
- Monoamine oxidase inhibitors (MAOIs).
- Stimulants.
- Lithium and mood-stabilizing medications.

Not everyone responds the same way

Most antidepressants have a similar level of effectiveness. But a medication that works for someone else might not work for you. Doctors choose antidepressants based on your family history and the match between your symptoms and the medication's side effects. For example, if you have insomnia, a sedating antidepressant may help you. But if you're tired, then a more energizing antidepressant may be more helpful.

It can take up to eight to 12 weeks before you feel the full effects of an antidepressant, though you may feel some changes earlier. If your response to medication hasn't resulted in satisfactory progress after that time, your doctor may suggest either adding another antidepressant or replacing the first medication with another drug from a different class.

Other treatments

In addition to medications, depression treatment may include:

- Behavioral therapy. There are several types of behavioral therapy. Each type involves a short-term, goal-oriented approach aimed at helping you deal with a specific issue. Prolonged behavioral therapy is seldom necessary to treat depression. If an underlying factor contributing to your depression is an inability to get along with others or difficulty finding your place in life, then prolonged behavioral therapy could help you.

  The success of therapy depends on finding a doctor, psychiatrist or psychologist you're comfortable with. Both medications and behavioral therapy can take weeks to have an effect.
Specialized and supervised group therapy, such as bereavement groups, stress management classes, marital counseling and family therapy, also may help.

- **Light therapy.** This therapy may help if you have seasonal affective disorder. This disorder involves periods of depression that recur at the same time each year, usually when days are shorter in the fall and winter. Scientists believe fewer hours of sunlight may increase levels of melatonin, a brain hormone thought to induce sleep and depress mood. Treatment in the morning with a specialized type of bright light, which suppresses production of melatonin, may help if you have this disorder.

**Self-care**

Once treatment for depression begins, you still have to manage on a day-to-day basis. Here are some guidelines:

- **See your doctor regularly.** Your doctor can monitor your progress, provide support and encouragement, and adjust your medication if necessary.
- **Take your medications.** Finding the best medication for you may take several tries. It may take several weeks for you to start seeing results. Once you feel better, continue to take your medication as prescribed.
- **Don’t become isolated.** Try to participate in normal activities.
- **Take care of yourself.** Eat a healthy diet and get the right amount of sleep and exercise. Exercise can help treat some forms of depression, ease stress and help you relax.
- **Avoid alcohol and recreational drugs.** Abuse of alcohol and drugs will slow or prevent your recovery.