

DEPRESSION

Depression is much more than simple unhappiness. Clinical depression, sometimes called major depression, is a “mood disorder” that is a significant mental health problem.

SYMPTOMS

The main symptom of depression is a sad, despairing mood that:

- is present most days and lasts most of the day
- lasts for more than two weeks
- impairs the person’s performance at work, at school or in social relationships.

Other symptoms of depression may include:

- changes in appetite and weight
- sleep problems
- loss of interest in work, hobbies, people or sex
- withdrawal from family members and friends
- feeling useless, hopeless, excessively guilty, pessimistic or low self-esteem
- agitation or feeling slowed down
- irritability
- fatigue
- trouble concentrating, remembering and making decisions
- crying easily, or feeling like crying but being not able to
- thoughts of suicide (which should always be taken seriously)
- a loss of touch with reality, hearing voices (hallucinations) or having strange ideas (delusions).

DEPRESSION IN WOMEN

Major depression can occur in 10 to 25 per cent of women — almost twice as many as men. Many hormonal factors may contribute to the increased rate of depression in women — particularly during times such as menstrual cycle changes, pregnancy and postpartum, miscarriage, pre-menopause, and menopause.

DEPRESSION IN MEN

Men with depression typically have a higher rate of feeling irritable, angry and discouraged. This can make it harder to recognize depression in men. The rate of completed suicide in men is four times that of women, though more women attempt it.

DEPRESSION IN OLDER ADULTS

Some people have the mistaken idea that it is normal for older adults to feel depressed. Older adults often don’t want to discuss feeling hopeless, sad, a loss of interest in normally pleasurable activities, or prolonged grief after a loss.

DEPRESSION IN CHILDREN

A child who is depressed may pretend to be sick, refuse to go to school, cling to a parent or worry that the parent may die. Older children may sulk, get into trouble at school, be negative or grouchy, and feel misunderstood. Because normal behaviours vary from one childhood stage to another, it can be difficult to tell whether a child is just going through a temporary “phase” or has depression.

TYPES OF DEPRESSION

Different types of depression have different symptoms.

These include:

Seasonal affective disorder

This type of depression is usually affected by the weather and time of the year.

Postpartum depression

This occurs in women, following the birth of a child. About 13 per cent of women will experience this type of depression.

Depression with psychosis

In some cases, depression may become so severe that a person loses touch with reality and experiences hallucinations (hearing voices or seeing people or objects that are not really there) or delusions (beliefs that have no basis in reality).

Dysthymia

This is a chronically low mood with moderate symptoms of depression.

CAUSES

Several factors may play a part in the onset of depression. These include a genetic or family history of depression, psychological or emotional vulnerability to depression, biological factors such as imbalances in brain chemistry and in the endocrine/immune systems, or a major stress in the person’s life.

Depressive symptoms may be the *result of another illness* that shares the same symptoms, such as lupus or hypothyroidism. Depression may be a *reaction to another illness*, such as cancer or a heart attack. Finally, depression may be *caused by an illness itself*, such as a stroke, where neurological changes have occurred.

TREATMENTS

The most commonly used treatments are pharmacotherapy (medications), psychoeducation, psychotherapy and electroconvulsive therapy. These treatments may be used individually or in combination. Self-help organizations, run by clients of the mental health system and their families, can be an important part of treatment and recovery for people with depression and their families.

RECOVERY

Clinical depression needs to be managed over a person’s lifetime. Depression, like disorders such as diabetes, can be effectively managed and controlled by combining a healthy lifestyle and treatments. Watching for early warnings of a relapse can possibly prevent a full depressive episode.

MISCONCEPTIONS

People should just get over “the blues” and get on with their lives.

Clinical depression is not just unhappiness — it is a complex mood disorder caused by a variety of factors, including genetic predisposition, personality, stress and brain chemistry. While it can suddenly go into remission, depression is not something that people can “get over” by their own effort.

My life will never be normal again.

Most people can and do return to function at the level they did before they became depressed.