MOOD DISORDERS



Depression

- Clinical depression, also called major depressive disorder, is commonly just referred to as depression.
- It is feeling sad and depressed for weeks or months on end (not just a passing blue mood).
- This feeling is most often accompanied by feelings of hopelessness, a lack of energy, and taking little or no pleasure in things that gave you joy in the past.

DEPRESSION



- A person who's depressed just "can't get moving" and feels completely unmotivated to do just about anything.
- Even simple things -- like getting dressed in the morning or eating -- become large obstacles in daily life.

People around them -- their friends and family -- notice the change too. Often they want to help, but

just don't know how.

- More than just a bout of the blues, depression isn't a weakness and you can't simply "snap out" of it.
- A person with depression experiences severe and long lasting episodes of feeling hopeless and helpless and can't ever see it getting better



WHAT IS THE DIFFERENCE BETWEEN MAJOR/CLINICAL DEPRESSION AND JUST FEELING DOWN?

Someone who just "feels depressed" knows they will get through it with time and there is usually an identifiable cause for these feelings.

FEELING DOWN



Depression may require long-term treatment. But don't get discouraged. Most people with depression feel better with medication, psychological counseling or both.



THE GOOD NEWS

CLINICAL OR MAJOR DEPRESSION

In order to qualify for a diagnosis of Depression a person must experience 5 or more of the following symptoms for at least 2 weeks:



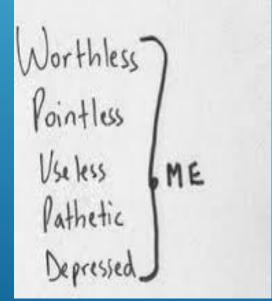
SYMPTOMS OF DEPRESSION

- Depressed mood most of the day, nearly every day
- Loss of interest in participating in almost all daily activities
- Large weight loss or weight gain in a month (5%)
- Difficulty sleeping nearly every day
- Excessive body agitation



- Loss of energy nearly every day
- Feelings of worthlessness or inappropriate guilt nearly every day
- Difficulty concentrating

Repeated thoughts of wanting to be dead (suicidal ideation)



- This must be a big change for them compared to their normal mood.
- Lastly, at least 1 of the 5 symptoms must be either a depressed mood or loss of interest in life's activities/pleasure:



HOW LONG DOES DEPRESSION LAST?

Although depression may occur only one time during your life, usually people have multiple episodes of depression.

During these episodes, symptoms occur most of the day, nearly every day.



For many people with depression, symptoms usually are severe enough to cause noticeable problems in day-to-day activities, such as work, school, social activities or relationships with others. Other people may feel generally miserable or unhappy without really knowing why.

The worst kind of sad is not being able to explain why.

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OTHER SIGNS OF DEPRESSION

- ► Feelings of sadness, tearfulness, emptiness or hopelessness
- > Angry outbursts, irritability/frustration, even over small things
- ► Tiredness and lack of energy, so even small tasks take extra effort
- > Anxiety, agitation or restlessness
- > Slowed thinking, speaking or body movements

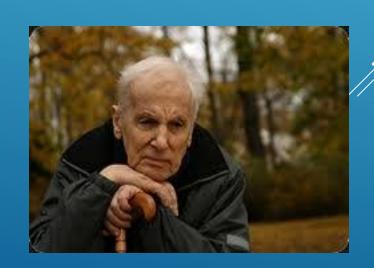


- Feelings of worthlessness or guilt, fixating on past failures or blaming yourself for things that aren't your responsibility
- Trouble thinking, concentrating, making decisions and remembering things doing poorly in school
- Unexplained physical problems, such as back pain or headaches
- Drug or alcohol abuse (self medicating)



- ► Elderly loss (job, spouse, abilities)
- Middle-aged adults empty nest syndrome or mid-life crisis
- ➤ Young adults new responsibilities
- ➤ Adolescents physical & social changes
- ► Children family conflict

DIFFERENT AGE GROUPS AFFECTED DIFFERENTLY



SYMPTOMS IN OLDER ADULTS

Depression is not a normal part of growing older, and it should not be taken lightly. Unfortunately, depression often goes undiagnosed and untreated in older adults, and they may feel reluctant to seek help. Symptoms of depression may be different or less obvious in older adults.



- Memory difficulties or personality changes
- Physical aches or pain
- Fatigue, loss of appetite, sleep problems, achesnot caused by a medical condition or medication
- Often wanting to stay at home, rather than going out to socialize or doing new things
- Suicidal thinking or feelings, especially in older men



DEPRESSION SYMPTOMS IN CHILDREN & TEENS

- Common signs and symptoms are similar to those of adults, but there can be some differences.
- In younger children, symptoms of depression may include sadness, irritability, clinginess, worry, aches and pains, refusing to go to school, or being underweight.



In teens, symptoms may include sadness, irritability, feeling negative and worthless, anger, poor performance or poor attendance at school, feeling misunderstood and extremely sensitive, using drugs or alcohol, eating or sleeping too much, self-harm, loss of interest in normal activities, and avoidance of social interaction.



HOW DO CHILDREN EXPRESS DEPRESSION DIFFERENTLY?

Difficult to diagnose disorders in children



► However, they are **more likely to "show" it** rather than talk about it

Don't yet have the verbal skills to express themselves effectively

TEEN DEPRESSION

- ▶ 1 in 5 report episodes of depression at some point during high school
- > 5,000 15-24 year-olds commit suicide each year
- > 3rd leading cause of death among teens



WHEN TO SEEK HELP

If you feel depressed, make an appointment to see your doctor as soon as you can. If you're reluctant to seek treatment, talk to a friend or loved one, a health care professional, or someone else you trust.



- If you think you may hurt yourself or attempt suicide, call 911 or your local emergency number immediately.
- Also consider these options if you're having suicidal thoughts:
- Call your mental health specialist.
- Call a suicide hotline number in the U.S., call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255).

SUICIDAL THOUGHTS

WHAT CAUSES DEPRESSION?

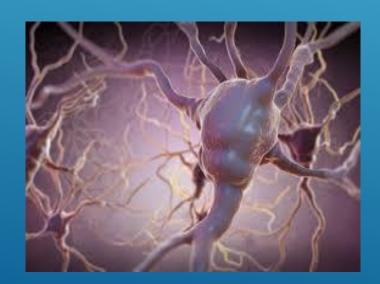
It's not known exactly what causes depression. As with many mental disorders, a variety of factors may be involved, such as:

► **Biological differences.** People with depression appear to have *physical changes* in their brains. The significance of these changes is still uncertain, but may eventually help

pinpoint causes.



Brain chemistry. Neurotransmitters are naturally occurring brain chemicals that likely play a role in depression. Changes in the function and effect of these neurotransmitters and how they interact with neurocircuits involved in maintaining mood stability may play a significant role in depression and its treatment.



OTHER POTENTIAL CAUSES

Hormones. Changes in the body's balance of hormones may be involved in causing or triggering depression. Hormone changes can result with pregnancy and during the weeks or months after delivery (postpartum) and from thyroid problems, menopause or a number of other conditions.



Inherited traits. Depression is more common in people whose blood relatives also have this condition. Researchers are trying to find genes that may be involved in causing depression.



WHO IS MORE AT RISK?

 Depression does not discriminate. Anyone, regardless of gender, race, occupation, or social status can be affected. It doesn't matter if you are rich or poor (remember, it's not about your external circumstances)

Depression often begins in the teens, 20s or 30s, but it can happen at any age. Twice as many women as men are diagnosed with depression, but this may be due in part because women are more likely to seek

treatment.

WHO ELSE IS MORE AT RISK?

- Certain personality traits, such as low self-esteem and being too dependent, self-critical or pessimistic
- Traumatic or stressful events, such as physical or sexual abuse, the death or loss of a loved one, a difficult relationship, or financial problems



- Childhood trauma or depression that started when you were a teen or child
- Blood relatives with a history of depression, bipolar disorder, alcoholism or suicide
- Being lesbian, gay, bisexual or transgender in an unsupportive situation

- Family conflicts, relationship difficulties, and work or school problems
- > Social isolation
- > Suicidal feelings, suicide attempts or suicide
- > Self-harm, such as cutting



- History of other mental health disorders, such as anxiety disorder, eating disorders or post-traumatic stress disorder
- ► Abuse of alcohol or illegal drugs
- Serious or chronic illness, including cancer, stroke, chronic pain or heart disease.
- Certain medications, such as some high blood pressure medications or sleeping pills (talk to your doctor before stopping any medication)

RISK FACTORS CONTINUED...



- Depression is a serious disorder that can take a terrible toll on individuals and families.
- It often gets worse if it isn't treated.
- Untreated depression can result in emotional, behavioral and health problems that affect every area of your life.

OTHER EFFECTS



NEGATIVE EFFECTS

- Excess weight or obesity, which can lead to heart disease and diabetes
- Pain and physical illness
- > Alcohol or substance misuse
- > Anxiety, panic disorder or social phobia



TREATMENT

(psychotherapy) are very effective for most people with depression. Your primary care doctor or psychiatrist can prescribe medications to relieve symptoms. However, many people with depression also benefit from seeing a psychologist or other mental health professional.

If you have severe depression, you may need a hospital stay, or you may need to participate in an outpatient treatment program until your symptoms improve.



SEROTONIN

- Your brain has several different neurotransmitters (brain chemicals) that help to regulate your mood.
- > One of those neurotransmitters is called **serotonin**.



- Serotonin is reabsorbed too quickly after being released into the brain. This doesn't allow it to properly regulate mood like it does in a non-depressed brain and this leads to the symptoms experienced by someone who is depressed.
- It has nothing to do with what is going on in your life. It is all about what is going on inside of your head!



SSRIS

- Antidepressants generally work by helping to readjust the level of neurotransmitters such as serotonin.
- There are many different types of antidepressant medications available. However, the most commonly used type are known as Selective Serotonin Reuptake Inhibitors or SSRIs.

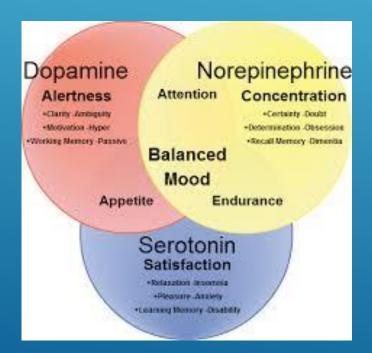


- SSRIs work by preventing serotonin from being too quickly reabsorbed after being released by the brain.
- SSRIs are safer and generally cause fewer side effects than other types of antidepressants.
- Commonly prescribed brand name SSRIs include Prozac, Paxil, and Zoloft



OTHER MEDICATIONS

- Other neurotransmitters can also affect your mood, including norepinephrine and dopamine.
- Different types of antidepressants are used to target those brain chemicals.



MEDICATION PROBLEMS

- One of the biggest problems with antidepressants is that they can take as much as 4-5 weeks to start working. Someone with severe depression wants to feel the benefits right away.
- Unfortunately, as a result many people stop taking their prescribed medication before they have given it a sufficient chance to start working.



Another problem is that antidepressants can have negative side effects such as weight gain. This is another reason people often stop taking their medication.

SIDE EFFECTS



LENGTHY PROCESS

Different people respond differently to different antidepressants. Prozac may work for someone, but not for someone else. As a result, some people need to try out several different antidepressants before they find one that works for them or that doesn't cause harmful side effects.

RISKS OF ABRUPTLY STOPPING MEDICATION

Don't stop taking an antidepressant without talking to your doctor first. Antidepressants aren't considered addictive, but sometimes physical dependence (which is different from addiction) can occur.



Stopping treatment abruptly or missing several doses can cause withdrawal-like symptoms, and quitting suddenly may cause a sudden worsening of depression. Work with your doctor to gradually and safely decrease your dose.



ANTIDEPRESSANTS AND INCREASED SUICIDE RISK

Administration (FDA) requires all antidepressants to carry a black box warning, the strictest warning for prescriptions. In some cases, those under 25 may have an increase in suicidal thoughts or behavior when taking antidepressants, especially in the first few weeks after starting or when the dose is changed.



- Anyone taking an antidepressant should be watched closely for worsening depression or unusual behavior, especially when first beginning a new medication or with a change in dosage. If you or someone you know has suicidal thoughts when taking an antidepressant, immediately contact your doctor or get emergency help.
- Keep in mind that antidepressants are more likely to reduce suicide risk in the long run by improving mood.



PSYCHOTHERAPY

Psychotherapy is a general term for treating depression by talking about your condition and related issues with a mental health provider. Psychotherapy is also known as talk therapy.

• Goals of therapy may include: Identifying and changing negative beliefs and behaviors and replacing them with healthy, positive ones as well as finding better ways to

cope and solve problems.

- > The ultimate goal is to help ease depression symptoms, such as hopelessness and anger.
- While antidepressants might help control the severity of symptoms, only therapy can help you treat the underlying issues when those feelings arise.



WHEN NOTHING SEEMS TO WORK

- "shock therapy", is still a controversial treatment because of how it was administered in the past
- Today it is still used, although in a much more humane way (patients feel no pain)



ECT

- ECT can literally be a life-saver for those for whom all other treatments have failed
- If your depression is severe and does not respond to medication, ECT may be recommended. During ECT, a small amount of electrical current is applied to your brain to produce brain waves similar to those that occur during a seizure. The chemical changes triggered by the electrical currents can reduce the symptoms of psychosis and depression, especially when other treatments have failed.

- Those receiving ECT treatment usually will go in for 6-12 treatments
- While there may me some temporary memory loss due to ECT, the benefits (no longer suicidal) often greatly outweigh this side effect.
- ECT is considered a very effective treatment with over 80% experiencing marked improvement



- Don't isolate yourself depressive thoughts can worsen when you're alone
- Don't make major decisions until you feel better
 if you have to talk to friends
- Structure your mornings get up and shower even if you don't feel like it
- > Avoid drugs/alcohol they make it worse
- If no appetite, eat small snacks throughout day instead of forcing a big meal

HOW TO COMBAT DEPRESSION ON A DAY-TO-DAY BASIS

- If trouble concentrating, take notes/make lists
- If trouble sleeping, and do something get out of bed
- Exercise 20 min. walk/day helps reduce
- Give yourself a break don't expect to do all the things you normally do
- ► <u>Get help</u> talk to someone

CONTINUED...

- ► MayoClinic.org
- PsychCentral.com

SOURCES