

Depression



Patient Booklet

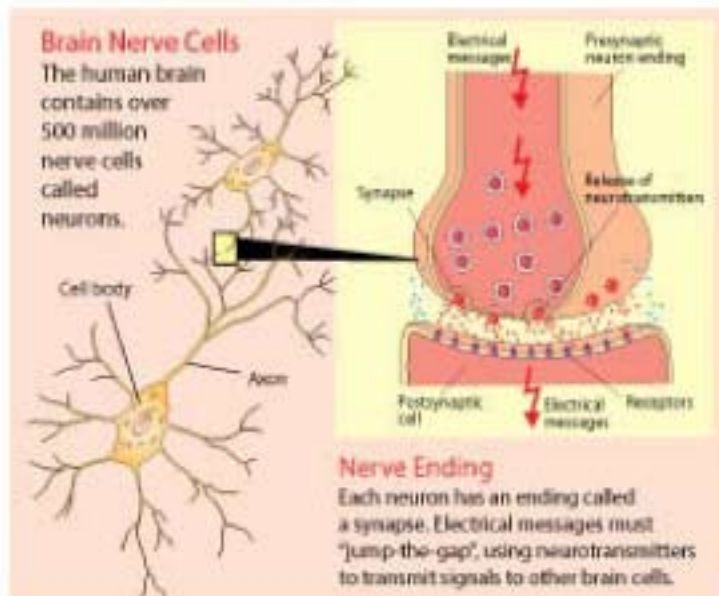
What Is Depression?

Depression is among the most common mental disorders, and tends to be both chronic (long-term) and debilitating (weakening).

While it is common to feel down or have the "blues", the diagnosis of Major Depression requires that certain other symptoms be present in addition to feeling just "down" or "blue". The severity of this condition ranges from mild to severe. The severe form will require some form of medical treatment, while less severe forms may respond to either medical or psychological (mental or emotional) therapies. Usually, a combination of both types of treatment is recommended.

What Causes Depression?

The exact cause of Depression is unknown. However, it is believed to involve an imbalance of chemicals in the brain called neurotransmitters.



These neurotransmitters include serotonin, norepinephrine, dopamine, acetylcholine, and gamma-aminobutyric acid (GABA).

Other causes involve changes in steroids and neuropeptides (amino acids).

In general, women are twice as likely to have an episode of Major Depression than men.

Depression and Mania

Some individuals may suffer from periods of Depression, preceded or followed by periods of mania. This is known as bipolar disorder (commonly known as manic depressive illness).

The features of mania include periods of persistently elevated, expansive, or irritable mood. Individuals with bipolar disorder may speak rapidly or feel like their thoughts are coming fast, or racing. They may also have a decreased need for sleep, be easily distracted, participate excessively in pleasurable activities with potential for painful consequences (sexual promiscuity, spending sprees), and display signs of grandiosity or an inflated self-esteem.

Recognizing the Symptoms

(see center section for a full list of the symptoms)

Some people have a tendency towards Depression without an obvious cause.

The symptoms can vary from one patient to another, and in the same person from time-to-time.

Diagnosing the Condition

The diagnosis of Major Depression requires that your healthcare provider obtain a careful history and physical exam.

Certain medications (eg, barbiturates, interferon, and steroids) and medical conditions, such as hypothyroidism, diabetes, and heart attack, may also be associated with Major Depression.

Treatment

The use of antidepressant drugs will bring relief for many patients. The choice of medication will depend on the individual symptoms and the side-effect profile of each medication.

Antidepressants typically take 10-14 days to have any initial beneficial effect and it may take 6-8 weeks before the full effect is felt.

Treatment can be life-long and if it should ever need to be stopped, the dosage generally is gradually reduced.

Talking with a trained counselor or psychotherapist may offer some relief, help raise self-esteem, and overcome future problems.



Common Symptoms of Depression

If you, or a family member, should experience five or more of the following symptoms, for more than 2 weeks at any one time, inform your healthcare provider:

Your healthcare provider will be able to determine whether or not these are signs of Major Depression - do not try to treat it yourself.

- A continuous "depressed" mood (feeling sad or empty)
- An irritable mood
- A lack of interest or enjoyment in most activities
- Lack of concentration
- Difficulty in making decisions
- Unexplained crying spells
- Fatigue or loss of energy
- Difficulty in sleeping or excessive sleeping
- Significant changes to appetite
- Significant weight loss or weight gain within a month
- Mental or physical agitation
- Feelings of fear, guilt, or worthlessness
- Thoughts of death or suicide *

(Always let your healthcare provider know immediately when these occur)

Living With Depression

Psychotherapy

Talking with a trained counselor or psychotherapist, who understands the condition, can bring tremendous relief, help raise self-esteem, and help overcome future problems.

Stress

Many factors in our lives contribute to stress making us lethargic and anxious.

Relaxation, combined with some form of exercise, is the best method of coping with stress.

Premenstrual Depression

Premenstrual days often bring feelings of unhappiness and anxiety. If these interfere with day-to-day routine, treatment may be of benefit.

Postpartum Depression

Having a baby puts considerable pressure on emotions, and changes in hormone levels can also affect the ability to cope at this time.

Postpartum Depression is quite common and diminishes with time. However, if it continues for a prolonged period, help must be obtained.

Infectious Illness or Heart Attack

This is often followed by a period of Depression. If it lasts for more than 2 weeks, treatment may be required.

Coping With Grief

While it is normal to feel sad or depressed after the loss of a loved one, Depression does not generally follow. If symptoms begin within 2 months of the loss, and do not persist beyond this period, it is generally considered to result from the bereavement.

Living With Depression

Emotional Instability

"Midlife Crisis", both for men and for women (after menopause), can lead to Depression.

Antidepressants and/or hormone treatment (for women), together with a good exercise program, may offer benefits during this unsettling period.

Alcohol Consumption

Alcohol consumption has a depressive effect on the body and affects the mind even on the days when no alcohol is consumed.

Depression may clear when drinking is stopped. However, if depressive symptoms still persist after a prolonged period without alcohol, help should be obtained.



Taking part in leisure activities with your family and friends may help to relieve some of these symptoms and improve your lifestyle.

Treatment and Medications

All drugs can be grouped together by how they work (i.e. their specific mode of action). The list below includes all the different types of drugs approved for use in the treatment of this condition at the time of publication. (Updated information is also available online at: www.diseases-explained.com.)

Always consult your healthcare provider if you have any questions or concerns about the medication you have been prescribed.

Drug Type

Effects

(in alphabetical order)

ANTIDEPRESSANTS

Alpha-2 Antagonists	Increase the levels of serotonin and norepinephrine.
Dopamine Reuptake Inhibitors	Increase the levels of dopamine and norepinephrine.
Monoamine Oxidase Inhibitors (MAOIs)	Prevent the breakdown of the excitatory neurotransmitters (monoamines) and increase levels of serotonin, norepinephrine, and dopamine.
Selective Serotonin Reuptake Inhibitors (SSRIs)	Increase the levels of serotonin.
Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs)	Increase the levels of serotonin, norepinephrine, and, to a lesser extent, dopamine.
Serotonin Blockers	Block serotonin receptors and increase the levels of serotonin.
Tricyclics (TCAs)	Increase levels of serotonin and norepinephrine.

Drug Type

Effects

Antipsychotics	Used in combination with antidepressants for the treatment of Depression with psychotic features.
Carbamazepine	May be used for the prevention of Manic Depression when lithium/lamotrigine is not advised.
Lamotrigine	May be used under a specialist's care for the treatment and prevention of Depression as part of Bipolar Disorder (Manic Depressive illness).
Lithium Salts	May be used under a specialist's care for prevention of Manic Depression and recurrent depressive illnesses.
Valproic Acid	May be used for the prevention of Manic Depression when lithium/lamotrigine is not advised.

Other Treatment

Electroconvulsive Therapy (ECT) This involves the administration of brief electrical impulses to the head, under anesthesia, while the muscles are paralyzed by muscle relaxants.

ECT is used to treat individuals suffering from severe Depression or Depression with psychotic features.

Complimentary Remedies Herbal products may have a beneficial affect in some patients.

Note: Always speak to your healthcare provider before using any complimentary remedies

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