

- **Learn to manage stress.** You can learn proven techniques for calming and relaxing yourself. Consider taking a stress management class or buying a set of relaxation tapes.
- **Learn problem-solving skills.** Many people who develop depression have never learned problem-solving skills. They need to develop the ability to view problems from many viewpoints and look for a variety of solutions.
- **Build your life around things you can control.** Learn to recognize what you can and can't control. Avoid spending much effort on situations that won't pay off for you.
- **Learn self-acceptance.** Instead of rejecting the parts of yourself you don't like, learn to manage them more productively.
- **Focus on the future, not the past.** Depressed people tend to focus on the past. People who set goals and focus on the future tend to be more positive about life.
- **Develop a sense of purpose.** Many depressed people lack a sense of purpose or meaning. They may have no goals and nothing in the future drawing them forward. To prevent depression, develop your sense of purpose and meaning.
- **Strengthen your emotional boundaries and set limits.** Boundaries define your role in a social situation. They determine how you will and will not behave in a given situation. Having clear, strong boundaries is empowering; having boundary violations makes you feel victimized and helpless. Setting limits means having and enforcing rules for what behavior you expect in a relationship.

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- **Build positive and healthy relationships.** Think about what you need from others in relationships. Learn to read people and trust your instincts about whether they are good for you or not.
- **Avoid isolation.** Talk to people about what's going on with you. If you keep your thoughts to yourself, you may be unaware that they are distorted. However, if you share them with another person, you can become more objective.

WHERE CAN I GO FOR MORE INFORMATION?

About (depression.about.com).

National Institutes of Mental Health (nimh.nih.gov/publicat/depression.cfm).

Burns, David. *Feeling Good: The New Mood Therapy*. New York: Avon Books, 1980.

Diagnostic and Statistical Manual (4th ed.) Washington, DC: American Psychiatric Association, 1994.

Solomon, Andrew. *The Noonday Demon: An Atlas of Depression*. New York: Scribner, 2001.

Yapko, Michael. *Breaking the Patterns of Depression*. New York: Doubleday, 1997.

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Depression

WHAT IS DEPRESSION?

Depression is a serious illness, not a harmless part of life. It is a complex disorder with a variety of causes, including genetic, chemical, physical, and sociological. It is also influenced by behavior patterns learned in the family and by cognitive distortions.

Depression affects thousands of people in the United States. It is always troubling, but for some people it can be disabling. Depression is more than just sadness or "the blues"; it can impact nearly every aspect of a person's life. People who suffer from it may experience despair and worthlessness, feelings that can greatly influence both personal and professional relationships. In this handout, many of the factors that can cause depression are described, and strategies for preventing depression are explored.

When a person suffers from depression, it can affect every part of his/her life, including one's physical body, behavior, thought processes, mood, ability to relate to others, and general lifestyle.

WHAT ARE THE SYMPTOMS?

People diagnosed with clinical depression have a combination of symptoms, including the following:

- Feelings of hopelessness, even when there is reason to be hopeful
- Fatigue or low energy
- Greatly reduced interest or pleasure in most regular activities
- Low self-esteem
- Feelings of worthlessness
- Excessive or inappropriate guilt
- Lessened ability to think or concentrate
- Indecisiveness



- Distorted thoughts and having an unrealistic view of life
- Weight gain or loss
- Appetite changes
- Sleeping pattern changes
- Recurrent thoughts of death
- Suicidal thoughts
- Specific plan for committing suicide
- Suicide attempt
- Feelings of restlessness or being slowed down

When a person suffers from depression, his/her symptoms cause significant distress or impairment in family, social, and occupational relationships, as well as other important areas of functioning. Such symptoms are **not** the result of a chronic psychotic disorder, substance abuse, a general medical condition, or bereavement.

Depression may include feelings of sadness but is not the same as sadness. Depression lasts much longer and involves a loss of self-esteem, which sadness does not. People who are depressed function less productively; people who are sad or disappointed continue to function.

WHO BECOMES DEPRESSED?

Depression does not seem to be related to factors such as ethnicity, education, income, and marital status. It affects slightly more women than men. Some researchers believe that women with a history of emotional and sexual abuse or economic deprivation, or who are dependent on others, are especially vulnerable to depression. There seems to be a genetic link: Depression is more common among parents, children, and siblings of people diagnosed with depression. The average age at which a depressive episode first occurs is in the mid-20s. People born more recently are being diagnosed at a younger age.

WHAT ARE THE PHYSICAL CAUSES?

Many physicians believe that depression results from a chemical imbalance in the brain. They often prescribe antidepressant medication, and many people find relief as a result. However, there is no reliable test to identify such a chemical imbalance. It is unknown whether life experiences cause mood changes that, in turn, create changes in brain chemistry or whether the process works in reverse.

Depression may be associated with physical events such as other diseases, physical trauma, and hormonal changes. A depressed person should always have a physical examination as part of the assessment process to determine the role of physical causes.

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WHEN IS PROFESSIONAL TREATMENT NEEDED?

If you or someone you know is depressed and exhibits any of the following signs, it is extremely important to seek the assistance of a medical or mental health professional.

- Thoughts of death or suicide. Such thoughts are always dangerous, and you should see a professional therapist immediately.
- Symptoms of depression that continue for a long time. You may need professional help if symptoms persist. Acute responses to events are normal but should not last beyond a reasonable time.
- Ability to function impaired by depression. You need to seek help before your life situation deteriorates to a serious level.
- Isolation so extreme that you have nobody with whom you can reality-test. Seek out someone with whom you can share your thoughts and feelings.

SEEK PROFESSIONAL HELP IF

- You think about death or suicide
- Your symptoms of depression continue for a long time
- Your ability to function is impaired
- You are extremely isolated from others

WHAT IS THE TREATMENT FOR DEPRESSION?

There are three basic methods to treat depression: psychotherapy, self-help, and medication. Many people respond best with a combination of two or more methods.

1. **Psychotherapy.** Exploring one's beliefs and ways of thinking and learning new ways of thinking and behaving, with the guidance of a professional.
2. **Self-help.** Exploring one's beliefs and ways of thinking on one's own.
3. **Medication.** Altering one's brain chemistry by taking antidepressant medication. A physician may recommend medication to a patient who has
 - Severe depression
 - At least two previous depressive episodes

- A family history of depression
- A request for medication only and no psychotherapy

Four types of antidepressant medication are available:

- Tricyclic antidepressants (TCAs)
- Monoamine oxidase inhibitors (MAOIs)
- Selective serotonin reuptake inhibitors (SSRIs)
- Structurally unrelated compounds

The TCAs and MAOIs have been used for decades. The SSRIs (e.g., Prozac) and structurally unrelated compounds are newer and are being prescribed more often. They have fewer and less pronounced side effects than the TCAs and MAOIs.

WHAT ABOUT NONMEDICAL TREATMENT?

One of the leading methods for treating depression is cognitive therapy. Cognitive therapists help depressed clients feel better by identifying how faulty ways of thinking make them feel bad. Clients analyze their thoughts and beliefs and learn to substitute more healthy ways of thinking and believing.

Researchers at Vanderbilt University and the University of Pennsylvania found that cognitive therapy is just as effective as medication in treating severe depression. Their study, presented at the annual conference of the American Psychiatric Association in May 2002, concluded that cognitive therapy is a less expensive long-term treatment than medication and is as least as effective.

Many mental health professionals believe that the ideal treatment of clinical depression is medication in conjunction with psychotherapy.

HOW CAN DEPRESSION BE PREVENTED?

Depression can often be prevented. It is especially important to take preventive action if you know that you have predisposing factors such as those listed at the beginning of this handout.

- **Identify your risk factors and be aware of where you are vulnerable.** Each of us has unique risk factors, such as things we were taught in our families, values we have learned, and the presence or absence of a family history of depression. Anything learned can be unlearned and replaced with something healthier.

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