

# Depression<sup>i</sup>

**Depression is an illness — it is common and treatable.**

Depression **does not** mean that you are weak or lazy. It is a **common illness**, like hypertension, diabetes or arthritis, and it can occur at any age. The good news is that there are treatments that work well.

## What is depression?

Many people use the word 'depression' to describe feelings of sadness and loss. These feelings often pass within a few hours or a few days. During this time, people are able to carry on much as usual. The illness that your doctor calls **depression** is different from this. You feel sad much more intensely and for longer. It is common to lose interest in things that you used to enjoy. **Depression** commonly interferes with your work, social and family life.

Depression can also affect people in many other ways. Common symptoms are:

- disturbed sleep
- changes to appetite
- physical aches and pain
- lack of energy or motivation
- irritability and intolerance
- feelings of guilt
- loss of concentration.

## What might trigger depression?

We know that there are changes in the level of certain chemicals in the brains of people who are depressed. There is also evidence that if your close blood relatives suffer from depression, you are at a greater risk of having depression. For many people, depression is triggered by stressful events, alcohol or drug use. In others, a physical illness or medication causes symptoms of depression. In some people, however, there is no obvious trigger. Think about your situation — was your depression associated with one of the triggers listed below? If so, put a check beside it in the list of possible triggers below. If not, and you are aware of some other trigger, write it in the space provided. It would help to discuss this with your doctor, your family and friends.

## Possible triggers

- |                                       |       |                                |       |
|---------------------------------------|-------|--------------------------------|-------|
| → Moving house                        | _____ | → Loss of job                  | _____ |
| → Divorce or separation               | _____ | → Poverty                      | _____ |
| → Death of a loved one                | _____ | → Unemployment                 | _____ |
| → Long term alcohol use               | _____ | → Chronic drug use             | _____ |
| → Certain medications                 | _____ | → Seasonal changes             | _____ |
| → Dissatisfaction or conflict at work | _____ | → Loneliness                   | _____ |
| → Widowhood                           | _____ | → Marital problems             | _____ |
| → Chronic physical illness            | _____ | → Childbirth                   | _____ |
| → Being a victim of a crime           | _____ | → Unsatisfactory relationships | _____ |

- |   |   |   |   |
|---|---|---|---|
| <p>or an accident</p> <p>→ Serious injury or illness in the patient or a loved one</p> <p>→ Low self-esteem</p> | <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> | <p>with family or friends</p> <p>→ Unprepared social and cultural changes (immigration)</p> <p>→ Others (specify)</p> | <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> |
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**How is depression treated?**

Because depression commonly involves stressful events and can also involve changes in body chemistry, depression is usually best treated with a combination of medical and psychological (or talking) treatments. Medical treatment includes antidepressant medication and psychological treatments include cognitive and behavioural therapy, and learning how to cope with stress.

If you are experiencing the symptoms of depression, it is advisable to talk to your doctor.

**Antidepressant medication**

These drugs will usually relieve depression in most people and may help to prevent relapse of the illness. However, unless episodes of depression occur very frequently, most people do not take antidepressant medication every day of their lives. They only take the medication when they are depressed and continue taking the medication for about four months to one year after recovery.

*How long do these drugs take to work?*

Antidepressants do not relieve your depression straight away. These drugs take some time to have an effect on your mood. In the first few days, some types of drugs are most likely to help with sleep and tend to have a calming effect, sometimes making people feel very tired and weak. However, after a week or two of taking the medication regularly, this calming effect gives way to increasing alertness and energy. It may take up to eight weeks before you notice the maximum benefits of antidepressant medication; therefore, you should not expect to notice the benefits from this medicine too quickly.

There are a number of different types of antidepressant drugs. Ask your doctor for further information about these drugs and their side-effects.

**Psychotherapy (talking treatments or counselling)**

There are a number of different kinds of psychotherapy that are useful for people who are depressed. The following information outlines three useful forms of psychotherapy.

*Cognitive therapy*

People who are depressed tend to feel as if they are a hopeless failure. When something bad happens, they blame themselves, but when good things happen, they tell themselves they are just lucky. Furthermore, depressed people tend to believe that things will never get any better. Cognitive therapy aims to help people identify their negative ways of thinking and to teach them how to think in a more positive and helpful way. People learn that they have some control over what happens to them. They learn to bounce back from failure more effectively and to recognize and take credit for the good things in their lives.

### *Behavioural therapy*

Depressed people tend to have trouble motivating themselves. They often sit for hours, thinking about their problems and missing out on good opportunities. Behaviour therapy aims to identify and change aspects of behaviour that may cause or prolong symptoms of depression. Some forms of behavioural change include activity planning, problem solving, goal planning and social skills training.

### *Interpersonal therapy*

This form of therapy aims to help people resolve one or more of their interpersonal problems that may be causing or prolonging symptoms of depression. For example, interpersonal therapy may help you cope with prolonged grief reactions after the death of a loved one, adjustment to new life situations such as parenthood or divorce, or may help with the resolution of interpersonal disputes (eg marital problems or disputes with colleagues at work).

## **COPING WITH DEPRESSION**

The following guidelines are designed to help you cope more effectively with the symptoms of depression.

### **Loss of interest, slowed activity, lack of energy**

When you're depressed, it's often hard to get any enjoyment or pleasure out of things. As a result, you may have stopped doing things you used to enjoy. Having nothing enjoyable in your life then helps keep the depression going. It often helps to get back into your routine slowly and also to increase the number of things that you enjoy. Your doctor, counsellor or friend can help you.

1. *Identify things you used to do regularly and the things you used to enjoy. Write down the things you did every day (or every week) before you were depressed. Now think about the things you enjoyed doing and those that you wanted to do and write them down too. You might want to talk about these with someone else.*

Before becoming depressed:

<i>My routine activities</i>	<i>Pleasant activities</i>	<i>Activities I wanted to do</i>
eg Grocery shopping	Going for a walk	Reading

2. *Plan to increase the routine and pleasant activities gradually. Once you have identified your daily routine activities and pleasant activities, with the help of your doctor, counsellor or friend, you can slowly try to return to your routine. Also try to do some of the pleasant activities you enjoy. At the beginning of each week, you can choose activities from your 'daily routine' list and 'pleasant activity' list and build them into your day.*

3. *If a task seems too difficult, try breaking it into a series of small steps* and then setting yourself the goal of completing one step at a time. For example, making a flowerbed can be broken down into a number of smaller tasks:

- choose some new plants
- pull out the old plants (need gloves and spade)
- prepare the soil (need compost and fertiliser)
- put in the new plants.

4. *Above all, reward yourself for your efforts.* Ask others around you to encourage and praise you for each small step you take. Recovering from depression is a bit like learning to walk again after breaking your leg.

***Remember, it is important to do these activities even when you do not feel like it. Getting going again can help you feel better.***

### **Loss of appetite**

Eat small portions of food that you particularly like. Take your time and do not feel under pressure to finish if you are eating with others. Drink plenty of fluids, especially fruit juices and milkshakes.

### **Sleep disturbance**

1. Get up at the same time every morning.
2. Avoid sleeping during the day.
3. Reduce tea and coffee intake if excessive (no more than two to three cups per day and none after about 4 pm).
4. Do not lie awake for more than about 30 minutes — get up and find a relaxing activity.
5. Try relaxation exercises. Ask your clinician for more information about these exercises.

Your health worker can give you more information about managing sleep difficulties.

### **Loss of interest in sex**

Seek non-sexual activities with your partner that you still enjoy. Explain to your partner that your loss of interest and affection is a symptom of your depression, not a rejection of him or her, and that these symptoms will be temporary.

### **Miserable feelings, unpleasant thoughts**

These negative thoughts and feelings tend to focus your attention on things you do not like about yourself or your life. These thoughts also tend to make your problems seem worse than they really are. As well as concentrating on your *negative* features and experiences, when you are depressed you tend to underestimate your *positive* characteristics and your ability to solve problems. A number of strategies may help you achieve a more balanced view of things:

1. Make a list of your three best features, perhaps with the help of a friend or relative. Carry the list with you and read it to yourself whenever you find yourself focusing on negative thoughts.
2. Keep a daily record of all the small pleasant things that happen and discuss these events with your friends when you see them.
3. Recall pleasant occasions in the past and plan pleasant occasions for the future (this may best be done in conversation with a friend).
4. Identify those areas of your life that are positive. When you are depressed it is easy to lose sight of those things that you value in your life. Think about life before depression. What did you value and what was special? Make a list of them. For example:

Family	.....	.....
Children	.....	.....
Work	.....	.....
Sport	.....	.....
Music	.....	.....

Having identified those areas of your life that are positive, discuss them with your doctor and/or counsellor.

5. Avoid discussions about your bad feelings. Expressing unreasonable thoughts about yourself is not helpful — solving realistic problems is helpful. Friends may politely interrupt such conversations and redirect the discussion to positive issues or useful problem solving.
6. Consider alternative explanations for unpleasant events or thoughts. Although your initial explanation may be that you are at fault, rethink these conclusions and write down all other possible explanations for these events or thoughts.
7. Keep yourself busy doing useful activities. Avoid sitting or lying about doing nothing.

Your health worker can give you more information about balancing your thinking.

**Dealing with worries and problems**

If you find that you are worrying, endlessly turning over your different problems in your head, try putting your worry to a useful purpose. Pick out one or two problems that seem really important and make a decision to resolve them. You may like to ask a friend to help you.

Sit down with a problem-solving sheet (your health worker can provide you with one) and go through the following steps:

1. Say exactly what the problem (or goal) is.
2. List five or six possible solutions to the problem — write down any ideas that occur to you, not merely the ‘good’ ideas.
3. Evaluate the good and bad points of each idea in turn.
4. Choose the solution that best fits your needs.
5. Plan exactly the steps you will take to put the solution into action.
6. Review your efforts after attempting to carry out the plan. Praise all efforts. If unsuccessful, start again.

Your health worker can give you more information about problem solving techniques.

### **Dealing with stresses**

Depression is more common in people who have had to make major adjustments in their lives during the past year (eg death of a loved one, birth of a baby, loss of a job, or moving house). These adjustments may result in continued stress. Over time, this stress may make people vulnerable to depression. Thus, to resolve fully the depression and to prevent recurrence, it is important to resolve the stress.

The same problem-solving approach described in 'dealing with worries' can be used to help you deal with stress. With the help of a friend or your health worker, try to define exactly what aspects of the major change is causing the stress; for example, the birth of a baby is a major adjustment, and the aspects causing most stress for you might be difficulty getting time alone or dealing with disturbed sleep. Then go through the steps outlined above in order to devise a detailed plan to resolve the issue. There are agencies that provide specialist advice and support with particular types of problems — for example, debt or relationship problems. Your health worker may have information about these agencies or you could ask your local Citizens Advice Bureau for their addresses. The Citizens Advice Bureau is listed in the telephone directory.

Not all stresses can be fully resolved; however, there is usually some way of helping you cope better so that the impact of the stress can be reduced. For example, some chronic illnesses can't be cured, but doing relaxation exercises may help someone to deal with the pain and support groups may be able to provide useful tips for how to live with the condition. Some communication skills, such as assertiveness training, can help people deal better with difficult relationships or situations at work or at home. Your health worker may be able to give you information about these. Many local Colleges of Further Education or Community Schools run day and evening classes in relaxation, yoga and assertiveness skills. Support from friends and family is also very important. Now is the time to ask for and accept support.

#### **Summary**

- Depression is a biological disorder that is made worse by life stress.
- Depression has characteristic symptoms that affect a person's thoughts, feelings, and everyday functioning.
- Antidepressant drugs help relieve some of the symptoms but take time to work.
- You and your friends and family can help overcome depression by keeping busy, avoiding negative thinking, solving problems, and reducing stress.

### **Keeping a record of progress**

Decide how much you experience each of the following problems. If you have other problems, write them down at the end of the list.

<b>Problem</b>	<b>Not at all</b>	<b>Mild</b>	<b>Moderate</b>	<b>Severe</b>
Feelings of sadness				
Loss of interest or pleasure in things you used to enjoy				
Lack of energy/tiredness				
Poor/disturbed sleep				
Putting on/losing weight				
Poor concentration/forgetfulness				
Slowness				
Restlessness				
Reduced interest in sex				
Physical aches/pains				
Believing that you are no good				
Feelings of hopelessness				
Thoughts of harming oneself (death)				
Feelings of guilt/self blame				
Other problems				

You can check your progress by looking back at your answers every couple of weeks.

#### **How to avoid recurrence of depression**

- ➔ It is very important that you follow your doctor's advice
- ➔ Take your medication as directed without skipping any days
- ➔ Never reduce or stop taking medication without first talking to your doctor
- ➔ If you have stopped doing things you used to do, gradually increase what you do and include activities you enjoy
- ➔ Use the problem solving approach to deal with problems, stresses and worries
- ➔ Work on identifying your negative thoughts and changing them to positive ones.

**Assess your symptoms regularly and consult your doctor and/or counsellor if you have any problems.**

#### *Finally*

- ➔ Doing the exercises when you are depressed can be difficult
- ➔ It might be useful to work through them with a trusted friend or family member.
- ➔ If you need extra help you can always talk to your doctor and/or your counsellor.

*You can overcome your depression.*

Ask your health worker if you want more information about any of the topics mentioned in this brochure.

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<sup>i</sup> Adapted, with permission from Falloon IRH, *Depression: How to Cope with it*, Buckingham Health Services; and Health Public Affairs, Department of Health, NSW. *Living with Mood Swings — Manic Depressive Illness*. State Health Publication No (HP) 86-027, quoted in Andrews G, Jenkins R, eds. *Managing Mental Disorders (UK edition)*; distributed for the publishers in the UK by IN 2 Mail Ltd, Fax: +44 (0)1252 322315; PO Box 55, Aldershot, Hampshire GU21 4FP. Sydney: World Health Organization Collaborating Centre for Mental Health and Substance Abuse, 1999, and World Health Organization. *Mental Disorders in Primary Care: a WHO Education Package*, 1998.