Are you suffering from the illness of depression?

EPRESSION is one of the most frequent problems we see in office practice. It is an intriguing issue in part because it is so full of contradictions:

Patients with depression rarely talk about how sad they feel. They virtually always complain of something else: illness, fatigue, aches and pains, insomnia, irritability, "nerves," etc. (In part, this is because people mistakenly think of depression as some sort of personal or moral failure that they should be able to "snap out of" on their own.)

For many patients, depression is a physical illness that is often inherited. Occasionally, someone may have a medical illness that itself causes depression (e.g., alcohol or drug abuse, thyroid disease, a stroke or heart attack, chronic pain, certain kinds of rheumatism or pancreatic problems, etc.).

Yet depression affects you *psychologically*. Sometimes, psychological causes are an important part of the illness, particularly if you ever were physically, emotionally, or sexually abused or suffered a severe shock.

Hopelessness and feeling that no one could do anything that could *possibly* help are part and parcel of this illness. Yet depression is often surprisingly easy to treat. And even when treatment helps people feel and function better, one of the most difficult problems is to get them to continue treatment. Here are some of the facts about this surprisingly disabling illness:

1. Most patients with depression feel as if they are ill or run down. This fatigue is so severe that they usually mistakenly believe they have some other illness. So, if you're depressed, you may believe that you have a vitamin deficiency, "tired blood," hypoglycemia, Epstein-Barr Syndrome or Chronic Fatigue Syndrome, PMS (premenstrual syndrome), thyroid or other gland problems, "all run down and need rest," etc.

2. Your ability to concentrate may also be impaired. You won't be able to pay attention to things like TV programs, books or magazine articles, your work, etc.

3. You may have trouble sleeping or you may sleep too much. The most classical sleep pattern is that you fall asleep OK and then wake up in the middle of the night for no reason. Then you can't fall back asleep again easily, and you're tired all day the next day.

You may lose weight because of loss of appetite, or you may eat when upset and gain weight.

5. You may lose the ability to enjoy yourself; having fun is just too much trouble. And your interest and ability to respond sexually may just disappear .

Depressed patients frequently tell us their families or co-workers complain how crabby they are. The patient has no idea why they're so quick to get angry and snap back. Sometimes a marriage becomes threatened just because one partner is depressed.

Xou may have a variety of a ches and pains. This is such a common problem that many depressed patients complain primarily of physical symptoms such as headache, muscle aches in the neck and back, and an upset stomach, gas, or constipation. Believe it or not, as a rule most of these symptoms go away when your depression responds to treatment.

8 You may feel sad or blah or blue or down much of the time for no reason. This sad mood becomes the strongest when you are relaxing and have nothing much to do; it often goes away at work or when you are busy. It may be worst first thing in the morning and get better as the day progresses. You may cry for no reason every day or several days a week.

9 You may feel guilty or bad or upset with yourself for no reason. You may like yourself very little, feel that you are not a worthy person or are the worst person on the face of the earth. If you also feel hopeless (a very common experience), you may feel there is nothing to live for and contemplate taking your own life. Warning: depression can be a fatal illness if not treated.



WHY am I depressed? What can I do about it?

Depression is not your fault! It is caused in most people by an imbalance of brain chemicals and is often inherited. So it is a *physical* illness. Some people feel mildly depressed much of their lives. Others have episodes of depression now and then, sometimes during periods of stress

How do you treat depression?

Depression can be successfully treated 80% to 90% of the time. Treatment consists of antidepressant medications, psychotherapy, or both, depending upon your situation. We'll talk about these options.

Patients frequently assume that antidepressant medication is habit-forming or some sort of upper or downer, a tranquilizer or a "mood pill." Or it makes you "hooked" on it. As you'll discover, this medication is actually quite different from that. Its purpose is simply to help you to feel *normal*: not high, not low, not happy, not sad, just normal. So if you've been going through life with a black cloud hanging over your head, the cloud goes away, and you feel normal again. Same you, same life, same problems. The way we know the medication is working is when you feel better and function better, too. You're better able to deal with your problems, and with just getting though life in general.

One reason why the medication is so safe is that it can't cover up your problems. If it doesn't work, **nothing happens.**

Not everyone requires medication, and for many others, nondrug treatments are an important adjunct to other therapy. Exercise is probably number one on the list: walk two miles a day as fast as you can (if you're fit, in half an hour or less). It may take a while before you can go this far this quickly. Second, avoid junk food, particularly sugar and fatty foods. Finally, it seems obvious that vitamins would be helpful, but they are ineffective.

It is possible to treat mild or moderate chronic depression without drugs. A special kind of psychotherapy called *cognitive behavioral therapy* (CBT) has been proven to relieve depression for years. Once treated, it is often gone for good. Rather than talking about your problems, CBT shows you how your thoughts make you depressed, and how to change what you think. It requires a specially trained therapist. but often for no reason. Still others become depressed after a particularly upsetting event, such as a divorce or death of a spouse. (By the way, it is important to distinguish normal grieving—which should not be treated with medication—from the illness of depression, which is quite different and should be treated). Finally, certain medications can cause depression, particularly some of the drugs used to treat high blood pressure and heart disease.

F these symptoms fit your current situation, here are some thoughts about what to do next. First, if you drink heavily or daily, or if you use cocaine or other drugs, tell us about this. Your depression is a direct toxic effect of your drinking or drug use. Nearly half of all suicides are in individuals who drink or do drugs! The usual antidepressant treatments do not work in this situation until you've been in treatment and clean and sober for two months or more (and then your depression usually goes away by itself).

Second, it is important to discuss this illness over with your spouse or other family members. Show them this handout and discuss it with them. Be sure your family understands that depression is not your fault and no amount of "will power" will help. You need treatment.