

Depression: Q and A



What is depression?

Depression is more than just feeling down or low. It is natural to temporarily feel 'down in the dumps' from time to time, especially if you are going through an upheaval, loss or stressful situation. Some people refer to this as 'feeling depressed'. However, if these feelings are intense and persist over weeks or months and if they stop you enjoying or even doing your normal activities, it's likely that you have depression. Depression is a serious illness that can have a great impact on your everyday life. It's not something you can normally 'just snap out of'.

Worldwide, depression is among the leading causes of disability. As well as being disabling in its own right, depression is a risk factor for self-harm and suicide, and for coronary heart disease.

How common is depression?

Depression is very common. On average, one in 6 people will experience depression in their lifetime. So, if you have depression, you're by no means alone.

What are the symptoms of depression?

The symptoms of depression	
Key symptoms	Other symptoms
<ul style="list-style-type: none">▶ Feeling depressed, unhappy or teary▶ Loss of interest or pleasure in activities	<ul style="list-style-type: none">▶ Feeling tired or 'run down'▶ Significant changes in weight or appetite▶ Difficulty sleeping or sleeping more than usual▶ Slowing of movements or speech, or restlessness▶ Poor concentration, difficulty making decisions▶ Feeling worthless or excessively guilty▶ Thoughts of death or suicide

Not surprisingly, if you are experiencing these symptoms, you may stop doing things you previously enjoyed and, if the symptoms are severe, you may find it hard to communicate with others. In this way, depression can lead you to withdraw socially and become isolated. You may feel overwhelmed and be struggling to keep on top of things at work or at home.

Depression can also have other symptoms like headaches and muscle pains, indigestion, constipation or diarrhoea and lowered sex drive. If these physical symptoms are more obvious than feeling unhappy, people may not even realise they are depressed.

What causes depression?

Depression is a complex illness, and there is seldom only one cause. While depression can be triggered by a stressful life event in some people, it develops 'out of the blue' in others. On a biochemical level, experts believe that an imbalance in brain chemicals can be triggered by a combination of genetic vulnerability and external factors like those described below.

Genetic factors

Some people may have a genetic tendency to develop depression. However, depression does not always run in families, and not everyone with a family history of depression will become depressed.

Stressful life events (such as loss of a relationship or job)

Unhappy experiences in childhood or in relationships can increase the risk of depression, while good experiences such as a close relationship with a parent or friend or feeling that you have a 'purpose in life' can be protective.

Medicines

In some people, depression can be triggered by long-term use of certain medicines, including some medicines to control high blood pressure, sleeping tablets and occasionally the oral contraceptive pill.

Alcohol and recreational drugs

The relationship between these substances and depression is complex and not fully understood. Some people with depression find themselves relying on recreational drugs or alcohol to cope with their symptoms. However, as well as causing many health problems of their own, these substances can actually contribute to depression. This may be because of their actions on brain neurotransmitters—chemical messengers that allow nerve cells to communicate with each other.

Chronic (long-lasting) illness

Illnesses such as diabetes, heart disease, stroke, cancer and Alzheimer's disease can increase the risk of depression, as can an underactive thyroid.

Personality

Certain personality tendencies like being overly dependent, self-critical, pessimistic or easily overwhelmed make you more likely to become depressed.

What types of depression are there?

Doctors and other healthcare professionals may classify depression in different ways. Some believe depression is broadly one condition with different levels of severity, while others find it valuable to classify it into distinct subtypes. Here are some terms you may come across.

Major depression

Major depression (also called clinical depression) means at least 2 weeks of low mood or loss of interest accompanied by at least 4 of the 'other' symptoms described in the second column of the table above. People with major depression have considerable distress or find it hard to function in their daily lives.

Dysthymia

This is a relatively mild but chronic low mood. It is diagnosed if you have had at least 2 years of low mood for most of the day on more days than not, but your symptoms are not consistent with those of major depression. Dysthymia is not usually disabling, but it does increase the risk of more severe depression.

Psychotic depression

This is also called major depression with psychotic features. People with this uncommon type of depression have a severely depressed mood. The hallmark of this type of depression is psychosis, meaning that the person's mental state is grossly distorted and that they have lost touch with reality. Someone with psychotic depression will have either hallucinations (such as hearing voices saying bad things about them) or, more commonly, delusions (fixed, firmly held false beliefs, often very disturbing in their nature, such as believing they are the cause of certain bad things happening in the world).

Atypical depression

This form of depression has slightly different symptoms than the typical form, and tends to occur earlier in life. Most people with major depression have trouble sleeping and lose their appetite; in contrast, people with atypical depression tend to oversleep and overeat. In addition, in most cases of major depression your mood remains flat despite what may be happening in your life; however, in atypical depression, although you are predominantly sad, your mood may fluctuate in response to specific events.

Other disorders that feature depression include antenatal and postnatal depression; bipolar disorder; seasonal affective disorder; and adjustment disorder.

What should I do if I think I have depression?

You may feel reluctant or embarrassed to seek advice, but remember that getting help for depression is not a sign of weakness.

Depression is not something you can treat on your own, and it is important that you seek help from a general practitioner (GP) or mental health professional. Your GP is often the best person to speak to initially, and it's a good idea to ask for a long appointment so that you have time to talk things through, complete an assessment and discuss treatment options. Your GP may refer you to a specialist such as a psychiatrist or psychologist, or to a local specialist mental health centre.

The kind of treatment that your doctor suggests will depend on the type and severity of your depression, your general health and any other illnesses you may have. Options include medicines and psychotherapies (talking treatments).

Different types of psychotherapy may be used to treat depression:

- ▶ **Cognitive-behavioural therapy (CBT).** This is based on the idea that your thoughts (rather than other people or situations) determine how you behave. CBT aims to replace unhealthy, negative thoughts and behaviours with healthy, positive ones.
- ▶ **Interpersonal therapy (IPT).** This focuses on your current relationships with other people and aims to improve your interpersonal skills — how you relate to others including family, friends and co-workers.

If you are thinking about harming yourself, you should contact your mental health centre or GP immediately. If they are not available, call a telephone support line such as Lifeline or Kids Help Line.

What can I do to help myself?

- ▶ **Have regular appointments with your doctor.** He or she will monitor your progress, support you, and adjust your medicines if necessary. A trusting relationship with your doctor is helpful, so it's important to be honest about how you are feeling and to tell him or her about any side effects of treatments.
- ▶ **Take your medicine as prescribed.** You may need to try several medicines to find the right one, and it may take several weeks till you start seeing results. It is important though that once you do start to feel better, you continue to take your medicine as long as advised — this helps reduce the risk of relapse. Don't stop taking medicine for depression without first discussing it with your doctor or specialist.
- ▶ **Try to avoid becoming isolated.** Make the most of family and friends' support. You may also find there is a self-help group in your area run by people who have recovered from a mental illness.
- ▶ **Maintain a healthy lifestyle.** Eat a balanced diet, and try to get the right amount of sleep and exercise. It may seem difficult to motivate yourself, but exercise can help improve some types of depression and help you relax. It can also be helpful to reduce the amount of stress in your life if that is possible.
- ▶ **Avoid alcohol and recreational drugs.** These can hinder your recovery and can have detrimental effects on brain function.

How long does depression last?

On average, an episode of major depression lasts 4 to 8 months, although this duration can be shortened by treatment.

What is the outlook for people with depression?

Depression can recur; 60 per cent of people who have a depressive episode do not have another during the next year, while the remaining 40 per cent do. The risk of recurrence is higher for people who have had 3 episodes of depression. The pattern of relapse (recurrence) of depression varies — some people have long periods free of depression, others have clusters of episodes, and still others have more episodes as they get older.

Nonetheless, most people with depression can be treated successfully; with proper treatment, most people with serious depression improve and can get back to their normal lives.

National Helplines

If you or someone you know is depressed and/or having suicidal thoughts, see your doctor, or phone one of these helplines.	
Lifeline (24 hours)	13 11 14
Kids Helpline (under 18 years of age)	1800 55 1800
Just Ask - rural mental health information	1300 13 11 14
Mensline Australia (24 hours)	1300 78 99 78
SANE Helpline - mental illness information, support and referral	1800 18 SANE (7263)

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