

Depression: It has many faces...and is treatable!

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According to the Center of Disease Control, it is estimated that only about 17% of adults in the U.S. are “considered to be in a state of optimal mental health” in that they can “realize their own abilities, can cope with normal stressors of life, can work productively, and can make contributions to their community”. This means that the rest of the adult population has a diagnosable mental disorder or health condition that impacts their ability to function in some way. The CDC goes on to say that depression is the most common diagnosis, affecting more than 26% of the U.S. adult population.

At Putnam Family and Community Services, we see many situations where depression has significantly impacted lives. Clara is a 69 year old woman, who for the most part, led a happy and productive life. She was employed and raised two children who went on to have successful careers and families of their own. She had periods of intense sadness, particularly when she was divorced after 15 years of marriage, but these were short lived and she was still able to do what was needed with minimal disruption. Then she was diagnosed with a chronic health condition. Though her health remained relatively stable over the past 2 years, she reported persistent feelings of pessimism and hopelessness. She found herself sleeping more but was always tired. Her appetite decreased and she was losing weight; she even stopped socializing with her friends, an activity she had always enjoyed.

John is a 19 year old male who recently completed his first semester of college. Though he was a good student in High School, he really struggled with his classes and the social environment of college. He became increasingly irritable and would often have outbursts of anger over things his dorm mates described as being very minor. As a result, he began avoiding social situations. He began to snack frequently which led to his gaining weight and lowering his self-esteem further. He had difficulty concentrating in class and his grades suffered.

Though some of their symptoms are different, both were diagnosed with a form of depression. Let’s look at Clara. Since she described feeling symptoms for over 2 years, she was diagnosed with persistent depressive disorder. Her emotional symptoms were feelings of hopelessness and a loss of interest in activities. Her physical symptoms include sleeping too much and loss of appetite. John, on the other hand, had the emotional symptoms of irritability and difficulty managing his anger. His physical

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symptoms were increased appetite, weight gain, and difficulty concentrating. Since John's symptoms persisted well over 2 weeks but significantly less than 2 years, he was diagnosed with having an episode of major depression. A person can just experience one episode of depression in a lifetime, but it is more common to experience multiple episodes. Though these two examples exhibited different symptoms of depression, what they had in common was the significant impact the symptoms had on their ability to function productively.

The examples illustrate two forms of depression, persistent depression and major depression, but there are other forms as well. Postpartum depression is estimated to affect 10-15 percent of women after giving birth. Seasonal Affective Disorder (SAD) is characterized by the onset of depression during the winter months when there is less natural sunlight. Psychotic depression occurs when a person experiences severe depression plus a form of psychosis with delusions or fixed false beliefs and/or hallucinations such as seeing or hearing things that others do not. Not as common as Major Depression or Persistent Depression, bipolar disorder, once called manic depression, is characterized by mood shifts from severe lows (depression) to severe highs (mania) or mild highs (hypomania). It should be noted that women are more likely to experience depression than men and the percentage of young adults between the ages of 18-22 who report an episode of major Depression is on the rise.

There is no single cause for depression. Although depressive illness is considered a disorder of the brain, it is usually a combination of biological, environmental, and psychological factors. All too often each one of us could describe someone in our lives, whether it be a family member or an acquaintance, who suffers from depressive symptoms. We might know some risk factors such as a traumatic event, a loved one passing away, substance abuse, a chronic medical condition, or they were involved in a stressful situation. Other times, there may be no obvious trigger. However, once depression is diagnosed, it can be effectively treated, even in the most severe cases.

A person with depression can be treated in several ways, with the most common being medication and talk therapy. There are several different types of antidepressant medications. The most common and probably most well-known are Prozac, Zoloft, Lexapro and Cymbalta. It is important to note that it can take at least 4-6 weeks before the person feels the full effect of the medication. This can be a vulnerable time for a person starting medication as it is often the expectation that positive effects will be felt immediately. In the case of Clara, she received extra support from her therapist during her introduction to the medication. Unfortunately, the first medication did not make her feel better, but through discussions with her psychiatrist her medication was switched and the new medication had positive effects. Given the severity of her depression, she will most likely need to remain on the medication indefinitely. However, she consistently discusses her options with her therapist and psychiatrist.

Similar to most medications, antidepressants, though relatively safe, can have unintentional side effects, especially among adolescents and young adults. Possible side effects include a worsening of depression, suicidal thinking or behavior, or any unusual changes in behavior. When taking any medication, it is

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always important to be aware of the potential risks and the benefits. John and his family had numerous discussions with his primary physician and his psychiatrist before deciding to try a course of medication. He also had a full range of social supports in place to help monitor his behavior and raise alerts if needed.

In addition to medication, both Clara and John engaged in individual psychotherapy. Cognitive Behavioral Therapy (CBT) is a type of psychotherapy that focuses on assisting individuals to restructure their negative thought patterns. This technique assists people in interpreting their environment in a more positive and realistic way as well recognizing the things that may be contributing to the depression. For example, John was able to recognize how overwhelmed he felt with the social aspects of living on a college campus and what he could do to potentially change that. At present, he feels much more prepared and optimistic about returning to school, and fully anticipates continuing his treatment at least through the next semester. The critical message in these real life scenarios is that treatment is essential in combating depression. Treatment, whatever form that may take, does allow for someone with depression to have the opportunity to live a full and productive life. Untreated depression can have devastating effects that can lead to substance abuse, chronic aches and pains, disruptions in school, work, and relationships, and the ultimate price, death by suicide.

If you think either yourself or someone you know may be suffering from a form of depression, seek information and help. Living with a diagnosis of depression may not always be easy and there are adjustments that might need to be made but it is a treatable illness. You will be glad you did.

On line Sources:

The Center for Disease Control and Prevention

<http://www.cdc.gov/mentalhealth/basics/mental-illness/depression.htm>

National Institute of Mental Health

<https://www.nimh.nih.gov/health/topics/depression/index.shtml>

Anxiety and Depression Association of America

<http://www.adaa.org/>