

**M.I.N.D**

Depression



Introduction

Depression is a mood disorder that involves the body and the mind. Depression is not the same as a passing sad mood, nor a sign of personal weakness. Depression is a medical condition characterized by many symptoms emerging together: sadness, loss of interest in activities, loss of pleasure in previously enjoyed activities, decreased energy, decreased confidence and self-esteem, diminished concentration, disturbance of sleep and appetite, inappropriate thoughts of guilt over past acts and, at times, death wishes.

A depressed person for example, looks sad most of the times, loses interest in activities that were enjoyed, feels fatigued, and has difficulty concentrating or remembering things as well as making decisions. That person might also get restless, edgy and easily irritated.

The appetite disturbance in Depression may manifest in either poor appetite, which can lead to weight loss, or increased appetite, which can lead to weight gain. The sleep disturbance in Depression may manifest in having trouble sleeping (insomnia) or sleeping more than the usually needed amount of hours (hypersomnia).

There are many types of Depression; it can be Unipolar where the mood disturbance is characterized by feeling sad or down during each episode, or it can be part of a Bipolar Disorder where some episodes are characterized by depressed mood and others the complete opposite, with euphoric and elated (or irritable) mood associated with increased levels of energy, talking a lot, spending much more money than usual, and decreased need of sleep, a state also known as mania (or hypomania).

Depression can also be seasonal where depressed mood, low energy and increased appetite predominate in the winter months and usually get better in spring and summer.

This is known as Seasonal Affective Disorder (SAD) and is probably related to the intensity of light that reaches the brain. Depression may occur in women after giving birth (postpartum).

Although some degree of “baby-blues” is anticipated after childbirth, this period may manifest with more severe forms of Depression probably due to the massive physiological changes taking place.

Overview and facts

According to the research done by IDRAAC, Depression affects 9.9 % of Lebanese adults, so 1 out of 10 Lebanese have or will have depression in their lifetime. Depression is a common disorder and is reported to occur in nearly 10-15% of all men and 20-25% of all women at least once in their lifetime. While Depression may occur as only one single episode in a person's lifetime, for many it is a recurrent disorder with repetitive episodes.

Symptoms

Depression is suspected when a person experiences a change from their previous usual state. The major symptoms are:

- Persistent sadness or irritability
- Lost of interest or pleasure in activities that were previously enjoyed
- Feelings of fatigue and loss of energy
- Sleeping too much or too little
- Eating too much or too little
- Difficulty concentrating
- Loss of self-confidence and negative thoughts about one's self and one's life

Causes and Risk Factors

There are a number of factors that may increase the chance of depression, including the following:

- Abuse. Past physical, sexual, or emotional abuse.
- Conflict or disputes with family members or friends.
- Major events. Even good events such as starting a new job, graduating, or getting married can lead to depression. So can moving, losing a job or income, getting divorced, or retiring.
- Death or a loss. Sadness or grief from the death or loss of a loved one, though natural, may increase the risk of depression.
- Serious illnesses. Sometimes depression co-exists with a major illness or is a reaction to the illness.
- Genetics. A family history of depression may increase the risk.
- Certain medications. Some drugs, such as Accutane (used to treat acne), the antiviral drug interferon-alpha, and corticosteroids.
- Substance abuse. Nearly 30% of people with substance abuse problems also have major or clinical depression.
- Other personal problems. Problems such as social isolation due to other mental illnesses or being cast out of a family or social group can lead to depression.

Test and Diagnosis

To effectively diagnose and treat depression, the doctor must hear about specific symptoms of depression. While a physical examination will reveal a patient's overall state of health, by talking with a patient, a doctor can learn about other things that are relevant to making a depression diagnosis. A patient, for example, can report on such things as daily moods, behaviors, and lifestyle habits.

A doctor can rule out other conditions that may cause depression with a physical examination, personal interview, and lab tests. The doctor will also conduct a complete diagnostic evaluation, discussing any family history of depression or other mental illness.

A doctor will determine whether a patient has major depression, dysthymia, or mild, chronic depression, seasonal affective disorder or SAD, bipolar disorder (manic depression), or some other type of clinical depression.

A depression diagnosis is often difficult to make because clinical depression can manifest in so many different ways. Observable or behavioral symptoms of clinical depression also may sometimes be minimal despite a person experiencing profound inner turmoil. Depression can be an all-encompassing disorder, and it affects a person's body, feelings, thoughts, and behaviors in varying ways.

Treatment

The main treatments for depression are:

- Psychotherapy which involves working with a therapist to reduce symptoms.
- Medication such as antidepressants. Many chemicals are involved in the brain circuits that regulate mood. Three known important chemicals are norepinephrine, serotonin, and dopamine, which are neurotransmitters. Neurotransmitters transmit electrical signals between brain cells. Researchers have found a link between a chemical imbalance in these brain chemicals and depression. Antidepressant medications increase the availability of neurotransmitters or by changing the sensitivity of the receptors for these chemical messengers. It is believed that modifying these brain chemicals can help improve mood.
- Combination of psychotherapy and medication
- Brain stimulation techniques such as electroconvulsive therapy (ECT), also called electroshock therapy, transcranial magnetic stimulation (TMS), or vagus nerve stimulation (VNS).

It is important to note that there are no "instant" solutions and being patient is very important. You may have to try different antidepressants to find the most effective drug for you. In addition, you will have to take the antidepressant for several weeks to see if it benefits you.

Sources and Links

www.mayoclinic.org

www.webmd.com