

Depression

by The Immaculata Mental Health Ministry

Major depression affects 9.9 million American adults, approximately 5% of the adult population, each year. Unlike typical emotional experiences of sadness, loss or passing mood states, major depression is persistent and can significantly interfere with one's thoughts, behavior, mood, activity and physical health. Major depression is the leading cause of disability in the U.S. and nearly twice as many women as men suffer from it.

The symptoms of depression include a persistent sad or irritable mood; pronounced changes in sleep, appetite and energy; difficulty thinking, concentrating and remembering; physical slowing or agitation; lack of interest in or pleasure from activities that were once enjoyed (anhedonia), feelings of guilt, worthlessness, hopelessness and emptiness; recurrent thoughts of death or suicide; and persistent physical symptoms that do not respond to treatment, such as headaches digestive disorders and chronic pain.

There is no one single cause of major depression. Psychological, biological and environmental factors may all contribute but whatever the specific causes, scientific research has confirmed that depression is a biological brain disorder.

Major Depression is only one of several types of mood disorders. One mood disorder subset that may affect some at this time year is Seasonal Affective Disorder. In most cases, SAD symptoms appear during late fall or early winter and resolve during the sunnier days of spring and summer. The reduced level of sunlight in fall and winter may disrupt circadian rhythms and cause a reduction in brain chemicals that affect mood and sleep. Symptoms may include sadness, low energy, sleep disturbances (too much or too little), overeating and carbohydrate cravings.

The good news is that depression is highly treatable. Mainline treatments may include psychotherapy, medication, lifestyle changes, Transcranial Magnetic Stimulation (non-invasive magnetic pulses used to stimulate specific mood centers of the brain) and, for treatment-resistant depression, Electro Convulsive Therapy (ECT). With treatment, 80-90% of those suffering from serious depression can be effectively treated and return to normal daily activities.

When several symptoms of depression occur, last longer than two weeks and interfere with ordinary functioning, professional treatment is needed. Contact your Primary Care Provider, Psychiatrist or Psychotherapist. Members of the Immaculata Mental Health Ministry are also available for Information & Referral to supportive services: Call (619) 574-5703 or email lmartinspencer@sandiego.edu

How family members can help: Learn the signs and symptoms of depression. Communicate to your loved one about what you've noticed and why you're concerned. Explain that depression is a medical condition, not a flaw nor personal failing. Assist in setting up appointments with

medical providers, help prepare a list of questions for those medical providers and encourage compliance with treatment. Create a low-stress environment. Locate helpful support organizations. Encourage participation in spiritual practice. Be willing to listen. Provide positive reinforcement. Communicate hope. Make plans together. Be patient. Identify warning signs of worsening depression and suicide risk. If self-harm or active suicidal thoughts exist, do not leave your loved one unattended. Contact the San Diego County Access & Crisis Line at (888) 724-7240, Dial 911, or proceed to the nearest emergency room.

1. _Burland, Joyce, PhD, *Major Depression*, National Alliance of Mental Illness, Arlington: 2004.

2. American Psychiatric Association, *Major Depressive Disorder*, Diagnostic and Statistical Manual of Mental Disorders, Washington, 2013.

3. Mayo Foundation for Medicine, Education & Research, *Family Health Book*, Rochester: 2022.