

Keys to Recovering from Depression



INTRODUCTION

Depression is a common and serious disorder. Every year, depression affects nearly 10% of adult Americans over age 18. Depression takes a big toll in suffering, costs industry billions of dollars, and can lead to suicide in some severe cases. Family, friends, health, work, or school can all be seriously impacted by the disease. However, depression is a very treatable disease. There is hope.

We have designed this workbook with three main goals in mind:

-  First, for those who have already been diagnosed with a form of depression and are in treatment, we want to help you learn as much as you can about depression. We have included up-to-date information about what depression is (and what it isn't). There are some common myths about depression. We believe that the more you understand about depression and the challenges you may face like medication side effects, the more likely you are to get the full benefit of treatment. Wrong information about depression causes some people to stop treatment too soon or they may not follow the treatment plan agreed upon with their doctor or therapist.
-  Secondly, to help you start treatment for depression and stick with it. There are several treatment options. Your doctor may recommend “talk therapy” or “counseling” or medication with antidepressants or a combination of both. These treatments have been shown to successfully treat depression. A combination of medications and psychotherapy is used to treat many people. Your doctor can help you decide what may work best for you.
-  Third, although treatment for depression is helpful for most people, there are things that you can do in addition to treatment that may help you to feel better more quickly. We have compiled additional suggestions in this workbook from experts in behavioral health care. Your doctor or therapist has probably told you some of these. Because depression is an illness that tends to come back again, learning some different ways to think and building new support systems will make it less likely that you will get depressed again after you finish treatment.

If you are reading this book and you are experiencing depressive symptoms, but have not been diagnosed with depression or started in treatment, please continue to read through this work book anyway. The information here can help you to decide to see a doctor or mental health therapist for evaluation and/or treatment.

We hope that you will take the time to work through the activities and exercises in this workbook. If you don't have much energy, break it into small sections. Just do a little bit at a time until it is done. We have also included resources for additional information.

Key 1

Accurate Information About Depression That Will Help You

Depression is a disease.

Scientific research shows that depression affects certain centers in the brain that affect moods, thinking, sleep, appetite, and behavior.

You are not alone: depression is a common disorder

- 🔑 Depression affects nearly 10 percent of adult Americans ages 18 and over.
- 🔑 Based on 2006 census data it was estimated that more than 21 million people suffer from depression.
- 🔑 Depression affects twice as many women, (12 percent) as men (7 percent).
- 🔑 Depression may come back later in your life, though many people only have one episode.

Symptoms of depression

Not everyone who is depressed experiences every symptom. Some people experience a few symptoms, some many. Severity of symptoms varies with individuals and also varies over time. Symptoms can include:

- Sad mood, frequent crying
- Feeling hopeless
- Loss of interest or pleasure in activities that were once enjoyed
- Change in appetite or weight
- Difficulty sleeping or oversleeping
- Physical slowing or agitation (“jumpy,” “edgy”)
- Loss of energy
- Feelings of worthlessness
- Guilty feelings
- Difficulty thinking or concentrating (more common in men)
- Thoughts of death or suicide
- Persistent physical symptoms, such as headaches, digestive disorders, and chronic pain that do not respond to routine treatment (more common in men)
- Anxiety, with or without a specific feeling of being depressed.



Specific Cultural Considerations

Possible differences in symptom presentation may influence the way depression is recognized and diagnosed among minorities. For example, African Americans are more likely to report appetite changes and body aches and pains. For African American women fatigue may be the only sign of depression, while anger is another common symptom among African American women and men. In addition, people from various cultural backgrounds may view depressive symptoms in different ways. Many depressed Chinese people do not report feeling sad, but rather express boredom, discomfort, feelings of inner pressure, and symptoms of pain, dizziness, and fatigue.

Keeping yourself safe

Because there is effective treatment for depression, it is very important to keep yourself safe until your depression symptoms subside. **If you have been thinking about death frequently or even about harming yourself or someone else, call your doctor or mental health professional immediately or call 911 in an emergency.**

Other ideas for maintaining your safety:

- 🔑 Distract yourself from thoughts about harming yourself - instead try to get involved in an activity that has been enjoyable.
- 🔑 Do not stay alone - go out among other people.
- 🔑 Call a supportive friend.



What are the “types” of depression?

The most common types of depression are:

Major Depressive Disorder (MDD) – This is the most serious form of depression. An “episode” of major depression involves many of the signs and symptoms noted above, especially depressed mood and lost of interest or pleasure in “usual” activities. These happen most of the day, nearly every day for at least two weeks. Once someone has an episode of major depression, he or she may experience more episodes at some time in their lifetime.

Dysthymia – This is a less severe form of depression but it has gone on longer, for at least two years. The most common features of dysthymia are loss of appetite or overeating, sleeping too much or too little, lack of energy or feeling tired all the time, low self-esteem, trouble concentrating, and feelings of hopelessness. Some people may have both dysthymia and an episode of major depression at the same time, which is called double depression.



Bi-Polar Depression – Depression can also happen as part of another serious disorder called “bipolar disorder.” This illness can present as a depression, mania or a combination of both. People can have a combination of a depressed mood and drastically increased energy and agitation (manic episode). Bipolar disorder (also frequently called “manic depressive disorder”) runs in families and seems to be a disorder of the body’s chemical regulation system. Certain special medications, such as lithium carbonate, are used to treat bipolar disorder. Other Medications are used for the depression when it presents as only depression (Unipolar Depression).

Seasonal Affective Disorder (SAD) – Some people become depressed in the winter. This seems to be because of less sunlight. This is called “Seasonal Affective Disorder” or SAD. Symptoms, which include depression, typically come and go at the same times every year. This is not simply a case of ‘winter blues’ and should not be ignored.

Depression is also very common among individuals diagnosed with a substance abuse disorder. This is commonly referred to as a dual diagnosis. In those cases, both disorders must be dealt with in treatment.

Depression can also go along with many physical disorders. These are sometimes referred to as “co-occurring disorders.” Heart patients, for example, have high rates of depression. It is important to recognize the depression in these cases and to get help, as depression may make recovery from the physical problems more difficult.

What causes depression

In depression, chemistry is out of balance in the brain’s centers that monitor positive and negative feelings. Most experts believe that this has a number of “causes” including:

- 🔑 Heredity: Depression seems to run in families. Some people seem to be born with the tendency to become depressed, especially when they are under stress.
- 🔑 Chemical changes as a result of abusing drugs or alcohol.
- 🔑 Major life stress, upsetting life events, or many stresses that “pile up.” The person may feel that he or she can’t cope with all the stresses and become sad and depressed.

These can include:

- Family or marriage problems
- Job problems

- Medical illnesses
- Disability
- Natural disasters (fires, floods, storms)
- Crime victims
- Financial problems
- Losses such as the death of a loved one
- Coping with old age
- Chronic Illness such as diabetes, asthma, congestive heart failure, and COPD. (It has been noted that individuals diagnosed with COPD, and who were also being treated for symptoms of depression, had a more favorable outcome if onset by a coronary event)

Depression is not a weakness of character

- 🔑 Getting depressed does not mean you are weak. Depression is a disease and usually needs treatment.
- 🔑 No one is to blame for your being depressed. You are not to blame.
- 🔑 Many people are ashamed to admit they are depressed, but depression is a disease. It is not your fault that you have it.
- 🔑 Sometimes people tell you to “snap out of it” because they don’t understand it is not your fault.

Depression can be treated effectively

- 🔑 There are proven effective treatments for depression.
- 🔑 Medications, “talk” therapy, or a combination of the two have been found to be helpful in reducing depression for most people.
- 🔑 Many people who have been in treatment for depression are able to go back to working, and living their lives very much as before they became depressed
- 🔑 People who get depressed only in winter, who have Seasonal Affective Disorder (SAD) may be helped using a special “light box.”
- 🔑 Sometimes depressed people are not able to care for themselves and their depression does not respond to therapy and medications. In these cases, their doctor may recommend ECT. Modern ECT is an alternative treatment that is comfortable, safe and effective and has helped many people return to enjoyable lives.
- 🔑 People who have had depression may get depressed again. But you may be able to reduce the risk of another depression by learning some ways to take care of yourself. You may be able to learn how to recognize another depression early and get help. More information is in the references at the end of the workbook or can be obtained through your doctor.

Key 2

Antidepressant Medications Can Help You Recover From Depression

Types Of Antidepressant Medications:

Most people with depression are helped by medications. Antidepressant medications are not habit-forming and are considered safe when taken as directed. Most people have few, if any problems.

Medications affect the nerve impulses that travel between nerve cells in the positive and negative emotion centers of the brain. This helps the transmission of signals that restore normal nerve function and stabilize mood.

There are several types of antidepressant medications used to treat depression. Some people are helped more by one type of medication than another. Medications differ in their side effects and cost. However, all classes of medications tend to work equally well in reducing depression. Sometimes your practitioner will suggest trying several different medications to find the one or combination most helpful to you. Frequently, the initial dosage needs to be adjusted to find the most effective dose for you. It is important to work together with your doctor to find the best antidepressant medication and dose for you



Taking medications:

You may begin to feel better in the first few weeks but sometimes it can take as long as 8 weeks for these medications to be fully effective

- 🔑 Patients often stop medication too soon. They may feel better and think they don't need it. Or they may think it's not working. But it is important to keep taking medication until it has a chance to work.
- 🔑 Always talk to your doctor (or other prescribing professional) before stopping any medication.
- 🔑 Even when you are feeling better, you may need to take the medication for 4 to 9 months to prevent the depression from coming right back.
- 🔑 Some medications must be stopped gradually. Some may cause "withdrawal" symptoms if stopped suddenly.

Mixing with other medications and foods:

Some medications cannot be mixed with certain other drugs or foods.

- Without talking to your doctor, never mix different types of medications, even those you can buy “over the counter,” with antidepressants. Some antidepressants, while safe when taken alone, may cause problems when mixed with other drugs.
- Alcohol and “street” drugs keep antidepressants from working properly. Avoid alcohol and “street” drugs. These substances interfere with the nerve impulses when the impulses travel between nerve cells in the positive and negative emotion centers of the brain.
- Most antidepressants do not require you to modify the foods you can eat. People who take one class of medications, called MAOI’s, may need to avoid certain foods that contain a chemical called “tyramine.” These medications and the tyramine, in some cases, when mixed together, can cause high blood pressure and strokes. If you are taking MAOI’s, your doctor will have given you a list of foods to avoid and it is very important that you follow these warnings carefully.

If you have side effects:

Antidepressants may cause mild, usually temporary, side effects in some people. These are not usually serious but should be reported to your doctor as soon as possible. The most common side effects and some suggestions for dealing with them include:

- Dry mouth* - Take sips of water or chew sugarless gum.
- Constipation* – Bran cereals or prunes in your diet help.
- Bladder problems* – You may experience some mild problems emptying your bladder fully. Any significant difficulty or pain should be reported to your doctor right away.
- Blurred vision* – This is usually temporary and doesn’t usually require any special glasses or treatment.
- Dizziness* – You may notice this when getting up from bed or a chair. Do so slowly if this affects you.
- Drowsiness during waking hours* – This is usually temporary. But if you feel dizzy or drowsy, do not drive or use machines.
- Headache* – This is usually a temporary problem. Usually responds to common “over-the-counter” remedies. Discuss with your doctor if severe or persistent.



🔑 *Nausea* – Usually noticed right after taking the medication and temporary.

🔑 *Nervousness, trouble going to sleep* – Usually early in treatment and temporary. In some cases dosages must be changed if this continues.

🔑 *Agitation (jittery feelings)* – If this does not go away after a short time, consult your doctor.

🔑 *Sexual problems* – These are usually mild and can go away over time. If these worry you, your doctor will be receptive to discussing your concerns.



Key 3

Practicing Positive Thinking Can Help You Feel Better

- 🔑 Have you ever heard the saying that “a glass can be half empty or half full?” This shows how it is possible to think in different ways about the same thing. When you see a glass as “half full,” this is a “positive” thought. You are looking for good things about the situation. When you see the same glass as “half empty,” this is a negative thought. You are looking at the bad parts of the same situation.
- 🔑 The same thing can be true of your life. If you look at your life and see only the bad parts, you are more likely to stay depressed. But if you can teach yourself to look for the good things in life, this often reduces depression.
- 🔑 Even very bad things don’t happen all the time. There are always parts of the day, or parts of your life that are going well. But when you are depressed, it is hard to see them, unless you look very closely.
- 🔑 Seeing only the bad parts of your life and worrying about them can easily become a habit. This can help keep you depressed. But looking for the good parts can become a habit too, if you practice. This may help you get over depression.
- 🔑 The same is true of thinking of the future. When you are depressed, the future looks bleak. But if you can practice thinking of good things you would like to happen in the future, you may feel less depressed.

EXERCISE

On the left, list five things that are bad or wrong with your life. On the right, list five things that are going well right now. It may take you longer to do the “good” side list. That’s OK, keep at it. Once you have made both lists, read over your “bad” list. How do you feel? Now read over your “good” list. Read them over and over. Are you surprised to notice that reading the “good” list feels better?

“Bad List” _____

“Good List” _____

Now try the same exercise but think about where you would like to be 1 year from now, or 5 years from now. List the bad things that could happen on the left, the good on the right. Which list helps you to feel better? Thought so!!

“Bad List” _____

“Good List” _____

Build a supportive professional relationship with your provider



🔑 Therapy can help you learn about your thoughts, attitudes, and actions. You can learn how these affect how you feel, and what you can do to feel better.

🔑 Change may be very hard, especially when you are depressed. A mental health therapist can help you recognize thoughts and actions that can lead to depression. He or she can help you to learn ways of thinking and acting that help you feel better.

Changing thoughts that can make you feel bad

Some thoughts and expectations lead to bad feelings and depression. Look for “good” aspects of each situation. They are always there if you look hard enough. They seem to “hide in plain sight.”

🔑 Learn to spot when you have thoughts that lead to bad feelings. You may have them all the time and not realize it. They have become a habit. Replace them with thoughts that lead to good feelings. This takes practice!

🔑 It takes the same amount of energy to say to yourself, “I will do well at this” as to say “I will fail at this.” But it feels so much better to think about doing well!

🔑 Don’t only remember those things that didn’t turn out as you would have liked. You have succeeded at many things, realize it and congratulate yourself!

🔑 Recognize “bad self-talk.” You may have “talks” with yourself that repeat “bad” thoughts over and over. Once you catch yourself doing this, practice “talking back” with positive “good” messages.

- 🔑 Realize that just because today was a bad day doesn't mean that tomorrow will be. Just because something bad happened today, it doesn't have to happen tomorrow. Think of ways to make tomorrow a better day.
- 🔑 Don't blame yourself when things go wrong. There are always many reasons for why things happen the way they do.
- 🔑 Don't blame others when things go wrong, especially loved ones and co-workers. Most things happen for a combination reasons. Practice recognizing all of the reasons for a situation and figure out what you can do about it.
- 🔑 Avoid "black and white" thinking (that is, things seem all good or all bad). Nothing is ever all bad. There are always good things to think about.
- 🔑 Don't go on and on complaining about hard times or difficulties, even going as far as making things seem worse than they really are. Focus on how things really are. Then it is much easier to think of ways to make the situation better for you.

A Story

A well known therapist and workshop leader tells workshop audiences a wonderful story about her grandmother who went to live on the shore overlooking a harbor. When she was a little girl, she would visit her grandmother's new house. The first time she visited, she looked out the back window. "Grandma," she said, "the harbor is so ugly! There are rusty fishing boats, old fish nets, barrels floating in the water. All the buildings nearby are old and rotting."



Her grandmother replied, "All that you say is true. But look at how beautiful the sun is as it sets over the water. Look at the pelicans and how sleek they are as they dive into the water looking for fish. Look at the many colors of the fishing nets and how they glisten in the sun like rainbows."

As the little girl looked out at the harbor, she found that she saw all the things her grandmother mentioned. And she was able to see the beauty. After a while, she didn't see the ugly fishing boats or the rusty barrels, she saw only the beauty.

Many times during her childhood, the girl would visit her grandmother's house by the harbor. And she always loved looking out at the beautiful scene out the back window.

And when she grew up and had a daughter of her own, she took her to her grandmother's house by the harbor. The first time, her daughter said, "Oh Mom, the harbor is so ugly! There are rusty fishing boats, old fish nets, barrels floating in the water. All the buildings nearby are old and rotting."



But her mother said to her, “All that you say is true. But look at how beautiful the sun is as it sets over the water. Look at the pelicans and how sleek they are as they dive into the water looking for fish. Look at the many colors of the fishing nets and how they glisten in the sun like rainbows...”

There is beauty in our lives, even when, because of stress and depression, all we see is ugliness. Sometimes we just need someone to point out the good things to us so we can remember to see them.

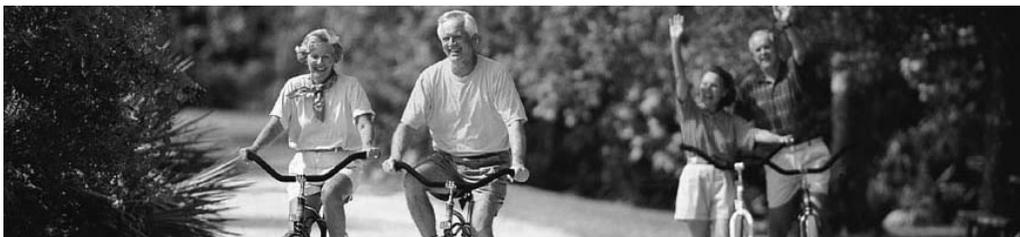
Focus on activities that help you to feel better

It often helps to change activities and usual routines. Start with the easiest:

- 🔑 Make a daily schedule. Schedule time for pleasant activities as well as routine and work tasks.
- 🔑 Increase activities that you enjoy and find pleasant and relaxing.

Focus on learning to cope with sadness, anger, and anxiety

- 🔑 Focus on thoughts and activities that are not upsetting to you.
- 🔑 Pay attention to those things that help you feel better. Try to do more of them.
- 🔑 Practice replacing negative thoughts with positive ones.
- 🔑 Practice expressing strong feelings in a calm way.
- 🔑 Keep a sense of humor.
- 🔑 Focus on the present, the “here and now.”



EXERCISE

Ask yourself the “Miracle Question”: *Imagine that you go to sleep tonight and, while you are sleeping, a miracle happens and all of your troubles disappear. But since you’re asleep, you don’t know that this miracle has happened.*

When you wake up, what things would you notice different about your life that would let you know that this miracle has happened? What things would you be doing differently if this miracle happened? For example, if the miracle happened, someone might say that they would make an appointment to get their hair cut. Or they might go out to the library or go for a walk. Make a list of things you might notice that were different about your life if a miracle happened and all your troubles and depression disappeared. Keep thinking of things until you have a good list.



Now, look at your list. Draw a circle around those things that you could do **right now**. For example, if one of the things you would do if you didn’t feel depressed is go for a walk, make an effort to schedule a walk tomorrow. If your list included dressing up and meeting a friend for lunch, try to schedule that.

These are the things that will help you to feel better and feel less depressed! Hint: If your list includes things like “My daughter and I wouldn’t be arguing,” schedule time for a fun activity with your daughter. Make it a point to avoid arguments, even if for just an hour. Just that little bit of success will help you feel less depressed. Or remember things that you did with your daughter without arguing. Try to repeat one of those activities. Small changes lead to big changes. Just as a snowball rolling down a hill will get larger as it goes.

Key 4

A Healthier Lifestyle Can Help You Feel Better

You can help yourself feel better by making healthier lifestyle choices. Here are some ideas... Think about how you can do some of these things for yourself. Which of these actions is easiest for you? Try it today! Add another tomorrow!

Always check with your doctor before starting any strenuous activity.

Make physical activity a part of your life

- 🔑 Take care of your plants or garden.
- 🔑 Take a walk.
- 🔑 Exercise.

Increase pleasant activities

- 🔑 Read a good book.
- 🔑 Play with a pet.
- 🔑 Listen to music.
- 🔑 Meditate or pray.
- 🔑 Find a relaxing hobby.
- 🔑 Spend time with a friend.



Increase sunlight

Increasing the amount of sunlight early in the day is known to affect symptoms of depression, while protecting your skin and eyes from UV rays with sunscreen and sunglasses. People with Seasonal Affective Disorder are most prone to mood problems related to reduced sunlight.

Avoid excessive alcohol or other depressants

Although alcohol and other depressant drugs seem to relieve stress temporarily, they change body chemistry. This can result in an increase in symptoms of depression.

Limit caffeine, nicotine or other stimulants especially late in the day

Caffeine, nicotine, and other stimulants cause temporary feelings of increased energy and wellbeing. However, they also can increase irritability and anxiety and disturb natural sleep-wakefulness cycles.

Eat well-balanced, nutritious meals

- 🔑 Avoid eating to relieve feelings of stress, anxiety, loneliness, or other negative emotions.
- 🔑 Avoid over-eating.
- 🔑 Avoid fad and extreme diets.
- 🔑 Adopt any changes to your diet that your physician's may have recommended.



- 🔑 Unless you have a disorder requiring modification of your food intake, adopt balanced eating habits as recommended by the “Food Guide Pyramid.” More information about the USDA’s “Food Guide Pyramid” can be found at <http://www.nal.usda.gov> or at your local library. Most of the calories should come from complex carbohydrates, vegetables, and fruits. Use milk products and meats moderately. Use fats and oils and sugars sparingly.
- 🔑 Drink enough water, at least 8 glasses of caffeine-free, sugar-free fluids daily, unless your doctor recommends otherwise.

Practice good sleep habits

- 🔑 Establish regular hours for sleep.
- 🔑 Allow enough hours of sleep that you feel alert during the day.
- 🔑 Avoid excessive physical exertion or emotional stress just prior to bed time.
- 🔑 Engage in relaxing activity prior to bedtime.
- 🔑 Establish relaxing bed time habits.
- 🔑 Do not eat large amounts of food just prior to bed or go to bed hungry.
- 🔑 There is definitely a connection between sleep problems, particularly insomnia, and depression. Talk with your doctor about any problems you have with sleeping.



Spend time with others who make you feel happy

- 🔑 Talk to friends who share your interests, goals and help you to solve problems.
- 🔑 Join a support group.
- 🔑 Family and friends can help you to cope with life problems and your symptoms.
- 🔑 Offer to help others - Ask for help if you need it.

Take a few moments to think and write down some of the things you can do this week. Pick one thing to start doing today and one thing to try tomorrow. Keep it up. You will be helping yourself to feel better soon!

Key 5

Joining a Support Group Can Help You Feel Better

Ask your mental health provider about joining a support group, or contact these organizations to find out about becoming an active member:

Depression and Bipolar Support Alliance (DBSA)

www.dbsalliance.org

DBSA offers both in-person and online support in several forms. Call (800) 826-3632 for additional information

National Alliance for Mentally Ill (NAMI)

www.nami.org

Sharing & Caring groups discuss array of mental health issues including depression for family members only (not patients). Contact NAMI at (800) 950-NAMI for more information.

Emotions Anonymous, International

emotionsanonymous.org

Adult self-help group in the 12 step model. Call (651) 647-9712 for more information.



Key 6

Why is Depression Different in Men?

Differences between Male and Female depression:

Men act out their inner turmoil while women turn their feelings inward. The following chart by *Jed Diamond* shows these differences.

Female depression	Male depression
Blame themselves	Feel others are to blame
Feel sad, apathetic, and worthless	Feel angry, irritable, and ego inflated
Feel anxious and scared	Feel suspicious and guarded
Avoids conflicts at all costs	Creates conflicts
Always tries to be nice	Overtly or covertly hostile
Withdraws when feeling hurt	Attacks when feeling hurt
Has trouble with self respect	Demands respect from other
Feels they were born to fail	Feels the world set them up to fail
Slowed down and nervous	Restless and agitated
Chronic procrastinator	Compulsive time keeper
Sleeps too much	Sleeps too little
Trouble setting boundaries	Needs control at all costs
Feels guilty for what they do	Feels ashamed for who they are
Uncomfortable receiving praise	Frustrated if not praised enough
Finds it easy to talk about weaknesses and doubts	Terrified to talk about weaknesses and doubts
Strong fear of success	Strong fear of failure
Needs to “blend in” to feel safe	Needs to be “top dog” to feel safe
Uses food, friends, and “love” to self-medicate	Uses alcohol, TV, sports, and sex to self medicate
Believe their problems could be solved only if they could be a better (spouse, co-worker, parent, friend)	Believe their problems could be solved only if their (spouse, co-worker, parent, friend) would treat them better
Constantly wonder, “Am I loveable enough?”	Constantly wonder, “Am I being loved enough?”

Men and Depression

- 🔑 In focus groups conducted by the National Institute of Mental Health (NIMH) it was discovered that men were unaware that “Physical” symptoms, such as headaches, digestive disorders, and chronic pain, can be related to depression.
- 🔑 Men were concerned that seeing a mental health professional or going to a mental health clinic would have a negative impact at work; especially if their employer or colleagues found out.
- 🔑 Men feared a diagnosis of mental illness would cost them the respect of their family and friends, or their standing in the community.

Men and Women experience depression differently and have different ways of coping with the symptoms of depression.

Men are more willing to confess feelings of fatigue, irritability, loss of interest in work or hobbies, and sleep disturbances instead of feelings of sadness, worthlessness, and excessive guilt.

‘I’d drink and I’d just get numb. I’d get numb to try to numb my head. I mean, we’re talking many, many beers to get to that state where you could shut your head off, but then you wake up the next day and it’s still there. Because you have to deal with it, it doesn’t just go away. It isn’t a two-hour movie and then at the end it goes ‘The End’ and you press off. I mean it’s a twenty-four hour a day movie and you’re thinking there is no end. It’s horrible.’

— Patrick McCathern, First Sergeant, U.S. Air Force, Retired

Instead of acknowledging their feelings, asking for help, or seeking appropriate treatment, men may:

- 🔑 Turn to alcohol or drugs
- 🔑 Become frustrated, discouraged, angry, irritable, and, sometimes, violently abusive
- 🔑 Throw themselves compulsively into their work
- 🔑 Engage in reckless behavior (such as extramarital affairs, gambling, drug experimentation), take risks or put themselves in harm’s way

“When I was feeling depressed I was very reckless with my life. I didn’t care about how I drove. I didn’t care about walking across the street carefully. I didn’t care about dangerous parts of the city. I wouldn’t be affected by any kinds of warnings on travel or places to go. I didn’t care. I didn’t care whether I lived or died and so I was going to do whatever I wanted whenever I wanted. And when you take those kinds of chances, you have a greater likelihood of dying.”

— Bill Maruyama, Lawyer

Depression in Older Men

Men must cope with several kinds of stress as they age:

🔑 They may feel stress upon retirement from the loss of an important role

🔑 Loss of self-esteem

🔑 The loss of friends and family

🔑 The onset of health problems

Depression is not a normal part of aging. Depression is an illness that can be effectively treated.

“As you get sick, as you become drawn in more and more by depression, you lose that perspective. Events become more irritating, you get more frustrated about getting things done. You feel angrier, you feel sadder. Everything’s magnified in an abnormal way.”

— Paul Gottlieb, Publisher

Identifying and treating depression in older adults is critical. There is a common misperception that suicide rates are highest among the young, but it is older white males who suffer the highest rate. Over 70 percent of older suicide victims visit their primary care physician within the month of their death. Having had a depressive illness that went undetected.

Suicide

More than four times as many men as women die by suicide in the United States, even though women make more suicide attempts during their lives. Many men with depression do not obtain adequate diagnosis and treatment that may be life saving. Family members, friends, and employee assistance professionals in the workplace also play important roles in recognizing depressive symptoms in men and helping them get treatment.

“You are pushed to the point of considering suicide, because living becomes very painful. You are looking for a way out. You’re looking for a way to eliminate this terrible psychic pain. And I remember, I never really tried to commit suicide, but I came awful close, because I used to play matador with buses. You know, I would walk out into the traffic of New York City, with no reference to traffic lights, red or green, almost hoping that I would get knocked down.”

— Paul Gottlieb, Publisher

Sometimes depression can cause people to feel like putting themselves in harm’s way, or killing themselves. Although the majority of people with depression do not die by suicide, having depression does increase suicide risk compared to people without depression.

If you are thinking about suicide, get help immediately:

- 🔑 Call your doctor’s office.
- 🔑 Call 911 for emergency services.
- 🔑 Go to the emergency room of the nearest hospital.
- 🔑 Ask a family member or friend to take you to the hospital or call your doctor.
- 🔑 Call the toll-free, 24-hour hotline of the National Suicide

Prevention Lifeline at 1-800-273-TALK (1-800-273-8255) to be connected to a trained counselor at the suicide crisis center nearest you.

Diagnostic Evaluation and Treatment

“Your tendency is just to wait it out, you know, let it get better. You don’t want to go to the doctor. You don’t want to admit to how bad you’re really feeling.”

— Paul Gottlieb, Publisher

The first step to getting appropriate treatment for depression is a physical examination by a physician. Certain medications as well as some medical conditions such as a viral infection, thyroid disorder, or low testosterone level can cause the same symptoms as depression, and the physician should rule out these possibilities through examination, interview, and lab tests. If no such cause of the depressive symptoms is found, the physician should do a psychological evaluation or refer the patient to a mental health professional.

Key 7

Why is Depression Different in Women?

Women are at Greater Risk for Depression than Men

Major depression and dysthymia affect twice as many women as men.

There are many symptoms specific to women's lives suspected to play a role in developing depression, including:

- 🔑 Reproductive
- 🔑 Hormonal
- 🔑 Passed down by generations
- 🔑 Abuse
- 🔑 Getting along with others
- 🔑 Certain emotional and lifestyle behaviors

The Many Dimensions of Depression in Women

Adulthood: Relationships and Work Roles

Some have theorized that higher incidence of depression in women is not due to greater vulnerability, but to the particular stresses that many women face, including:

- 🔑 Major responsibilities at home and work
- 🔑 Single parenthood
- 🔑 Caring for children
- 🔑 Caring for aging parents
- 🔑 The quality of their marriage

*Lack of an intimate, confiding relationship, and overt marital disputes, have been shown to be related to depression in women. In fact, rates of depression were shown to be highest among unhappily married women.

Reproductive Events

Many women experience certain changes associated with phases of their menstrual cycles. In some women, these changes are severe, and include depressed feelings, irritability, and other changes. Called **premenstrual syndrome** (PMS) or **premenstrual dysphoric disorder** (PMDD), the changes usually begin after ovulation and become gradually worse until menstruation starts.

Postpartum mood changes can range from “the blues” immediately following childbirth, to an episode of major depression.

Pregnancy (if it is desired) seldom contributes to depression, and having an abortion does not appear to lead to higher incidence of depression. Women with infertility problems may be subject to extreme anxiety or sadness. In addition, motherhood may be a time of heightened risk for depression because of the stress and demands it poses.

Menopause, in general, is not associated with an increased risk of depression. The women more vulnerable to change of life depression are those with a history of past depressive episodes.

Victimization

Studies show that women molested as children are more likely to have clinical depression at some time in their lives than those with no such history. In addition, several studies show a higher incidence of depression among women who have been raped as adolescents or adults. Since far more women than men were sexually abused as children, these findings are relevant. Women who experience other commonly occurring forms of abuse, such as physical abuse and sexual harassment on the job, may also experience higher rates of depression. Abuse may lead to depression by fostering low self-esteem, a sense of helplessness, self-blame, and social isolation.

Poverty

Women and children represent seventy-five percent of the U.S. population considered poor. Low economic status brings with it many stresses, including isolation, uncertainty, frequent negative events, and poor access to helpful resources. Sadness and low morale are more common among persons with low incomes and those lacking social supports.

Depression in Later Adulthood

As with younger age groups, more elderly women than men suffer from depressive illness. Similarly, for all age groups, being unmarried (which includes widowhood) is also a risk factor for depression.

About 800,000 persons are widowed each year. Most of them are older, female, and experience varying degrees of depressive symptomatology. Most do not need formal treatment, but those who are moderately or severely sad appear to benefit from self-help groups or various psychosocial treatments.

The Road to Recovery for Men and Women

Depression is a Treatable Illness

Even severe depression can be highly responsive to treatment. You should know that modern treatments for depression are shown to be effective in the process of recovery. As with many illnesses, the earlier treatment begins the more effective and the greater likelihood of preventing serious recurrences.

Of course, treatment will not eliminate life's inevitable stresses and ups and downs. But it can lead to greater enjoyment of life. The first step in treatment for depression should be a thorough examination to rule out any physical illnesses that may cause depressive symptoms.

Since certain medications can cause the same symptoms as depression, the examining physician should be made aware of any medications being used. If a physical cause for the depression is not found, a psychological evaluation should be conducted. The exam should be done by the physician or a referral made to a mental health professional.

More than 80 percent of people with depression—both men and women—can be treated successfully with antidepressant medication, psychotherapy or a combination of both.

Medications

There are several types of antidepressant medications used to treat depressive disorders. These include:

- 🔑 Selective serotonin reuptake inhibitors (SSRIs)
- 🔑 Tricyclics
- 🔑 Monoamine oxidase inhibitors (MAOIs)
- 🔑 Serotonin-norepinephrine reuptake inhibitors (SNRIs) such as effexor and wellbutrin

Important facts about Medications:

- 🔑 The SSRIs and other newer medications that affect neurotransmitters such as dopamine or norepinephrine generally have fewer side effects than tricyclics.
- 🔑 Each acts on different chemical pathways of the brain related to moods.
- 🔑 Antidepressants are not habit forming.
- 🔑 Usually antidepressant medications must be taken regularly for at least 4 weeks and, in some cases, as many as 8 weeks, before the full therapeutic effect occurs.

- 🔑 To be effective and to prevent a relapse of depression, medications must be taken for about 6 to 12 months, carefully following the doctor's instructions.
- 🔑 The prescribing doctor will provide information about possible side effects and, in the case of MAOIs, dietary and medication restrictions.

The Path to Healing

Reaping the benefits of treatment begins by recognizing the signs of depression. The next step is to be evaluated by a qualified professional. This includes, primary care physicians, often the physician will refer the patient to a psychiatrist, psychologist, clinical social worker, or other mental health professional.

If there are no positive results after 2 to 3 months of treatment, or if symptoms worsen, discuss another treatment approach with the provider. Getting a second opinion from another health or mental health professional may also be in order.

Here, again, are the steps to healing:

- 🔑 Talk to a mental health professional.
- 🔑 Choose a treatment professional and a treatment approach with which you feel comfortable.
- 🔑 Consider yourself a partner in treatment and be an informed consumer.
- 🔑 If you are not comfortable or satisfied after 2 to 3 months, discuss this with your provider. Different or additional treatment may be recommended.
- 🔑 If you experience a recurrence, remember what you know about coping with depression and don't shy away from seeking help again. In fact, the sooner a recurrence is treated, the shorter the duration will be.

CONCLUSION

In this workbook, we at ValueOptions® have tried to give you some information to help you:

1. Find out up-to-date information about depression.
2. Start and stick to treatment for depression.
3. Learn some ways for helping yourself feel better as quickly as possible. By changing your behavior, you can begin to improve your health.

We believe strongly that people who are depressed can learn to deal successfully with depression and that there are many things that can be helpful. With treatment, many persons who have been depressed have gone on to enjoy life, be productive, and have good relationships with family and friends.

We at ValueOptions® hope that you have found this brief workbook helpful. If you have any questions, please contact your mental health provider or call your ValueOptions® member service representative. We're here to help!

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More information about depression from the following highly regarded organizations is available at your local library or on the Internet.

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www.ValueOptions.com

www.achievesolutions.net (search on depression)

National Sleep Foundation (www.sleepfoundation.org)

This workbook has been prepared for informational purposes only, as a resource for your review and consideration. This workbook is not intended to provide and should not be relied upon as providing medical judgement or medical advice. If you need medical advice or have questions regarding a course of actual treatment to pursue, please contact your health care provider.