

TREATMENT (CONTINUED)

Psychotherapy may help you gain self-insight, change negative thoughts and feelings, and learn new behaviours and coping strategies. Talking about your emotions and depression with a trained professional can help reduce symptoms.

The different psychotherapy approaches most often used in depression are cognitive behavioural therapy (CBT), interpersonal psychotherapy and psychodynamic psychotherapy. Joining a support group, relaxation techniques, exercise and lifestyle changes have been noted as beneficial in managing depression.

WHAT TO DO AND WHERE TO GO FOR HELP

The vast majority of people with depression respond well to treatment. The first step in fighting depression is to discuss your symptoms with an experienced professional, like your family practitioner at the local clinic or day hospital.

MRC UNIT ON ANXIETY AND STRESS DISORDERS

The Research Unit on Anxiety and Stress Disorders, to which the MHIC is affiliated, was established by the Medical Research Council (MRC) in 1997. The Unit is located at the Department of Psychiatry at the University of Stellenbosch and investigates the psychobiology and treatment of anxiety disorders, including obsessive-compulsive disorder (and related conditions), panic disorder, posttraumatic stress disorder, and social anxiety disorder. For more information about joining research trials, please visit the website below or contact the MHIC.

www.mrc.ac.za/anxiety/anxiety.htm

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DEPRESSION



WHAT IS DEPRESSION?

It is natural to feel sad or down at times. This is a normal part of everyday life. When someone experiences sad or negative feelings that interfere with normal functioning and that last for at least two weeks, they could be suffering from depression. The first sign of depression is often a change in the person's usual behaviour.

Common symptoms of depression include:

- persistent sad, anxious, or "empty" mood
- loss of interest or pleasure in hobbies and activities that were once enjoyed, including sex
- feelings of hopelessness and pessimism
- feelings of guilt, worthlessness, helplessness, self-reproach
- insomnia, early-morning awakening, or oversleeping
- appetite and/or weight loss or overeating and weight gain
- decreased energy, fatigue and feeling run down
- restlessness, irritability, hostility
- difficulty concentrating, remembering, making decisions
- persistent physical symptoms such as headaches, digestive disorders, and chronic pain
- thoughts of death or suicide, suicide attempts

It is important to note that different people experience depression differently (e.g. children may display unusual behavioural problems). In some people depression is characterised not so much by a sad mood, as by increased irritability, unexplained pain, or other symptoms.

DIFFERENT KINDS OF DEPRESSION

Different kinds of depression can be diagnosed:

- **Major depressive disorder (MDD):** A period of severe depression when most of the symptoms of depression are experienced.
- **Dysthymia:** Some depression symptoms are present over an extended period of time.
- **Bipolar disorder:** Alternating periods of severe depression followed by extreme highs. This kind of depression is also known as "manic-depression".
- **Seasonal affective disorder:** Depression may occur only during specific seasons of the year, usually winter or autumn.
- **Post-natal depression:** Feelings of sadness, anxiety, irritability and fear of not being able to cope that occur after childbirth.

WHO GETS DEPRESSION?

Depression is a medical disorder that affects people of both sexes, all ages and races, cultures and social classes. About 10% of the general population will suffer from a depressive illness in any given year. Women are twice as likely as men to have depressive symptoms.

CAUSES OF DEPRESSION

A number of different factors may contribute to the onset of depression. Very often, a combination of these factors plays a role in precipitating a depressive illness:

- Vulnerability to depression is likely to be at least partially genetically inherited.

- Psychological make-up and environmental factors, such as increased stress or personal losses.
- Medical conditions such as thyroid problems, strokes, cancer and Cushing's disease.
- Certain medications, such as steroids, birth control agents and high blood pressure tablets.
- Neurobiological variables: The symptoms of depression are mediated by chemicals, such as serotonin and/or noradrenaline, which may have changing levels in the brain.

TREATMENT

Like other medical illnesses, depression can be treated. In most cases the best treatment for depression is a combination of medication and psychotherapy (talk therapy). Antidepressants are not addictive or habit-forming, and can be safely used over an extended period. There are different types of antidepressants and each may have different side-effects, such as nausea, blurred vision, drowsiness, dry mouth, and sexual problems.

Benzodiazepines (tranquillisers) may sometimes be prescribed for the short-term control of anxiety symptoms that often accompany depression. These run the risk of dependency though.

Some improvements may be experienced immediately, but the full beneficial effects of pharmacotherapy may only be achieved over a period of weeks or months. Medication must be taken regularly according to your doctor's instructions and advice. The medication should not be stopped or substituted by another without prior consultation with your doctor.