

Strategies for coping

People may ask, "What can I do to help my family member? What is my role? How can I manage helping my family member and at the same time ensure that I recognize and deal with my own feelings?"

Some coping strategies may include:

1. Actively listen to the individual, while being non-judgmental, which will enhance the individual's awareness of his/her own condition.
2. Connect with others who may be able to provide further insight, support and guidance with the issue of depression. Individuals most commonly consulted may include a family doctor, psychologist, therapist, social worker, or members of a health care team. As well, others who have suffered depression, or have experienced a family member with depression may provide some support
3. Help the individual to recognize that they are not alone in their struggle with depression, which can reduce the stigma associated with depression.
4. Get information on depression to better understand its symptoms, risk factors, treatment options and self-care strategies.

Treating depression

Depression is a treatable disease. Now more than ever before, there are effective treatments for depression. Seeking diagnosis and treatment early can prevent depression from becoming severe or chronic, and can prevent the tragedy of suicide. The most common treatments for depression include antidepressant medications and psychotherapy. There are a variety of both antidepressants and psychotherapeutic treatments available, and we suggest that you discuss these options with your family doctor.

For more Information

If you want to learn more, contact:

Mental Health & Addictions Services
Telephone: 310-OPEN (6736)

Open Line Open Mind 310-OPEN (6736) is a free, confidential service to get information and support for all mental health and addictions needs in Hastings & Prince Edward Counties.

Dial 310-OPEN and be connected to someone with an open mind to help you when you need it. It is OPEN 24 hours a day, 7 days a week, 365 days a year.

www.openlineopenmind.com

Understanding Depression



Did you know?



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2007

Understanding depression

Depression is a serious but treatable mood disorder illness. Depression can occur in 10% to 25% of women almost twice the rate of men. Estimates also indicate that 15% to 20% of persons over the age of 65 suffer from depression. However, with the current range of treatments that are available, depression can be treated successfully in 80% to 90% of cases.

Causes of depression

There is not just one cause of depression. It is a complex disease that can occur as a result of a variety of factors.

Biological factors

Biological factors may include:

1. Imbalance of neurotransmitters natural chemicals that allow the brain cells to communicate with one another. The two neurotransmitters most strongly involved in depression are serotonin and norepinephrine.
2. Body chemicals known as hormones (for example, cortisol, which are produced by the adrenal gland in response to stress or fear are markedly altered.

Genetic factors

Family research studies have shown that the relatives of people with depression are two to three times more likely than the general population to suffer from depression.

Life change factors

Major life changes such as death or loss of a loved one and other major life events may trigger depression.

Other illnesses and medications

Depression symptoms may be a result of another illness that has similar symptoms, such as hypothyroidism, lupus, or having suffered a stroke.

Depression may also be a reaction to another illness, such as cancer, a heart attack, or a terminal or life threatening illness. A variety of medications used to treat high blood pressure, cancer and arthritis, as well as hormones such as estrogen, progesterone and cortisone, can contribute to depression.

Symptoms of depression

For a diagnosis of depression, people must have at least five of the following symptoms, for a period of at least two weeks, representing a change from previous functioning. The five must also include either the first or the second symptom listed.

- Persistent depressed mood, including feelings of sadness or emptiness
- Loss of or markedly diminished interest/pleasure in activities or hobbies that were once enjoyed, including sex
- Feelings of hopelessness and pessimism
- Feelings of guilt, worthlessness and helplessness
- Insomnia, early morning awakening or oversleeping
- Loss of appetite accompanied by weight loss, or overeating accompanied by weight gain
- Decreased energy, fatigue and feeling "slowed down" Restlessness and irritability
- Difficulty concentrating, remembering and making decisions
- Thoughts of suicide or death, or suicide attempts
- Persistent physical symptoms, such as headaches, digestive disorders, or chronic pain that do not respond to medical treatment and for which no physical cause can be found.

Some risk factors for depression

- Recent bereavement
- Presence of chronic or severe pain Fear of death
- Social isolation
- Substance abuse
- Certain medicines or combinations of medicines
- Serious illnesses
- Certain types of dementia.

People with depression may frequently complain of physical problems (constipation, fatigue, headaches) or sleep disturbances rather than feeling "sad" or "depressed."

A person with depression may appear confused, have memory loss or be agitated.

How depression affects family members

Depression affects individuals in different ways. Recognizing that a loved one has depression can be overwhelming, and can affect your ability to seek appropriate assistance. It is important to recognize that depression is a very common condition and that various treatment options do exist. Feelings of fear, sadness, denial, and helplessness, in addition to feelings of loss may well be among the responses of family members when they first learn of their loved one's diagnosis of depression.

Family dynamics and family roles may change as a result of the diagnosis, and it is important that families recognize and acknowledge such changes. Individuals will respond differently to the diagnosis, and may use different strategies to cope with the diagnosis.