

DEPRESSION



DEPRESSION

Sure, everybody feels sad or blue now and then. But if you're sad most of the time, and it's giving you problems with:

- Your grades or attendance at school/work
- Your relationships with your family and friends
- Alcohol, drugs, or sex
- Controlling your behavior in other ways



The problem may be **DEPRESSION**



The good news is that you can get treatment and feel better soon. Clinical depression is a serious illness that can affect anybody, including teenagers. It can affect your thoughts, feelings, behavior, and overall health. Most people with depression can be helped with treatment. But a majority of depressed people never get the

help they need. And, when depression isn't treated, it can get worse, last longer, and prevent you from getting the most out of this important time in your life.



First, there are two kinds of depressive illness: the sad kind, called major depression, and manic-depression or bipolar disorder, when feeling down and depressed alternates with being speeded-up and sometimes reckless.

DEPRESSION

You should get evaluated by a professional if you've had five or more of the following symptoms for more than 2 weeks or if any of these symptoms cause such a big change that you can't keep up your usual routine.....



When You're Depressed...

- You feel sad or cry a lot and it doesn't go away.
- You feel guilty for no reason; you feel like you're no good; you've lost your confidence.
- Life seems meaningless or like nothing good is ever going to happen again. You have a negative attitude a lot of the time, or it seems like you have no feelings.
- You don't feel like doing a lot of the things you used to like—like music, sports, being with friends/family, going out—and you want to be left alone most of the time.
- It's hard to make up your mind. You forget lots of things, and it's hard to concentrate.
- You get irritated often. Little things make you lose your temper; you over-react.
- Your sleep pattern changes; you start sleeping a lot more or you have trouble falling asleep at night. Or you wake up really early most mornings and can't get back to sleep.



DEPRESSION

- Your eating pattern changes; you've lost your appetite or you eat a lot more
- You feel restless and tired most of the time.
- You think about death, or feel like you're dying, or have thoughts about committing suicide.

When You're Manic...

- You feel high as a kite...like you're "on top of the world."
- You get unreal ideas about the great things you can do...things that you really can't do.
- Thoughts go racing through your head, you jump from one subject to another, and you talk a lot.
- You're a non-stop party, constantly running around.
- You do too many wild or risky things: with driving, with spending money, with sex, etc.
- You're so "up" that you don't need much sleep.
- You're rebellious or irritable and can't get along at home or school, or with your friends.

Talk to Someone

If you are concerned about depression in yourself or a loved one **TALK TO SOMEONE** about it. There are people who can help you get treatment:

- **A professional at a mental health center or Mental Health Association**
- **A trusted family member**
- **Your family doctor**

DEPRESSION



- Your clergy
- A school counselor or nurse
- A social worker
- A responsible adult

Or, if you don't know where to turn, the telephone directory or information operator should have phone numbers for a local hotline or mental health services or referrals.

Depression can affect people of any age, race, ethnic or economic group.

Having depression doesn't mean that a person is weak, or a failure, or isn't really trying...it means they need **treatment**.

Most people with depression can be helped with **psychotherapy, medicine, or both together**.

Short-term **psychotherapy**, means talking about feelings with a trained professional who can help you change the relationships, thoughts, or behaviors that contribute to depression.

Medication has been developed that effectively treats depression that is severe or disabling.

Antidepressant medications are not "uppers" and are not addictive. Sometimes, several types may have to be tried before you and your doctor find the one that works best.



DEPRESSION

Treatment can help most depressed people start to feel better in just a few weeks.

So remember, when your problems seem too big and you're feeling low for too long, **YOU ARE NOT ALONE**. There's help out there and you can ask for help. And if you know someone who you think is depressed, you can help: Listen and encourage that person to seek treatment. If your loved one doesn't ask for help soon, talk to someone who can help—especially if that person mentions suicide.

What You Need to Know About Suicide...

Most people who are depressed do not commit suicide. But depression increases the risk for suicide or suicide attempts. It is not true that people who talk about suicide do not attempt it. Suicidal thoughts, remarks, or attempts are **ALWAYS SERIOUS**...if any of these happen to you or a loved one, you must tell someone who can help **IMMEDIATELY**...it's better to be safe than sorry... .

Why Do People Get Depressed?

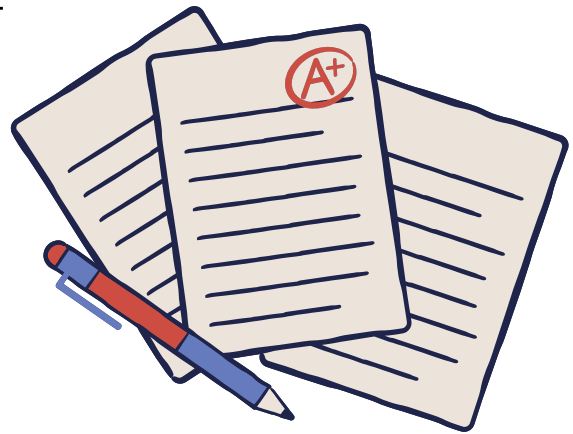
Sometimes people get seriously depressed after something like a divorce in the family, major financial



DEPRESSION

problems, someone you love dying, a messed up home life, or breaking up with a boyfriend or girlfriend.

Other times—like with other illnesses—depression just happens. Often individuals react to the pain of depression by getting into trouble: trouble with alcohol, drugs, or sex; trouble with school or bad grades; problems with family or friends. This is another reason why it's important to get treatment for depression before it leads to other trouble.



Depression and Alcohol and Other Drugs



A lot of depressed people also have problems with alcohol or other drugs. (Alcohol is a drug, too.) Sometimes the depression comes first and people try drugs as a way to escape it. (In the long run, drugs or alcohol just make things worse!) Other times, the alcohol or other drug use comes first, and depression is caused by:

- The drug itself, or
- Withdrawal from it, or
- The problems that substance use causes.



DEPRESSION

And sometimes you can't tell which came first...the important point is that **when you have both of these problems, the sooner you get treatment, the better.** Either problem can make the other worse and lead to bigger trouble, like addiction. You need to be honest about both problems—first with yourself and then with someone who can help you get into treatment...it's the only way to really get better and **stay** better.

DEPRESSION IS A REAL MEDICAL ILLNESS AND IT'S TREATABLE.

Be Able to Tell Fact From Fiction

Myth: It's normal for teenagers to be moody; teens don't suffer from real depression.

FACT: Depression is more than just being moody, and it can affect people at any age, including teenagers.

Myth: Telling someone that a loved one might be depressed is betraying a trust. If someone wants help, he or she will get it.

FACT: Depression, which saps energy and self-esteem, interferes with a person's ability or wish to get help. It is an act of true care to share your concerns with someone who can help.

Myth: Talking about depression only makes it worse.

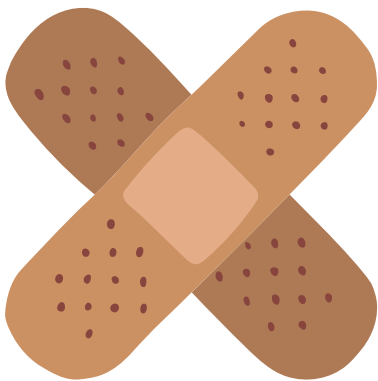
FACT: Talking through feelings with a good friend is often a helpful first step. Friendship, concern, and support can provide the encouragement to talk to a trusted person about getting evaluated for depression.

DEPRESSION

Are You Considering Anti-Depressant Medication for Depression? Frequently Asked Questions and Answers

Perhaps your counselor has mentioned the option of antidepressant medication to you, or you've wondered whether this option might be helpful based on something you've heard, or based on the experiences of friends or family members.

This information is designed to answer some of the most frequently asked questions about antidepressants. We hope the information will serve as a starting point for a more in-depth discussion with a counselor and/or a psychiatrist. If you decide to explore the option of medication further, you will want to meet with a medical care professional experienced in prescribing antidepressants.



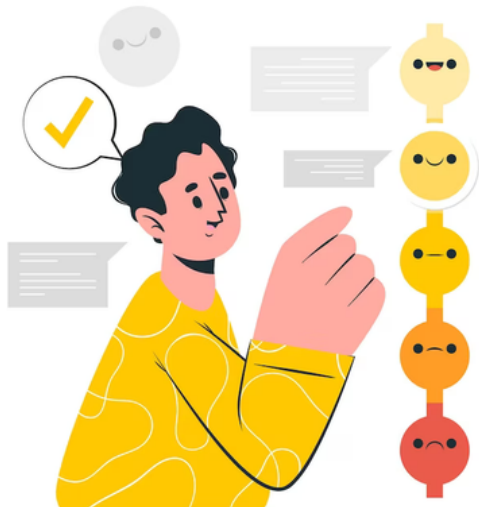
This may be a nurse practitioner, a physician, or a psychiatrist (a medical doctor whose specialty is the diagnosis and treatment of emotional and mental health problems.) A psychiatrist is specially trained in the use of medication to treat depression.

List of questions:

1. Shouldn't I be able to feel better without taking medication? Don't other people get through this without medication?

Many people will feel better with the help of counseling, and medication may not be necessary at all.

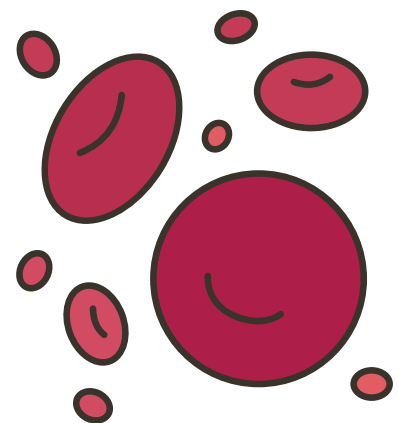
DEPRESSION



However, if left untreated altogether, depression can last longer or even worsen. It can seriously interfere with your ability to study, work and enjoy relationships. Depression also can be a life-threatening illness when there is a risk of suicide. Many people get better without medication, but sometimes medication is necessary to help lighten your mood and help you to function so that you can begin working through other problems.

2. Is there a blood test for depression?

The diagnosis of depression is based on the recognition of certain characteristic signs and symptoms affecting your mood state, thinking patterns and physical well-being. At present, there is no blood test that can confirm or eliminate the diagnosis of depression.



3. What is the first step in considering a medication?

Stop by the Academic & Staff Assistance Program on 2730 Stockton Blvd., Sacramento, Ticon III, 3rd floor or call (916) 734-2727. Your counselor will evaluate your symptoms and recommend whether depression medication is likely to help you, given your unique symptoms and circumstances. If medication seems like a

DEPRESSION

reasonable option, you will be referred to a nurse practitioner or primary care physician in the health service or to a psychiatrist (physician specializing in antidepressant medications) in the community.

4. How does an antidepressant work?

Depression is an illness in which factors such as genetics, chemical changes in the body and external events may play an important role. Research suggests that depression may be linked to changes in the functioning of brain chemicals called neurotransmitters. Current research focuses on the serotonin,

norepinephrine and dopamine systems. Certain genetic factors and changes in body hormones also have been implicated in some depressive conditions. These complex biological changes can produce profound

changes in your mood and behavior. Antidepressants are thought to correct some of the chemical imbalances present in a depressive illness.



DEPRESSION

5. What might my doctor ask me to do before prescribing medication?



The first step is usually an appointment with a psychiatrist to discuss your depressive symptoms. Your psychiatrist may ask the same questions another professional already has asked you. While you may find this repetition frustrating, keep in mind that questions are repeated so that your doctor can gain a thorough

understanding of your symptoms, medical history, medication use, and drug or alcohol use. For female patients it also will be important to discuss issues of pregnancy and birth control use since medication may be potentially harmful to a fetus or nursing infant. Since certain drugs, as well as some medical conditions, can produce depressive symptoms, you also may be referred to another physician for a complete physical exam and laboratory tests.

6. How will my doctor choose which medication to prescribe?

Antidepressants generally are classified by the chemical properties of the drug and the way in which they are thought to work. Groups of medications your doctor may refer to include: Selective Serotonin Reuptake Inhibitors (SSRIs), Tricyclic Antidepressants (TCAs) or Monamine Oxidase Inhibitors (MAOIs). Some clinicians may refer to medications discovered in the last 10 to 15 years as "new" medications and those medications that have been available in the last 30 years as "older" medications. There also are mood stabilizers for those with bipolar disorder.

DEPRESSION

Like shoe sizes, not every medication is the right fit for every individual; a medication that worked well for a friend may not be the best match for you. Your doctor will consider your particular symptoms when selecting your medication. He/she also will consider potential adverse effects of medication.



treatment is to effectively eliminate depression with a medication that produces minimal problems or adverse effects. Unfortunately, an "ideal" medication that does not pose some potential problem or risk is not yet available. Side effects generally are mild and decrease with time. Research is focusing on more selective medications for depression that produce fewer and less problematic side effects. It is important that you ask your doctor about any concerns you might have about a medication or its potential side effects.

7. What are the possible side effects of antidepressant medication?

Antidepressants are a relatively safe treatment option in otherwise healthy individuals being treated for depression. Like most prescribed (and some over-the-counter medications), antidepressants may cause mild, and usually temporary, side effects in some people. Most of the time, side effects are manageable and disappear over time. Common side effects include nausea, loose stools or constipation, dizziness, drowsiness, nervousness, sleep changes, dry mouth, headache and blurred vision. Some people experience a change in sexual interest or functioning. While more severe problems are less common, they are possible.

DEPRESSION

Your doctor or pharmacist will have information sheets that outline a range of potential side effects. Each time you meet with your doctor for follow-up sessions, she or he will ask about your response to the medication and check for problematic effects. Unusual side effects or those that could interfere with your ability to work or study should be reported to your doctor immediately so that changes in the

medication can be made. Most side effects are reversible and gradually disappear after a medication is stopped. Don't hesitate to talk to your doctor if you have questions or concerns.



8. How long will it take before the medication helps me? How will I know that the medication is working?

All antidepressants take time to work. Don't be discouraged if you don't feel better right away. Therapeutic response typically occurs within two to four weeks after treatment is started, although some people feel better sooner. It is not unusual for your friends and family to notice signs of improvement before you do. When the medication begins to work, you may find yourself increasingly able to accomplish things and enjoy life in a way that is more "normal" for you. If you do not respond to one medication, your doctor may recommend a change of dosage or a change to other medication(s). Each person is unique in his or her response to medication. Treatment of depression is an ongoing process, with your doctor monitoring and -"fine tuning" your medication, depending on how it is working for you.

DEPRESSION

9. Is the medication addictive? Will I get "high"?

The currently prescribed medications that are approved for the treatment of depression are not considered addictive. Drug addiction implies that you would crave increasing amounts of a substance. While certain medications used in treating unusual forms of depression do have potentially addictive qualities, these medications are not considered standard antidepressants. Although antidepressants are not addictive, you

may experience some symptoms that lead you to wonder whether you are getting "high." Early on in treatment, antidepressants may cause you to feel unusually energized, especially compared to your previous state. Feeling "high" or intoxicated suggests an unusual reaction to your medication, an interaction with another medication, complications from drug or alcohol use, or an unwanted side effect. In addition, some patients with bipolar disorder may experience an unwanted episode of euphoria



10. Will the medication change my personality?

Medication will not change who you are as a person, your unique personal characteristics, or your life circumstances. The goal of antidepressant therapy is to allow you to work toward positive changes in your mood state and thinking patterns. Antidepressant medication assists people in experiencing the full range of human emotions without feeling overwhelmed. Although these positive changes may seem like personality changes, most often they are a sign that you are recovering your ability to react to people and situations in a non-depressed way. Sometimes antidepressant medication produces temporary side effects that feel like negative changes in personality. In particular, you may feel less emotionally sensitive or less "intense" than you did before taking medication.