

TREATMENT OF

DEPRESSION

*The choice of therapy ultimately depends on how the sufferer views their depression.
Do they see it as a product of ineffective ways of dealing with the world?
Or do they see it as biochemical?*

Drug Treatment

Treatment varies depending on the type of depression. For severe depression a physician may prescribe antidepressants. They help the sufferer recover enough to begin to function more fully.

There are many types of anti-depressants. All work by altering the way in which certain chemicals (neurotransmitters) work in our brains. Two types account for over 95% of the antidepressants prescribed. The 'older' antidepressants are the Tricyclic antidepressants (TCAs) such as Tofranil and Tryptizol. They appear to enhance the brain's mood messengers in the synaptic junction.

More recently a newer group has been added. They are called selective serotonin reuptake inhibitors (SSRIs). They include Prozac, Zoloft, Paxil, and Effexor. They work by inhibiting the uptake of serotonin at the nerve endings in the brain, thus increasing the availability of serotonin at brain receptor sites.

Use of these drugs should be carefully monitored. One type of antidepressant may work for one person but not another. Antidepressants are not for everyone. Many find that some of the new cyclic antidepressants are easier to take and safer than the older antidepressants. In some cases, an antidepressant may provide some needed leverage on the road to recovery. It is best to discuss all these factors with a physician.

The important point to make is that there is no reason for an individual suffering from clinical depression to tolerate lost weeks or months of their life due to depression. Treatment options do not take that long and they work. Typically within 3 to 4 weeks an individual's sleep and appetite return to normal and, with the right kind of therapy, you can feel significantly better in 12 to 16 weeks.

Psychological Therapy

For others, **Interpersonal (IPT)** and **Cognitive-Behaviour (CBT) Therapies** may be the treatment of choice because they are based on the value of relationships.

CBT focuses on the depressed person's negative thinking that has been described as: defeated, defective, deserted, and deprived.

CBT assists an individual to replace negative thinking with positive and realistic thoughts. Gaining an understanding of how thoughts affect emotions helps prevent depressive symptoms from returning.

IPT examines the ways in which relationship disturbances (for example, severe conflict between a couple) may be linked to common symptoms of depression such as poor self-esteem or excessive guilt. IPT helps the individual keep their symptoms under control by learning more effective ways of handling relationship issues.



A number of other psychological treatments have shown promise in treating depression. For example, **Reminiscence Therapy** teaches older adults to remember times when they were younger and functioned at a higher level.

Therapy groups are another method of treatment. Perhaps the one uncontested rule for people suffering from depression is that isolation only worsens and perpetuates the illness. Through human interaction, lies hope for recovery.

Psychological treatments are approximately as successful in treating depression as drugs. Although somewhat inconsistent, it appears as if combining drug and psychological treatments enhance success. It is suggested that the combination provides short term relief from drug therapy and longer term results from psychological therapies.

Myths About Depression & Its Treatment

▪ **Myth- Depression is all in your head and you can snap out of it on your own.**

Many depressions are in fact biological in nature. For example, 25 to 50 % of women who take oral contraceptives report symptoms of depression. Other women are at risk for postpartum depression that is apparently linked to the hormonal changes that occur after childbirth.

Remember some, but not all, depressions are biological in origin.

▪ **Myth- Everybody gets depressed. Don't worry about it, you'll get over it.**

Everyone does experience periods of depression, but most people do not have the intense symptoms that accompany major depression. Untreated depression is not likely to disappear by itself. If it does, the average length of time for depression to lift is about one year.

▪ **Myth- Depression is a sign of weakness.**

Symptoms of depression are often a sign that the individual is experiencing too much stress, or needs to make some changes in their life. Depression can be adaptive when the individual responds to the signals to look more carefully at the effects of stress on their well-being.

▪ **Myth- People who talk about suicide do not commit suicide.**

One out of 15 individuals suffering from clinical depression completes suicide. Do not ignore a person who talks about suicide. Ensure that they seek help immediately.

If you want to know more about depression and its treatment, here are some resources -

- Ministry of Health Services www.gov.bc.ca/health/
- The Public Health Agency of Canada www.phac-aspc.gc.ca/
- Mental Health Commission of Canada www.mentalhealthcommission.ca
- The Canadian Network for Mood and Anxiety Treatments (CANMAT) www.canmat.org

YOUR LOGO HERE

For confidential assistance
Brown Crowshaw 1.800.668.2055
www.browncrowshaw.com