

Depression Kit

A fact sheet produced by the Mental Health Information Service

What is depression?

Depression is a common mental health problem and is significantly different from mere unhappiness or sadness. It is a long lasting, often recurring illness as real and debilitating as heart disease. People who are depressed may experience feelings of oppressive sadness, fatigue and guilt. They often feel lonely, isolated, helpless, worthless and lost. About 800,000 Australians experience depression each year and one in five people is likely to experience depression or anxiety in their lifetime. Further, almost 80% of those with a diagnosed depressive disorder also have an anxiety problem. (1997 National Survey of Mental Health and Wellbeing of Adults, Australian Bureau of Statistics).

What Are The Symptoms?

The symptoms and the severity of feelings of depression may be different for each person. A person experiencing a depressive episode may experience physical and psychological symptoms including:

- eating or sleeping too much or too little, including frequent waking during the night, difficulty getting to sleep or being unable to wake in the morning
- loss of interest in daily activities, a lack of energy and/or loss of sex drive
- excessive crying and being easily upset
- thoughts of suicide or feelings of wanting to escape from the way one is feeling
- restlessness, agitation and irritability
- headaches, digestive disorders or nausea
- persistent feelings of sadness, anxiety and hopelessness
- difficulty concentrating, remembering, making decisions
- feelings of guilt or worthlessness

What Are The Different Types Of Depressive Disorders?

There are many different terms people use to describe and categorise depression. Some common types are:

- **Adjustment Disorder with Depressed Mood** – depression is triggered by stressful situations requiring change e.g. loss of a job, relationship break-up or “positive” changes e.g. travel, marriage, new job, etc. This type of depression can be helped with counselling and support.
- **Major (Clinical) Depression** – a severe form of depression believed to be associated with a chemical imbalance in the brain. Clinical depression can appear without apparent reason and usually lasts a minimum of two weeks. Feelings of despair may lead to suicide attempts or self-harm in some cases.

- **Dysthymic Disorder** – a person may experience at least 2 years of depressed mood more days than not, and display additional symptoms of depression. Dysthymic Disorder may begin early in life and be less severe than Major Depression but can be fairly continuous over the life span (unless treatment is sought).

What Are The Causes?

Depression can be a result of an interaction of a number of factors including:

- **Environmental factors** - stress associated with certain milestone stages of your life, such as puberty, middle age or retirement, stress resulting from personal tragedies, family breakdown and unemployment, for example, can all contribute to becoming depressed.
- **Biological factors** - an imbalance of the chemicals in the brain that regulate mood and activity can alter someone's thoughts, emotions and behaviour, resulting in depression.
- **Genetic factors** - people can inherit a predisposition to develop depression. If a relative has depression there is an increased chance that you may develop this illness.
- **Personality** - some personality types are more prone to depression. People who set very high standards for themselves and others may be easily depressed if they are let down.
- **Thinking style** – people with depression often think in unrealistic or negative ways. They might believe that they must always get everything right and that if they don't, they are a bad or worthless person. Thinking frequently in pessimistic or negative ways often contributes to depression.
- **Past depressive episodes** - once you have experienced an episode of Major Depression, you may be more likely to develop depression or another mental illness in the future.
- **Physical illness or medical conditions** – some medical conditions and medications used to treat physical illnesses can trigger depression. For example, if you have recently experienced a heart attack or are being treated for another medical condition ask your doctor about the medication you have been prescribed to make sure that it is not contributing to depression.
- **Alcohol and other recreational drugs** - some recreational drugs can make depression worse or trigger depression in some people. Alcohol is a depressant: after the initial euphoria, alcohol can trigger a depressive mood and drinking more alcohol to maintain the euphoria will only make the depression worse. Cannabis can worsen depression in some people and the active ingredient in cannabis stays in the brain for up to four days, so using cannabis on a daily basis can exacerbate depression. If recreational drugs are a problem for you, seeking counselling to cut down or stop using recreational drugs is as important as getting help for the depression.

What Help Is Available?

We are often faced with situations that we can manage ourselves quite well or with the help of our family or friends. However, at times, we are unable to manage the incidents that can lead to mental health problems and you may decide to explore other options. Some of the common treatments for symptoms of depression include:

- behavioural and lifestyle changes
- counselling and psychotherapy, including cognitive-behavioural therapy
- medication: there are many antidepressant medications available which can be prescribed by your G.P.
- alternative therapies

For more detailed information on what help is available call the Mental Health Association's Information Service on 1300 794 200

What Can I Do To Help Myself?

If you are concerned that you or someone you know may be experiencing symptoms of depression:

- find out as much as you can about depression by accessing the resources and information listed below
- see your local GP or have an assessment conducted by a mental health professional
- if treatment is required, discuss your options with your health professional and decide on a program that is right for you
- don't let misconceptions about mental illness stop you from seeking help.
- regardless of whether you have ever experienced symptoms of depression, it is important to remember to always look after your mind as well as your body by adopting a healthier lifestyle including regular exercise, a healthy eating plan, learning to reduce your stress levels and relaxing. This is different for everybody. You may watch TV or read a book, go for a walk, see a movie or have a bath; whilst others find slow breathing or remedial massage beneficial.
- remember that depression is not your fault and for many people depressive feelings can be treated and managed very effectively

Families and Friends

- encourage the person to seek help for depression and to give treatment a fair try. Anti-depressant medication might take a few weeks to start working and counselling and psychotherapy usually take longer.
- if you believe the person might be thinking about suicide, don't be afraid to ask them about it in a non-judgemental, caring and straightforward way. If they are thinking about harming themselves, it is essential to get some help from their local mental health team or a counselling hotline such as LifeLine on 13 11 14.
- don't give the person verbal or non-verbal messages that they should 'snap out of it' or that they 'shouldn't' feel depressed. People cannot simply decide to stop being depressed, nor are feelings 'right' or 'wrong'
- stay in regular contact with the person and let them know you care for them by offering practical help if needed, suggesting short, manageable trips such as meeting for coffee
- don't take their depression personally – it is nobody's 'fault'

Further Reading

The Mental Health Information Service holds the following titles, which can be purchased over the phone or via our website:

- About Depression by the Association of Relatives and Friends of the Mentally Ill (ARAFMI)
- The SANE Guide to Depression by SANE
- Too Blue; a Book About Depression by ShrinkRap Press

Or from bookstores:

Understanding Depression: A Complete Guide to Its Diagnosis and Treatment, by Paul H Wender/ Donald F Klein, Oxford University Press Incorporated, 2005

Undoing Depression: What Therapy Doesn't Teach You and Medication Can't Give You, by Richard O'Connor, Penguin Group (USA) Incorporated, 1999, ISBN: 0425166791

Overcoming Depression: A Step-by-Step Approach to Gaining Control over Depression by Paul Gilbert, Oxford University Press, 2001, ISBN: 0195143116

Where to Get Help

- Contact the Mental Health Association's Information Service on 1300 794 991 or visit www.mentalhealth.asn.au
- Visit other depression related websites such as Beyondblue (you will find a number of links to reputable sites on the Mental Health Association website)
- Complete an online questionnaire and find out more about symptoms and treatments for depression at www.depressionet.com.au/nswscreen.html or www.blackdoginstitute.org.au
- For mental health information and assistance in a language other than English contact the Transcultural Mental Health Centre on 1800 648 911 or (02) 9840 3800
- Speak to your local doctor, community health centre or mental health team.

Disclaimer

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