

How do medicines work?

Knowing a few things about brain chemistry might help you make decisions about treatment.

- The brain communicates with itself and the rest of the body by means of chemicals called *neurotransmitters*. Depression is associated with low levels of a neurotransmitter called *serotonin*.
- When levels of serotonin are too low, the brain and the rest of your body can't respond as fast as before. So, the world keeps coming at you, but your ability to handle it is impaired.
- Antidepressants raise the level of serotonin in the brain. They cause the brain to keep more of its own serotonin in circulation.

Antidepressants are not stimulants or "mood-altering" drugs. They're not addictive. They have few serious side effects.

People who take antidepressants will often say "I feel more like myself" or "I feel like myself again." Antidepressants don't make you become somebody different. They help you recover who you really are.

Medications may not be necessary for life. Typically, medicines are prescribed for 6–12 months. The effectiveness of the medication is evaluated on an ongoing basis to help determine future treatment.

How can I help myself?

While you're getting better, you can help yourself. Exercise can raise neurotransmitter levels in the brain. So does laughter—a funny movie can often give you some relief.

Being with people you like usually helps, too. For most people, doing these things to help themselves becomes easier once they've started other treatments.

If you're depressed, or know someone who is, the most important fact to remember is this:
If you get treatment you can get well.

What about family and friends?

It can be hard to explain depression to family or friends. They might not understand what depression is, or that treatments are available. You may worry that they won't approve of your taking medication or seeing a counselor.

If you want to talk to people about your depression, it might help to show them this pamphlet. Or ask someone close to you to come along when you see your health care provider.

But keep in mind that your choices and treatments are confidential. It's entirely up to you to decide what to tell people.

To Learn More

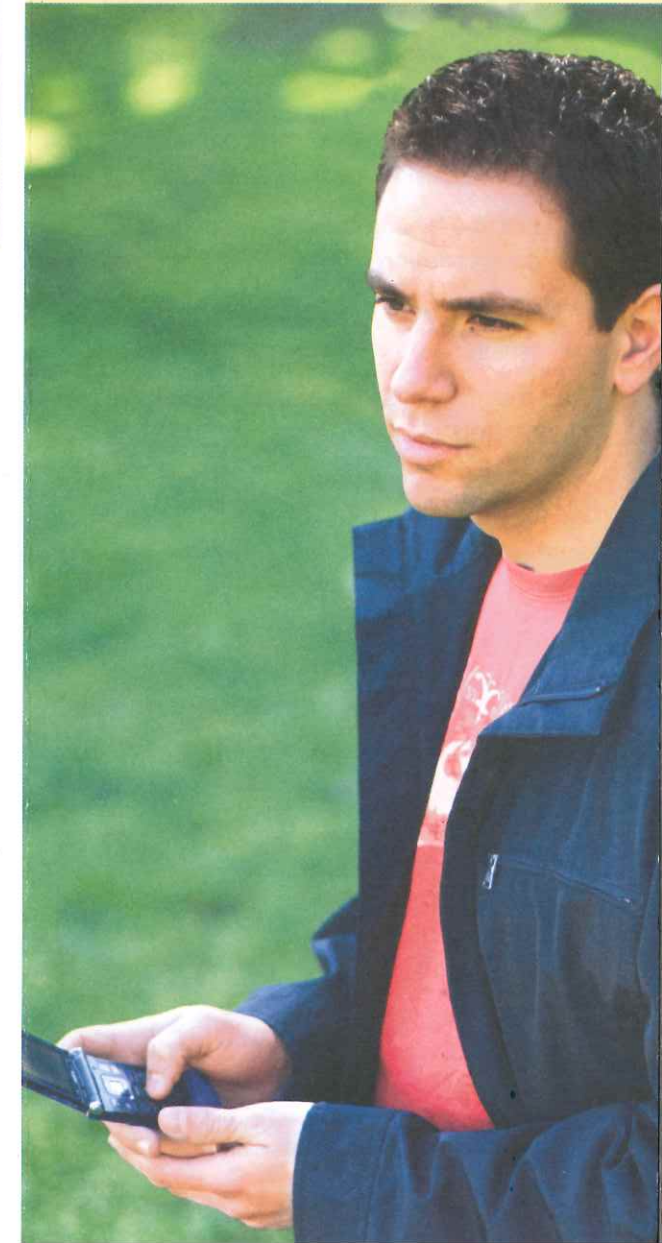
National Institute of Mental Health
(1-800-421-4211) www.nimh.nih.gov

Call for free brochures, including ones in Spanish, and information for women and other groups.

Mental Health America
(1-800-969-6642) www.nmha.org

Call for free information on many mental health topics, or to receive a national directory of local mental health associations.

HELP ON THE WAY Depression



This brochure is not intended as a substitute for your health professional's opinion or care.

Series Editor: Barbara A. Cooley, MA, CHES.

Text: Melinda M. Mueller, MS.

© 1996 ETR Associates. Revised 2008. All rights reserved.

It is a violation of U.S. copyright law to reproduce any portion of this publication.

ETR 1-800-321-4407
www.etr.org

Associates A nonprofit organization

Title No. H232

Is something wrong?

Have you been saying to yourself, “What’s the *matter* with me lately?” Have others been asking you that question?

- ? Do you feel anxious or tense most of the time?
- ? Have you had aches and pains that don’t seem to have a cause?
- ? Are you having trouble sleeping or concentrating?
- ? Does it seem like you never have any energy?

You may feel this way because you have *depression*.

What is depression?

Depression isn’t a bad case of the blues. It’s an illness. A depressed person can’t “just snap out of it” any more than a person can just snap out of having diabetes or mono.

Depression affects the whole body, including the brain. It changes how a person feels emotionally and physically.

Depression is treatable. People who get good care get well. But, untreated, depression can be deadly. It is a common factor in suicide.

1

How do I know if I’m depressed?

Symptoms vary from person to person, and there is more than one type of depression. All types can be treated.

See if these descriptions fit how you feel.

Minor depression. People with minor depression may have these symptoms for long periods of time:

- overeating, or poor appetite
- difficulty sleeping, or wanting to sleep a lot
- feeling they never have enough energy
- difficulty concentrating
- low self-esteem, pessimism or sadness
- using alcohol or other drugs to “feel better”

Major depression. This is a more serious illness. People with major depression may have the symptoms of minor depression and some of these additional symptoms:

- no pleasure in activities they used to enjoy
- significant weight loss or gain
- feeling worthless or guilty
- hopelessness, thinking things will never get better
- A sense of being overwhelmed by sadness or of “going crazy”
- hard-to-explain, sometimes frightening, physical symptoms
- thoughts of death or suicide

Seasonal Affective Disorder (SAD).

Some people react to lack of daylight. Symptoms can be those of minor or major depression. People with SAD might notice that normal tasks become harder in winter.

2

Get help

If you’ve had symptoms of minor depression or SAD for a while, or symptoms of major depression for more than 2 weeks, see a health care provider.

Most health care providers are trained to recognize depression and to recommend treatment. You don’t need to go to a mental health clinic to find out whether you have depression.

If you find yourself thinking about suicide, call a health care provider or a local crisis line immediately. Suicidal thoughts are a symptom of depression. They will go away with good treatment. Getting help *will* help.

What will happen if I see a health care provider?

The provider will discuss your symptoms and ask questions about what’s happening in your life: Are you under lots of stress? Have you recently suffered a major loss?

You might be asked about your family history, or about medicines or drugs that could be affecting your health.

You should ask questions, too. Ask about anything you don’t understand and about possible treatments. Ask about your provider’s experience in dealing with depression.

Don’t hesitate to mention a symptom because you think it’s “all in your head.” Vague or hard-to-pinpoint symptoms are very common in depression, and are important.

It’s a good idea to make a list of your symptoms to take with you to your appointment.

3

Treatment Options

Treatment options are often used in combination:

- Most forms of depression are helped with some type of “talk therapy.”
- Medicines can be dramatically effective in lifting depression.
- For people with SAD, treatment may include more exposure of the eyes to certain wavelengths of light.

Seeing a health care provider doesn’t automatically commit you to treatment.

You are the one who will decide what you want to do. Keep asking questions as long as you feel you need more information.

How soon will I feel better?

Nearly always, people who have depression can be treated successfully as outpatients, while continuing with their lives.

It may take a number of weeks before you feel completely well. But many people start to feel better within a few weeks after treatment begins.

4