What is Depression & What to do about it?



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Depression Demystified

"I am a little depressed": Is bad mood depression?

Can illness, losing job, or bad grades cause depression?

Can your religion/spiritual faith give you immunity to depression?

Case: Is this depression?

Kevin just broke off with GF, came home quiet, sad, isolate himself, slept all day, took down his Facebook page, got off to work the next day...still feeling sad but functional!

Case: Is this depression?

Karen gave birth to a boy premature, finally came home from hospital, struggled getting up/feed baby, teary, sad, guilty... this went on for weeks!

Case: Is this depression?

Kelvin's 54 y/o wife, Tamiko, just died recently from cancer. He told you, "I can't imagine living alone," and has been sad and teary much of the day.

One day, he told you about a secret plan "to join my wife in afterlife."

Clinical Depression

- Not just feeling down momentarily
- Aversely affects one's daily functioning/relating to others
- Duration, severity, and number of symptoms

DSM-V Criteria (Bible of Mental Illness)

Symptoms

- Depressed, sad/teary, fatigue
- sleep disturbances, appetite change
- feeling guilty, focus/memory/concentration
- Isolation
- Severity, duration (single or relapse)
 - Mild, moderate
 - Severe: Suicidal & self-harm
 - Persisted 2 wks+, 5+ Symptoms

What cause depression?

What cause depression?

- No single reason: many factors
 - Low mood stabilizers (Serotonin, Norepin.)
 - more complex than a brain chemical imbalance

- Possible causes
 - faulty brain regulation
 - genetic vulnerability
 - medications, medical problems
 - stressful life events

Postpartum depression

- new mothers
 - 50-80% experience mild form
 - "postpartum blues" or "baby blues" after giving birth
- > 50 percent of women
 - Relapse: will develop Postpartum Depression in subsequent births.

Reasons?

- Genetic/Environmental
 - Having depressed parent increase risk
- Family issues,
 - Ex: financial, job, marriage, family discord
- Other risk factors.
 - loss of loved one, no good friend
 - experience of rejection (Santrock, '06; Feldman, '06)
- Similar to other mental disorders
 - combination of risk factors
 - Interact: biological, psychological, social-systems variables.

Mental Health (MH) Facts

Depression: Most common MH issue

Women vs. Men: 2:1x prevalence

 Older Adults: depression, paranoid, dementia are most common

Major Depression Disorder (MDD)

Lifetime prevalence

- Average onset: ~mid-20s
- 10-25% women, 5-12% men.
- Women are 2x likely to develop MDD.

Vulnerable groups

- Married women, women 3+ children under 14 y/o
- Adolescence is a time of high risk
- MDD may appear @ any stage of life cycle.

Depression Severity

• Mild: fcn'ing, some impacts

Moderate: worsen fcn'ing

Severe: poor fcn'ing, suicidal

Depression Assessment

- PHQ9 commonly used
- Mild: 5-9
- Moderate: 10-19
- Severe: 20+

PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME:	DATE:				
Over the last 2 weeks, how often have you been bothered by any of the following problems?					
(use " "fo indicate your answer)	Not at all	Several days	More than half the days	Nearly everyday	
1. Little interestor pleasure in doing things	0	1	2	3	
2. Feeling down , depressed ,or hopeless	0	1	2	3	
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3	
4. Feeling fired or having little energy	0	1	2	3	
6. Poor appetite or overeating	0	1	2	3	
6. Feeing bad about yourse! _or that you are a failure or have let yourse! or your family down	0	1	2	3	
Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3	
8. Moving or speaking so slowy that other people could have noticed. Or the opposite —being so figety or resiless that you have been moving around a lotmore than usual	0	1	2	3	
Thoughts that you would be better off dead , or of hurting your self	0	1	2	3	
	add columns				
(Healthcare professional: For interpretation of TOTAL, TOTAL: please refer to accompanying scoring card).					
10. If you checked off any problems, how difficult	Not difficult at all				
have these problems made it for you to do		Somew	Somewhatdifficult		
your work, take care of things at home, or get		Very difficult			
along with other people?	Extremely difficult				

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Treatment

Severity PHQ9	Treatment Tx	Duration
5-14 Mild/low moderate	Therapy alone preferred	Days - wks
15+ Moderate to severe	Behavioural therapy + medication(s) tend to be most effective	Wks - months

How to prevent?

Healthy Lifestyle

Proper sleep, physical exercise, nutrition

Resiliency:

- Problem solving skills
- Positive Attitude: gratitude + contentment

Socialization:

Single most power factor

Medications

Common Tricyclics

- amitriptyline (Elavil),
- clomipramine (Anafranil),
- doxepin (Sinequan),
- imipramine (<u>Tofranil</u>),
- trimipramine (<u>Surmontil</u>),
- <u>amoxapine</u> (Amoxapine Tablets),
- desipramine (Norpramin),
- <u>nortriptyline</u> (<u>Pamelor</u>, Aventyl)
- protriptyline (<u>Vivactil</u>)

Medications

Common SSRIs include:

- citalopram (Celexa)
- escitalopram (Lexapro)
- <u>fluoxetine</u> (Prozac, Sarafem)
- sertraline (Zoloft)
- paroxetine (Paxil)

Diet

Consume more foods: serotonin

- tryptophan
- vitamin D
- B vitamins
- omega-3 fatty acids

A creative idea



Author: Dr. Susan Lue, 2006

Live Gracefully



E.N.E.R.G.Y

Eat **N**utritiously: Healthy Food

More fiber, more vegetables

Less meat, less salt, less oil

Exercises **R**egularly

Consistent: a regular/healthy sleep pattern

Grow **Y**-isely

Avoid: Unhealthy habits

Ex: before bedtime, no stimulants

Helpful Summary

1. Recognize Sx of Depression/Suicide

2. Prevalence between men vs. women

- 3. What are some depression prevention tips?
 - Healthy lifestyle: exercises, meals, socialization
 - Relapse prevention

4. How to help people with suicidal risks?

References

- American Psychiatric Association. Diagnostic and statistical manual of mental disorders. 5th ed. (DSM-5)
- Mayo Clinic https://www.mayoclinic.org/diseases-conditions
- World Health Organization (WHO)