Depression: A Mental Illness

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Depression is a serious yet common mental health illness that affects how an individual function, feels, and thinks. An individual suffering from depression may have feelings of sadness; hopelessness and even loss of interest in activities which translate to an emotional and physical problem that affects their ability to function at their workplace, or in their home environment. Depression is highly individualized and it is not the same experience for every individual, therefore it is a highly complex mental illness that can be treated through several treatment options. However, understanding depression and the correlation it has with the brain is still a work in progress that will be explored throughout this paper.

**Etiology and Risk Factors**

Unfortunately there is no known cause for depression, however, there are known factors that may predispose someone to depression. In fact, depression can strike any individual no matter their age, socioeconomic, or ethnic background ("What Causes Depression," n.d.). Often times there is a combination of events that may have recently happened, long-term factors, or even personal factors that can lead to an individual developing a depressive disorder. Family history can certainly increase an individual's chances of developing depression. In fact, if a twin suffers from depression than the other twin has an increased risk of about 70% from suffering from depression at some point ("What Causes Depression," n.d.). However, depression strikes every individual in different ways and degrees. Personality can play a role in developing the mental illness of depression as well. Some individuals are prone to worry, become easily stressed out and have a lower self-esteem which can lead to depression (Parekh, 2017). Biochemistry such as a chemical imbalance in the brain can predispose an individual from suffering from depression. However, the chemistry imbalance typically is coupled with a combination of other predisposing factors which lead to depression (Parekh, 2017). Mental illness is a difficult concept to understand, especially depression as there is no specific known cause just a mixture of risk factors that are tied to increasing a persons chance of suffering from depression. The combination can include a chemical imbalance, genetics, stressors in life, medical conditions and experiences that involve abuse and violence can all have an impact on how the brain regulates emotions and mood which in the end can all contribute to an individual suffering from a depressive disorder (Parekh, 2017).

**Clinical Manifestations**

Signs and symptoms that may be experienced in individuals suffering from depression can range from very mild to severe. Although there are many different types of depression, and symptoms can vary depending on the specific form of the mental illness there are general symptoms that are often times associated with depression. Many individuals suffering from depression often times have feelings of sadness, and a loss of interest in activities they use to enjoy (Parekh, 2017). There is a change in appetite along with fluctuations in weight that can either be increased or decreased unrelated to dieting along with feelings of lethargy and fatigue (Parekh, 2017). Individuals with depression may find themselves withdrawing from reality, and wanting to sleep during the day when others are awake and being productive due to feelings of worthlessness and guilt (Parekh, 2017). Other signs and symptoms might include an increase in purposeless physical activity (i.e., handwriting and pacing) or slowed movements and speech (Parekh, 2017). Serious symptoms of depression can be life-threatening such as increased thoughts of death or suicide. In order to be clinically diagnosed with depression an individual much be experiencing these manifestations for a minimum of two weeks (Parekh, 2017).

**Types of Depression**

Although the general term used when speaking about this mental health illness is just the word “depression”, however, there are several different types of depression that can be affecting an individual.

**Major depressive disorder (MDD)**

This is the classic form of depression which is described as a dark mood which is all-encompassing causing the individual to lose interest in pleasurable activities (Merz, 2017). There are specific signs and symptoms of MDD which can include some of the following such as, difficulty sleeping, changes in appetite and weight, lethargy an fatigue, and feelings of worthlessness. Also, thoughts of death and suicide might arise in these individuals (Merz, 2017).

**Persistent depressive disorder (PDD)**

This form of depression is defined as a low mood that has lasted for at least two years but may never have reached the same intensity level as MDD (Merz, 2017). These individuals are able to function day to day, but often times feel joyless. Signs and symptoms associated with PDD can include feelings of joyless or low, easily fatigued, changes in their sleep patterns, low self-esteem, and hopelessness (Merz, 2017).

**Seasonal affective disorder (SAD)**

This type of depression emerges as days get shorter in the fall and winter. The shift in mood may be a result of the change in the bodies natural daily rhythms, or in the chemical messengers such as serotonin and melatonin (Merz, 2017).

**Antenatal and postnatal depression**

During pregnancy and for a year after delivery women are at an increased risk of developing depression due to a combination of factors. Immediately following delivery many women, nearly 70% experience a term is known as "baby blues" which is a change in hormones within the mother and adjusting to the new infant and relationships (Merz, 2017). However, depression is long lasting and not only affects the mother but the relationship she has with her baby and her partner (Merz, 2017).

**Bipolar disorder**

Also known as a manic-depressive disease have episodes of depression (Merz, 2017). These episodes of depression typically ensue after they have periods of unusually high energy known as their manic phase. These phases are described as high self-esteem, little to no sleep, high speed of thought and activity. Manic phases do not last long and are followed by a depressive state which often times requires medications to help stabilize the individual's mood (Merz, 2017).

**Disease Development**

Depression has been associated with neurotransmitter imbalances such as serotonin, norepinephrine, and dopamine. However, measuring an individuals level of neurotransmitters and their activity level is extremely difficult (Nemade, n.d.). Serotonin is often times decreased in patients with depression which then results in their sleep, behavior, and appetite being affected. Norepinephrine plays a role in depression as individuals that have decreased levels of norepinephrine are unable to cope with high levels of stress and anxiety which predisposes them to develop a depressive disorder (Nemade, n.d.). Finally, dopamine levels will decrease resulting in loss of pleasure from activities an individual once enjoyed doing when their neurotransmitters were in a balanced state (Nemade, n.d.).

**Psychosocial development**

Depression can impair various areas of an individuals life. These various areas can include their home life, friends and family, work, and can reduce the capacity for self-care and ability to live independently ("Depression," n.d.). Social effects from depression result in an individual becoming withdrawn from society and loss of interest in activities that once made them happy. Work and school performance are affected by depression as an individual lacks the drive to succeed and flourish as their thoughts are consumed with sadness and hopelessness. Often times individuals will look to substances to help numb their depressed thoughts and mood. Individuals will lose contact with friends and family and stop communicating with eventually all members of society if depression remains unchecked and untreated. There are about 9.5% of adults in the United States that are affected by depression ("Depression," n.d.). Women are almost twice as likely to suffer from MDD than are men, however, men and women are both equally susceptible to developing a bipolar disorder ("Depression," n.d.). Depression can, in fact, occur at any age, however, the average age of onset is in an individuals mid-20s ("Depression," n.d.).

**Wellness**

There are options that can be done to help improve how one feels when suffering from depression. Negative outlooks on life come with the diagnoses of depression, however, it is important to remember that the first step is to seek help. In order to maintain a treatment plan, the goals must be attainable and realistic. Maintaining a regular exercise plan will help to improve mood and emotions due to the increase of endorphins. Understanding that improvement of one's mood will be a gradual climb rather than an immediate change ("Depression," n.d.). Avoiding substances such as alcohol and drugs is important as they only make the symptoms of depression worse. Having patience whether it is the individual suffering from depression or friends and family is key to succeeding and treating depression as it is an illness that will improve day-by-day ("Depression," n.d.).

**Treatment**

Fortunately, there are many different forms of treatments that can be used on an individual with depression. Nearly 80-90% of those suffering from depression will respond positively to a treatment plan ("Depression," 2017). Nearly all depressed patients will gain a form of relief from their depressive symptoms. Usually, a thorough diagnostic evaluation, interview, and physical assessment will be performed on an individual showing signs of depression in order to ensure it is not an underlying medical condition such as a dysfunctional thyroid which can manifest itself as depression ("Depression," 2017). The healthcare team wants to understand the whole picture, so specific symptoms are addressed, medical and family history, cultural factors and environmental factors in order to not only make a proper diagnosis but to plan a proper treatment plan for the specific patient ("Depression," 2017).

**Medications**

Antidepressants are an option of treatment that may reduce, or even control symptoms of depression. Antidepressants can take up to two to four weeks to be implementing an effective and can take as long as 12 weeks to have a full effect ("Depression," 2017). Due to the longevity that this medication takes in order to have an effect on an individual, it is often times found depressed patients have a difficult time adhering to the medication regimen. Another complication to antidepressants is various medications and doses may need to be tried before the proper medical treatment can be established ("Depression," 2017). Selective serotonin reuptake inhibitors (SSRIs) act on serotonin which is a chemical found in the brain. Medications that are often prescribed that are SSRIs include fluoxetine (Prozac) or sertraline (Zoloft) ("Depression," 2017). The second most commonly prescribed antidepressants are serotonin and norepinephrine reuptake inhibitors (SNRIs) ("Depression," 2017). Common SNRIs include venlafazine (Effexor) or duloxetine (Cymbalta). Often times, if individuals are experiencing unmanageable symptoms with other antidepressants individuals will be prescribed norepinephrine-dopamine reuptake inhibitors (NDRIs) which work to increase dopamine and norepinephrine levels ("Depression," 2017). Tricyclic antidepressants (TCAs) are older in nature and are not the first line of treatment for depression due to their increase in side effects when compared to SNRIs ("Depression," 2017). Monoamine oxidase inhibitors (MAOIs) are a newer medication used for depression, and cannot be used in combination with SSRIs ("Depression," 2017). If it is found individuals are not responding well to other medications for depression than MAOIs may be tried in the treatment plan such as phenelzine (Nardil) or isocarboxazid (Marplan) ("Depression," 2017).

**Psychotherapy**

Has proven to be successful in helping individuals cope with depression. Often times psychotherapy and antidepressants are prescribed to help relieve a patient of symptoms of depression. Cognitive behavior therapy (CBT) is focused on assessing and changing negative thoughts that are associated with this mental illness ("Depression," 2017). The goal is to recognize those thoughts and to implement coping mechanisms to combat the negative thoughts when they arise ("Depression," 2017). Interpersonal therapy (IPT) is focused on improving relationships amongst the individual and their family and friends ("Depression," 2017). The therapist and the patient work on exploring the depressed patients' interactions with others, and how those interactions could be improved upon through recognizing and then improving ("Depression," 2017). Another therapy includes psychodynamic therapy which is used to understand negative behaviors and feelings that are associated with past experiences. This therapy works to address those issues and to then resolve them. The unconscious process of an individual is also explored during these therapy sessions in order to further understand the negative behaviors and thoughts ("Depression," 2017).

**Psychoeducation, and support groups**

Psychoeducation is aimed at providing education to the individuals and families affected by the depressive disorder. The education process not only educates the individual that is affected by this mental illness but the family as well so they understand what their loved one is going through which allows for empathy ("Depression," 2017). Support groups consist of participants that have the opportunity to share their experiences and coping strategies. Support groups can consist of the individual that is directly affected with depression, or it can be for the families or can even be combined with families and affected individuals at times ("Depression," 2017).

**Brain stimulation therapies**

This form of therapy is oftentimes implemented when other forms of therapies have failed. Electroconvulsive therapy (ECT) involves brief electrical stimulation of the brain while the patient is under anesthesia ("Depression," 2017). ECT is often times used on patients who suffer from MDD, or bipolar disorder that is unresponsive to other treatments ("Depression," 2017). The psychiatrist, anesthesiologist, and nurse often times assist in electroconvulsive therapy (Parekh, 2017). ECT is the best-understood brain stimulation therapy and therefore is often times the first line of treatment for brain stimulation therapy (Parekh, 2017). Another brain stimulation therapy is known as Repetitive Transcranial Magnetic Stimulation (rTMS) which involves the use of a magnet rather than an electrical current to stimulate the brain (Parekh, 2017). The third brain stimulation therapy is known as Vagus Nerve Stimulation (VNS) which goes under the skin and sends electrical pulses through the left vagus nerve (Parekh, 2017). The vagus nerves are responsible for delivering messages from the brain to the bodies organs and to areas within the brain that are responsible for mood, sleep, and other daily functions (Parekh, 2017). Recent studies have shown 32% of depressed people responded to VNS, and 14% had full remission after 2 years of treatment. However, it is not the first line of treatment due to poor studies conducted when VNS was just first being used (Parekh, 2017).

**Complementary and Alternative Medicine (CAM)**

This form of treatment is combined with medication, and psychotherapy in order to be effective in treating depression ("Depression," 2017). Aerobic exercise has been shown to help treat mild forms of depression due to the releasing of endorphins help to lift an individual’s mood. Implementing folate into the diet may be beneficial as studies have shown individuals with depression have decreased folate levels, so supplementation of folic acid in the diet is a crucial element ("Depression," 2017).

**Current Evidence-Based Research**

In order to enhance treatment for depression, there is a critical component that is missing. That critical component that will result in successful treatment of depression in all cases is furthering research in order to understand the neurological system and the mood systems found in the brain ("Current Research," 2018). By gaining an understanding of the brain, and why depression arises from changes in neurological chemical imbalances this can help to promote collaboration of new technology for depression. Since the breakthrough of Prozac which was about 25 years ago, there have not been any major treatments proven to be continuously successful in helping reduce the symptoms of depression ("Current Research," 2018). In fact, only about one-third of individuals suffering from depression recover due to a single antidepressant (hope for depression) and an additional one-third recover after receiving treatment for months to years for depression. Current treatment looks at animals neurological circuits to understand underlying depression ("Current Research," 2018). Using animal models allows tissue to be examined directly, as well as to study the electrical impulses and activity in the brain. Another important fact that animals allow researches to study directly is the effect of hormones and drugs that could potentially treat depression ("Current Research," 2018). A task force was created by an organization known as, Hope for Depression. This task force works collaboratively rather than individually to help grow research and understanding of depression. This group has been able to further research in order to understand the presence of imbalances of nerve circuits within the brain and how this has an effect on the electrical impulses and hormones ("Current Research," 2018). As more information is learned and understood about the brain, new medications and treatments can be designed to hopefully one day be able to be individualized for each person suffering from depression.

**Conclusion**

Depression is one of the most prevalent conditions in society where individuals are silently suffering from being undiagnosed, and therefore untreated. There is a high rate of morbidity and mortality when depression goes unchecked. In order to properly diagnose and treat, there must be a thorough medical and mental evaluation. Patients and families who are affected by depression have challenges in which they will have to overcome, so compassionate care, education, support, advocacy, and monitoring are critical components of managing the symptoms associated with depression.

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