

Learn about...

Depression

After years of working hard at your job each day, you've just been laid off. You feel sad, tired and emotionally drained. The last thing you feel like doing is getting out of bed in the morning. This sadness is a natural part of being human and feeling this way for a few days is normal. In fact, many people hear people say "I'm depressed" in their day-to-day life when they are talking about that low feeling that we can all have from time to time. But if these sad feelings last for more than a couple of weeks and you start noticing that it's affecting your life in a big way, you may be suffering from an illness called depression.

What is it?

Depression, also known as clinical or major depression, is a mood disorder that will affect one in eight Canadians at some point in their lives. It changes the way people feel, leaving them with mental and physical symptoms for long periods of time. It can look quite different from person to person. Depression can be triggered by a life event such as the loss of a job, the end of a relationship or the loss of a loved one, or other life stresses like a major deadline, moving to a new city or having a baby. Sometimes it seems not to be triggered by anything at all. One of the most important things to remember about depression is that people who have it can't just "snap out of it" or make it go away. It's a real illness, and the leading cause of suicide.

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Who does it affect?

Depression can affect anybody; young or old, rich or poor, man or woman. While depression can affect anyone, at anytime, it does seem to strike most often when a person is going through changes. Changes can be negative life changes such as the loss of a loved one or a job, regular life changes such as starting university or a big move, or physical changes such as hormonal changes or the onset of an illness. Because depression can be linked to change, certain groups of people are at risk more often than others:

- **Youth:** More than a quarter of a million Canadian youth — 6.5% of people between 15 and 24 — experience major depression each year. Depression can be hard to recognize in youth because parents and caregivers often mistake a teen's mood swings and irritability for normal adolescence, rather than depression. Studies have shown that gay, lesbian, bisexual or transgendered youth have higher rates of major depression.



- **Older adults:** Around 7% of seniors have some symptoms of depression. This can be brought on by the loss of a spouse, a shrinking circle of friends or the onset of an illness. It's also much more common among seniors living in care homes or who have dementia. Depression in people 65 and over appears to be less common than in younger groups, but researchers aren't sure if this is a real difference or an issue with the research questions. It's likely that depression is at least somewhat under-recognized in seniors. Some symptoms like changes in sleep or activity levels may be mistaken as signs of aging instead of depression.
- **Women:** Depression is diagnosed twice as much in women as it is in men. Some reasons for this difference include life-cycle changes, hormonal changes, higher rates of childhood abuse or relationship violence, and social pressures. Women are usually more comfortable seeking help for their problems than men which likely means

that depression in men may be highly under-reported. Men generally feel emotionally numb or angry when they are depressed whereas women usually feel more emotional.

- **People with chronic illness:** About one third of people with a prolonged physical illness like diabetes, heart disease or a mental illness other than depression, experience depression. This can be because a long term illness can lower your quality of life, leading to depression.
- **People with substance use problems:** There is a direct link between depression and problem substance use. Many people who are experiencing depression turn to drugs or alcohol for comfort. Overuse of substances can actually add to depression in some people. This is because some substances like alcohol, heroin and prescription sleeping pills lower brain activity, making you feel more depressed. Even drugs that stimulate your brain like cocaine and speed can make you more depressed after other effects wear off. Other factors, like family history, trauma or other life circumstances may make a person vulnerable to both alcohol/drug problems and depression.

- **People from different cultures:** Depending on your cultural background, you may have certain beliefs about depression that can affect the way you deal with it. For example, people from some cultures notice more of the physical symptoms of depression and only think of the emotional ones when a professional asks them. Attitudes from our cultures can also affect who we may ask for help. For example, in one BC study Chinese youth were twice as reluctant to talk to their parents about depression as their non-Chinese counterparts. Aboriginal people, on and off-reserve, may also have higher rates of depression, from 12-16% in a year, or about double the Canadian average.

Could I have depression?

- I feel worthless, helpless or hopeless
- I sleep more or less than usual
- I'm eating more or less than usual
- I'm having difficulty concentrating or making decisions
- I've lost interest in activities I used to enjoy
- I have less desire for sex
- I avoid other people
- I have overwhelming feelings of sadness or grief
- I'm feeling unreasonably guilty
- I have a lot of unexplained stomachaches and headaches
- I feel very tired and/or restless
- I have thoughts of death or suicide
- I'm feeling more tearful or irritable than usual

If you agree with five or more of these statements and have been experiencing them for more than two weeks you should talk to your doctor.

What can I do about it?

Depression is very treatable. In fact, with the right treatment, 80% of people with depression feel better or no longer experience symptoms at all. Some common treatments, used on their own or in combination are:

- **Counseling:** There are two types of counseling that work best for people with depression.
 - › **Cognitive-behavioural therapy (CBT):** A health professional who uses this approach can teach you skills to help change your view of the world around you. They do this by coaching you to break the negative patterns of depression including the thoughts and actions that can keep the depression going.
 - › **Interpersonal therapy (IPT):** Often when you are depressed your relationships with other people suffer. A health professional who uses IPT can teach you skills to improve how you interact with other people.
- **Medication:** There are many different types of effective medication for depression, and different kinds work in different ways, but they all target the chemicals in the brain that can get out of balance during depression. Talk to your doctor to find out if medication is right for you, and if so what type, and how much, to take.
- **Light therapy:** This treatment has been proven effective for people with Seasonal Affective Disorder. It involves sitting near a special kind of light for about half an hour a day. Light therapy should not be done without first consulting your doctor because there are side effects to this treatment. It is being researched for use in other kinds of depression as well.

- **Electroconvulsive therapy (ECT):** This is a safe and effective treatment for people with severe depression or who can't take medications or who haven't responded to other treatments. ECT is a treatment done in hospital that sends electrical currents through the brain.
- **Self-help:** For mild depression, or when moderate or severe depression begins to improve with other treatments, there are some things you can do on your own to help keep you feeling better. Regular exercise, eating well, managing stress, spending time with friends and family, spirituality, and monitoring your use of alcohol and other drugs can help keep depression from getting worse or coming back. Talking to your doctor, asking questions, and feeling in charge of your own health are also very important. Always talk to your doctor about what you're doing on your own.

Some people find that herbal remedies, such as St. John's Wort, help with their depression symptoms. Remember that even herbal remedies can have side effects and may interfere with other medications. Dosages can also vary depending on the brand you use. Talk about the risks and benefits of herbal or other alternative treatments with your health care provider(s) and make sure they know all the different treatments you're trying.



Where do I go from here?

The best first step is always to talk to your doctor. They can help you decide which, if any, of the above treatments would be best for you. They can also rule out any physical explanations for your symptoms. In addition to talking to your family doctor, check out the resources below for more depression information.

Other helpful resources are:

BC Mental Health Information Line

Call 1-800-661-2121 (toll-free in BC) or 604-669-7600 (in Greater Vancouver) for information, community resources, or publications.

Mood Disorders Association of BC

Visit www.mdabc.net or call 604-873-0103 for resources and information on mood disorder support groups.

Canadian Mental Health Association, BC Division

Visit www.cmha.bc.ca or call 1-800-555-8222 (toll-free in BC) or 604-688-3234 (in Greater Vancouver) for information and community resources on mental health or any mental disorder.

BC Partners for Mental Health and Addictions Information

Visit www.heretohelp.bc.ca for our Depression Toolkit, more fact sheets and personal stories about depression. The Toolkit is full of information, tips and self-tests to help you understand your depression.

Your Local Crisis Line

Despite the name, crisis lines are not only for people who are in crisis. You can call for information on local services or if you just need someone to talk to. You can find the number for your local crisis line online at www.crisiscentre.bc.ca/distress/other.php or at the front of your local phonebook under Emergency & Important Numbers > Distress Centres > Crisis Line. Many are available 24 hours a day, 7 days a week.

BC NurseLine

Call 1-866-215-4700 (toll-free in BC), 604-215-4700 (in Greater Vancouver) or 1-866-889-4700 (if you are deaf or hard of hearing). BC NurseLine provides confidential health information and advice. If English is not your first language, say the name of your preferred language in English to be connected to an interpreter. More than 100 languages are available. Anywhere in the province, call BC NurseLine to speak to a registered nurse 24-hours or a pharmacist from 5 pm to 9 am every day. Have your CareCard number ready. If you do not have a CareCard or don't want to give your CareCard number, you can still get service.

