



HARLEY THERAPY
Psychotherapy & Counselling London

Depression A Help Guide

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How is Depression Defined?

Depression is a common expression used for the description of a negative mood state. Depression is clinically understood as a diverse group of mood disorders that are associated with a wide range of mental health problems.

What are the Signs and Symptoms of Depression?

Symptoms of depression can include:

- Increase in negative feelings such as low mood, guilt, pessimism, worthlessness, negative feelings towards one's self and helplessness
- Reduced activity
- Loss of interest and enjoyment in life
- Irritability
- Sleeping more/ Sleeping less
- Higher appetite/ Lower appetite
- Lack of energy
- Social withdrawal
- Increased anxiety
- Lack of libido
- Exacerbation of pre-existing pains
- Suicidal thoughts or intentions
- Lower self esteem
- Self-harm
- Poor concentration

Depression can often take a remitting and relapsing course. This means that episodes that come and go can be common. The World Health Organisation (WHO) conducted a study of mental health disorders and found that at least 50% of people, following their first episode of major depression, will then go on to have at least one more episode. Furthermore, after the second and third episodes the risk of further relapse rises to 70% and 90% respectively.

How Prevalent is Depression?

Depression is a very common mental health condition which occurs across the world. It affects millions of people and estimates vary. Both males and females suffer, though some research suggests that it is more common among women.

All age ranges are affected including children, adolescents, adults and the elderly.

Some researchers have suggested that mild depression accounts for 70%, moderate depression 20%, and severe depression to account for 10% of cases.

It is estimated that depression is 2-3 times more common in those who suffer from a chronic physical health problem such as heart disease, cancer, diabetes, respiratory disorder or a neurological disorder.

What are the Causes of Depression?

Depression has been studied and researched well and several possible causes have been identified.

Many cases will involve a combination of factors including biological, environmental and psychological ones.



Biological

Genetics have been found to be linked to the development of depression. Research has shown that people with parents who have had depression, have a higher chance of developing the illness. Further research indicates that an imbalance of neurotransmitters in the brain is associated with depression. However, there is still speculation as to whether this chemical imbalance is a cause or effect of depression.

Depression can be a side-effect of many medications. It is worth checking the patient information leaflet of any medication being taken if you are concerned. Some examples include Corticosteroids, Benzodiazepines, Levodopa, Reserpine, Beta blockers and certain cancer chemotherapeutic agents.

Other health issues that may cause depression include chronic illness, hormonal problems (especially thyroid and parathyroid), menstrual cycle issues, menopause, dementia, low blood sugar levels, sleep problems and severe head injuries.

Environmental

There are many environmental causes to the development of depression. Many have found that a stressful trigger such as illness (in yourself or a loved one), financial struggles, job problems, a loss, a trauma, and difficulties in relationship can lead to the illness. In addition, a lack of social support may enhance the experience of depression. Substance use and abuse has been linked to depression as a possible causal factor and can enhance symptoms. It is also important to note that alcohol is a depressant.

Interestingly, there have also been findings in a connection between diet and depression. A poor diet or certain foods/ drinks may be contributory factors. If you feel depressed for no apparent reason it may be worthwhile keeping a diet-diary and look for any mood patterns that may emerge.

Humans are social creatures and findings have shown that loneliness and isolation can lead to depression. Interaction with others is important for many different reasons including our mental health.

Psychological

Early experiences can have a great influence on life-long mental health. Individuals who experienced a trauma at a young age are more likely to develop mental health problems later in life, including depression. There are many complex reasons for this, one being that an individual may have unresolved issues which counselling and psychotherapy can help with significantly.

Certain psychological traits such as low self-esteem and negative thought patterns can contribute to the development of depression.

Misunderstandings and Stigma about Depression

Along with many mental health problems, depression can be misunderstood. Findings have shown that many have limited understanding about the causes and treatment pathways. Depression Awareness Week is held from the 15th-21st April and aims to educate the public as to symptoms and ways to seek help if you or someone you know is depressed. This is also a time for individuals to share their experiences of depression.

What are the Diagnostic Criteria for Depression?

The diagnostic criteria for depression has changed over the years. The two classificatory systems for mental health problems are DSM-IV-TR and the ICD-10. While they both outline similar suggestions for the diagnosis of depression they are not identical.



Recently, the Guideline Development Group (GDG) took the decision to base the diagnostic criteria on the DSM-IV-TR.

Depression can be referred to as a group of mood disorders. These include illnesses such as Major Depressive Disorder, Minor depressive disorder, Seasonal Affective Disorder, Mixed anxiety and depressive disorder, Dysthymic Disorder, Bipolar I Disorder and Cyclothymic Disorder.

Diagnosis for depression involves a healthcare professional asking a set of questions. The diagnosis is made according to the number and severity of symptoms as well as the degree of functional impairment.

What is the Prognosis if left untreated?

Some people will only ever experience one episode of depression which will pass in a short time. However, many will suffer for a long time and can experience a number of episodes which can lead to further health risks. Symptoms can lead to further health problems which can enhance feelings of depression; it can become a viscous and lonely cycle.

Studies have also indicated that adherence to medication can be negatively affected by depression. This, of course can lead to further problems and enhanced depression. In addition, the risk of mortality is increased by suicide and from medical illnesses.

What is the Prognosis if treated?

Depression can have a very successful prognosis in that there are many evidence-based treatments readily available. With the right psychological support and/ or medication the treatment- success rate can be high. There are many ways to alleviate symptoms and to feel better.

As many people who have depression can experience episodes, it is important to be prepared for this. It may help to have an on-going relationship with a mental health professional just as you would if you had an illness such as high blood pressure or diabetes. You can work together to form a relapse plan and to develop understandings of your case of depression.

You are not alone in this; in fact it is one of the most common mental health problems worldwide.

Well-Known Figures

Celebrities who have been suggested to have had depression include Princess Diana, Angelina Jolie, Bob Dylan, Janet Jackson, Marilyn Monroe and J.K. Rowling.

Guidelines for Help: National Institute of Clinical Excellence (NICE)

NICE quality standards in the UK are a set of specific statements that act as markers of high quality, cost effective patient care, covering the treatment and prevention of different diseases and conditions.

The Depression in adults quality standard (Q8) makes recommendations on the identification, treatment and management of depression in adults, in primary and secondary care. One outline is that 'treatment and care should take into account patients' needs and preferences. People with depression should have the opportunity to make informed decisions about their care and treatment, in partnership with their practitioners'.

For more information please visit this link for access to NICE publications related to depression:
<http://www.nice.org.uk/Search.do#/search/?reload>



Evidence-Based Treatment Interventions for Depression

The recommended treatment for each person will depend on the individual and the issues relating to the depression. The organisation chosen will also offer different treatment approaches. The severity of your illness will also influence which treatment pathway is best.

You may be given an assessment such as the Hospital Anxiety and Depression Scale [HADS] or the Beck Depression Inventory [BDI] during initial assessment which will identify some important factors and will help with treatment planning.

As the causes of depression can be biological, environmental and psychological the treatment given will need to reflect this. For example, an imbalance in neurotransmitters may be treated by medication that aims to balance these brain chemicals.

There are many anti-depressants available and these can be prescribed by your GP or Psychiatrist. You should be aware of the side effects that your prescribed medication has. It is also important to consider alternative ways of treatment rather than relying on solely medication. There could be an environmental or psychological causal factor which will need to be addressed too.

Some ways in which psychological help is offered may include individual counselling sessions, group, couples, family therapy or a combination. There are many psychological approaches used in the treatment of depression. This is not an extensive list of all the therapeutic approaches used but here are some examples of evidence-based approaches: cognitive therapy, cognitive behavioural therapy, problem solving, counselling, behavioural activation, rational emotive behavioural therapy, interpersonal therapy, mindfulness and psychodynamic therapy.

In some cases it may be beneficial to use both medication and therapy. The aims of treatment will often be to reduce symptoms and to decrease the likelihood of relapse.

Breaking the Cycle of Depression

When you feel ready there are many ways in which you can help, support and advice. Firstly it may be worthwhile reading a self-help book. There are many out there which have been extremely helpful.

Recommended books include:

- 'Overcoming depression' Christopher Williams
- 'A Guide to Rational Living' Albert Ellis's



Where can you get help?

Some **self-help websites** include:

- <http://www.moodjuice.scot.nhs.uk/depression.asp>
- <http://www.nhs.uk/conditions/Depression/Pages/Introduction.aspx>
- <http://www.guardian.co.uk/society/depression>

Some useful **telephone numbers** include:

- NHS Direct: 0845 4647
- ChildLine – 0800 1111
- Samaritans – 08457 90 90 90

There are now many counselling and therapeutic services and organisations available with trained professionals to support you (including counsellors, psychotherapists, psychologists and psychiatrists).

Here are some services:

The **NHS** - seeing your GP and asking for a referral to see a specialist.

Charities - (e.g. MIND, Rethink, Young Minds, and The Mental Health Foundation) Some may provide support groups, therapy and advice in your local or near-by area. See their websites for further details.

Counselling and psychotherapy clinics and services - Search online or contact your council for organisations that can offer therapeutic help. [Harley Therapy](http://www.harleytherapy.co.uk) is one organisation that can assist.

The process normally starts with an initial assessment and perhaps some questionnaires. You will be asked questions to identify the issues, causes and problems and to begin to formulate your treatment plan.

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Many thanks. Sheri Jacobson

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