



San Diego's Voice On Mental Illness

The symptoms of depression include:

- profoundly sad or irritable mood
- pronounced changes in sleep, appetite, and energy
- difficulty thinking, concentrating, and remembering
- physical slowing or agitation
- lack of interest in or pleasure from activities that were once enjoyed
- feelings of guilt, worthlessness, hopelessness, and emptiness
- recurrent thoughts of death or suicide
- persistent physical symptoms that do not respond to treatment, such as headaches, digestive disorders, and chronic pain

MAJOR DEPRESSION

Major depression is a serious medical illness affecting 9.9 million American adults, or approximately 5 % of the adult population in a given year. Unlike normal emotional experiences of sadness, loss, or passing mood states, major depression is persistent and can significantly interfere with an individual's thoughts, behavior, mood, activity, and physical health. Major depression is the leading cause of disability in the U.S. and many other developed countries. Nearly twice as

many women (6.7 million) as men (3.2 million) suffer from major depressive disorder each year. Major depression can occur at any age. All ethnic, racial and socioeconomic groups suffer from depression. More than half of those who experience a first episode of depression will have at least one other episode in their lives. Some individuals may have several episodes in the course of a year. If untreated, episodes commonly last anywhere from six months to a year. Left untreated, depression

can lead to suicide. Major depression, also known as clinical depression or unipolar depression, is only one type of depressive disorder. Other depressive disorders include dysthymia (chronic less severe depression) and bipolar disorder (manic depression). People who have bipolar disorder experience both depression and mania. Mania involves abnormally and persistently elevated mood or irritability, elevated self-esteem, and excessive energy, thoughts, and talking.

Open Your Mind



*Mental Illnesses
Are Brain Disorders*

1-800-950-NAMI

- **When several symptoms of depression occur, last longer than two weeks, and interfere with ordinary functioning, professional treatment is needed.**
- **Consumers and their families must be cautious during the early stages of treatment when energy levels and the ability to take action return before mood improves. At this time - when decisions are easier to make, but depression is still severe - the risk of suicide may temporarily increase.**

What are the causes of major depression?

There is no one single cause of major depression. Psychological, biological, and environmental factors may all contribute to its development. Whatever the specific causes of depression, scientific research has firmly established that major depression is a biological brain disorder.

Norepinephrine, serotonin, and dopamine are three neurotransmitters (chemical messengers that transmit electrical signals between brain cells) thought to be involved with major depression. Scientists believe that if there is a chemical imbalance in these neurotransmitters, then clinical states of depression result. Antidepressant medications work by increasing the availabi-

lity of neurotransmitters or by changing the sensitivity of the receptors for these chemical messengers. Scientists have also found evidence of a genetic predisposition to major depression. There is an increased risk for developing depression when there is a family history of the illness. Life events, such as the death of a loved one, a major loss or change, chronic stress, and alcohol and drug abuse, may trigger episodes of depression. Some illnesses and some medications may also trigger depressive episodes. It is also important to note that many depressive episodes occur spontaneously and are not triggered by a life crisis, physical illness, or other risks.

How is major depression treated?

Although major depression can be a devastating illness, it is highly treatable. Between 80 and 90 percent of those suffering from serious depression can be effectively treated and return to their normal daily activities and feelings. There are three basic types of treatment for depression: medications, psychotherapy, and electroconvulsive therapy (ECT). They may be used singly or in combination.

Medications used to treat depression

- Tricyclic antidepressants (TCAs) - still widely used for severe depression. These medications include amitriptyline (*Amitril*, *Elavil*), desipramine (*Norpramine*), doxepine (*Sinequan*), imipramine (*Antipress*, *Imavate*, *Tofranil*), nortriptyline (*Aventyl*, *Pamelor*), and protriptyline (*Vivactyl*). TCAs elevate mood and activate behavior, but it often takes three to four weeks for an individual to respond
- Monoamine oxidase inhibitors (MAOIs) - are often effective in individuals who do not respond to other medications or who have "atypical" depressions with marked anxiety, excessive sleeping, irritability, hypochondria, or phobic characteristics. These medications include phenelzine (*Nardil*) and tranylcypromine sulfate (*Parnate*)
- Selective serotonin reuptake inhibitors (SSRIs) - act specifically on the neurotransmitter serotonin. In general SSRIs cause fewer side effects than TCAs and MAOIs. These medications include fluoxetine (*Prozac*), sertraline (*Zoloft*), and paroxetine (*Paxil*).
- Serotonin and norepinephrine reuptake inhibitors (SNRIs) - useful as first-line treatments in people taking an antidepressant for the first time and for people who have not responded to other medications. In general SNRIs cause fewer side effects than TCAs and MAOIs. These medications include Venlafaxine (*Effexor*)
- Bupropion (*Wellbutrin*) - newer antidepressant medication classified as a dopamine reuptake blocking compound. It acts on the neurotransmitters dopamine and norepinephrine. In general bupropion causes fewer side effects than TCAs and MAOIs.

NAMI San Diego

NAMI San Diego, a non-profit organization, provides education, support services, and advocacy to improve the quality of life of everyone affected by mental illnesses. It is an affiliate of the National Alliance on Mental Illness (NAMI) and NAMI California. Its membership includes persons with brain disorders, their families, friends, mental

health professionals and supportive members of the community.

NAMI offers monthly informational meetings, a monthly newsletter, a lending library of books and videotapes, and support meetings for consumers and families throughout the county.

For information and support, call

**NAMI San Diego
Helpline**

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