

Depression

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Clinical Psychology

Content

- Definition of Depression
- History of Depression
- Type of Depression
- Epidemiology
- Depression and Relationship of Brain
- Causes of Depression and its signs and symptoms
- Treatment
- Depression Test

What is depression?



▶ **A depressive disorder:** is an illness that involves the body, mood, and thoughts. It interferes with daily life, normal functioning, and causes pain for both the person with the disorder and those who care about him or her.

▶ Many people with a depressive illness never seek treatment. But the majority, even those with the most severe depression, can get better with treatment. Medications, psychotherapies, and other methods can effectively treat people with depression

History of Depression

- ▶ During Ancient Greek Period depression was initially called “melancholia”
- ▶ Melancholia means extreme, persistent sadness or hopelessness in old Greek language.



▶ Ancient Greeks and Romans were divided in their thinking about the causes of melancholia. Literature of the time was filled with references to mental illness caused by spirits or demons. In the 5th century B.C., the Greek historian Herodotus wrote about a king who was driven mad by evil spirits. In contrast, early Roman and Greek doctors thought that depression was both a biological and psychological disease. Gymnastics, massage, special diets, music, and baths, as well as a concoction of poppy extract and donkey's milk were used to alleviate depressive symptoms.

▶ After the fall of the Roman empire in the 5th century, scientific thinking about the causes of mental illness and depression again regressed. During the Middle Ages, religious beliefs, specifically Christianity, dominated popular European explanations of mental illness. Most people thought that mentally ill people were possessed by the devil, demons, or witches and were capable of infecting others with their madness. Treatments of choice included exorcisms, and other more barbaric strategies such as drowning and burning

- Robert Burton (1599-1640): “The Anatomy of Melancholy”. “This Melancholy of which we are to treat, is a habit, a serious ailment, a settled humour...not errant, but fixed: and as it was long increasing..., it will hardly be removed”.
- Emil Krapelin (1856-1926): origin of psychiatric disease to be biological and genetic malfunction.
- Henry Maudsley (1835-1918): Influenced Darwin proposed the term affective disorder.
- Charles Darwin (1809-1882): “The expression of the emotions in man and animals”. Genetically determined aspects of behavior.

- Sigmund Freud (1856-1939): Founder of psychoanalysis. Melancholia could result from mourning for an objective loss and of a subjective one when the individual's ego is compromised.
- Currently: - Depression is either endogenous (melancholic) considering a biological condition, or reactive (neurotic) a reaction to a stressful events, and/or - depression is caused by a chemical imbalance in neurotransmitters in the brain

Forms of depressive disorders.

▶ **Major depression**,—severe symptoms that interfere with your ability to work, sleep, study, eat, and enjoy life. An episode can occur only once in a person’s lifetime, but more often, a person has several episodes.


▶ **Persistent depressive disorder**—depressed mood that lasts for at least 2 years. A person diagnosed with persistent depressive disorder may have episodes of major depression along with periods of less severe symptoms, but symptoms must last for 2 years.

▶ Some forms of depression are slightly different, or they may develop under unique circumstances. They include:

▶ **Psychotic depression**, which occurs when a person has severe depression plus some form of psychosis, such as having disturbing false beliefs or a break with reality (delusions), or hearing or seeing upsetting things that others cannot hear or see (hallucinations).

► **Postpartum depression** which is much more serious than the "baby blues" that many women experience after giving birth, when hormonal and physical changes and the new responsibility of caring for a newborn can be overwhelming. It is estimated that 10 to 15 percent of women experience postpartum depression after giving birth.

► **Seasonal affective disorder (SAD)**, which is characterized by the onset of depression during the winter months, when there is less natural sunlight. The depression generally lifts during spring and summer. SAD may be effectively treated with light therapy, but nearly half of those with SAD do not get better with light therapy alone. Antidepressant medication and psychotherapy can reduce SAD symptoms, either alone or in combination with light therapy



Bipolar Depression also called manic-depressive illness, is not as common as major depression or persistent depressive disorder. Bipolar disorder is characterized by cycling mood changes—from extreme highs (e.g., mania) to extreme lows (e.g., depression).

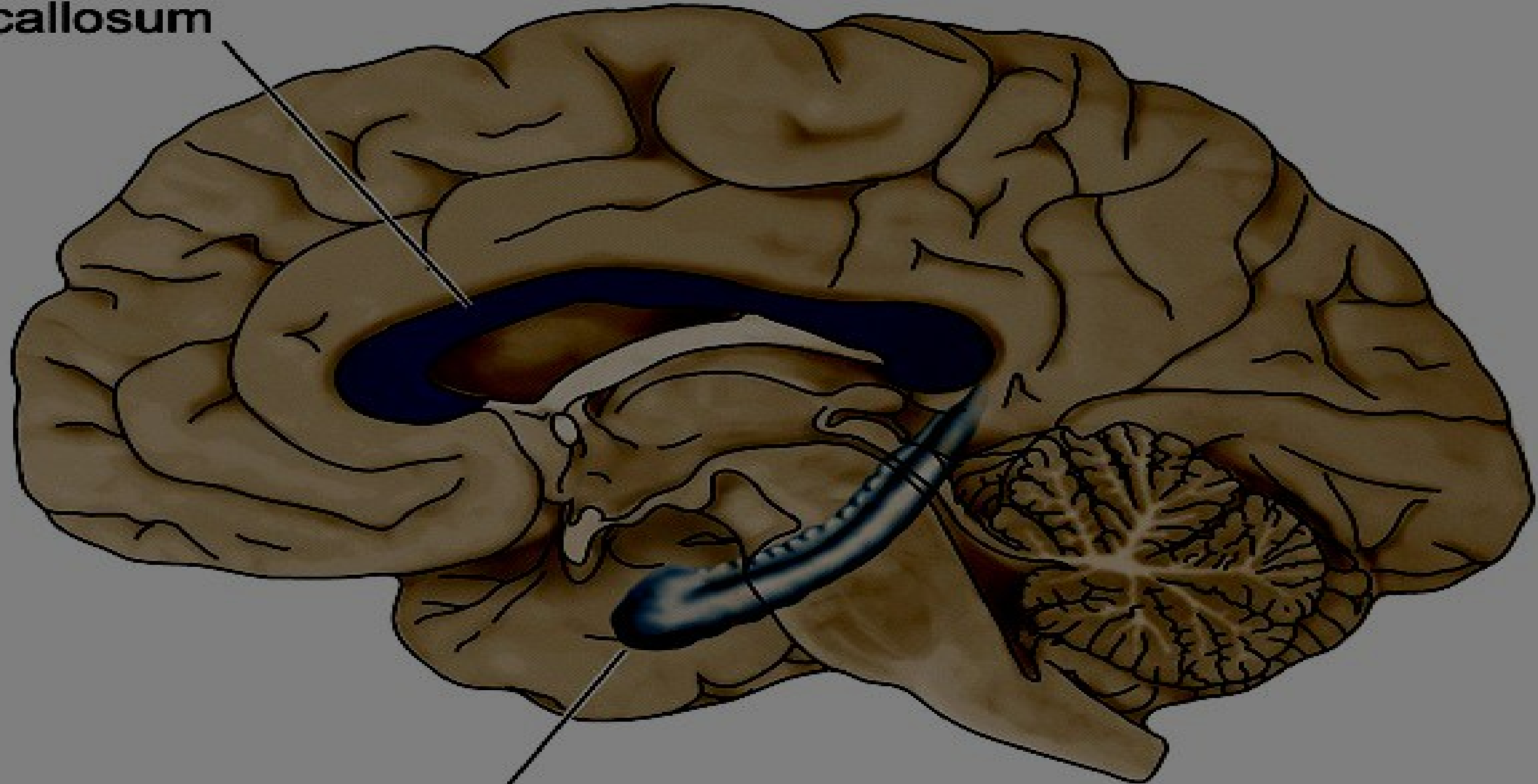
Epidemiology

- ▶ An estimated 121 million people around the world currently suffer from some form of depression
- ▶ Over 80% of the people that have symptoms of clinical depression are not receiving any specific treatment for their depression.
- ▶ 60-80% of all depression cases can be effectively treated with brief structured forms of psychotherapy and antidepressant medications.
- ▶ Overall women have higher rates of depression than men
- ▶ Women are twice as likely to have depression and symptoms of depression as men of the same age
- ▶ 1 in 10 women experiences symptoms of depression in the weeks after having a baby

Depression and the Brain

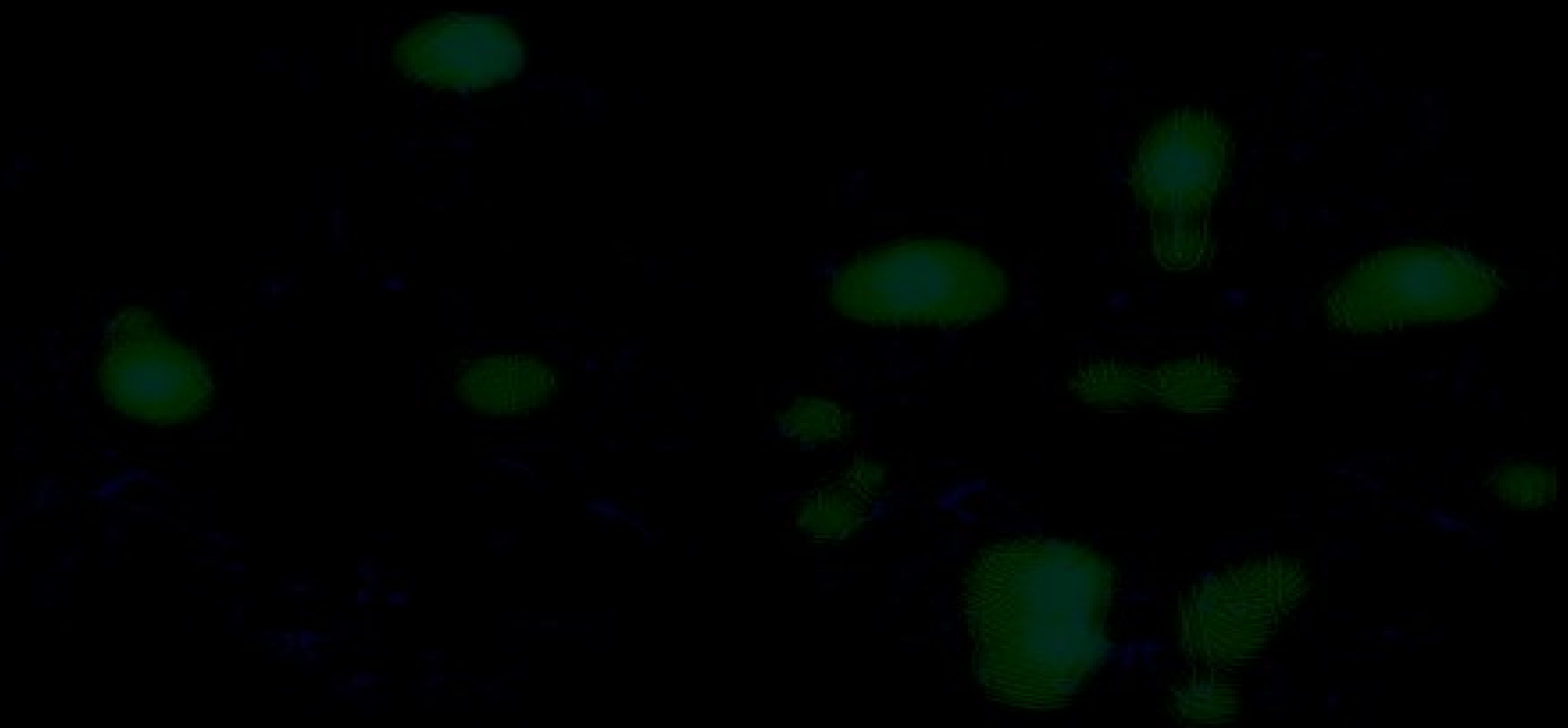
<https://www.youtube.com/watch?v=GOK1tKFFIQI>

Corpus callosum



Hippocampus

Brain Scan of Depression

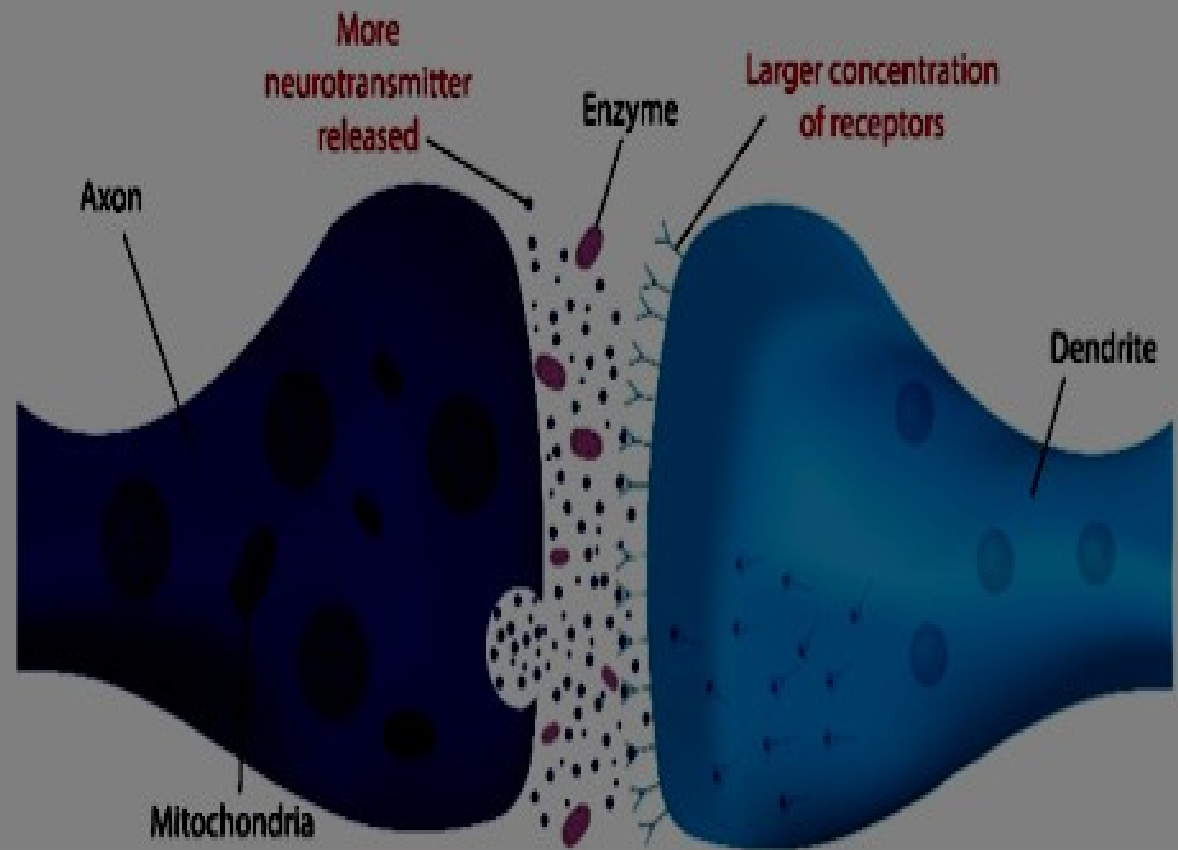


Depressed

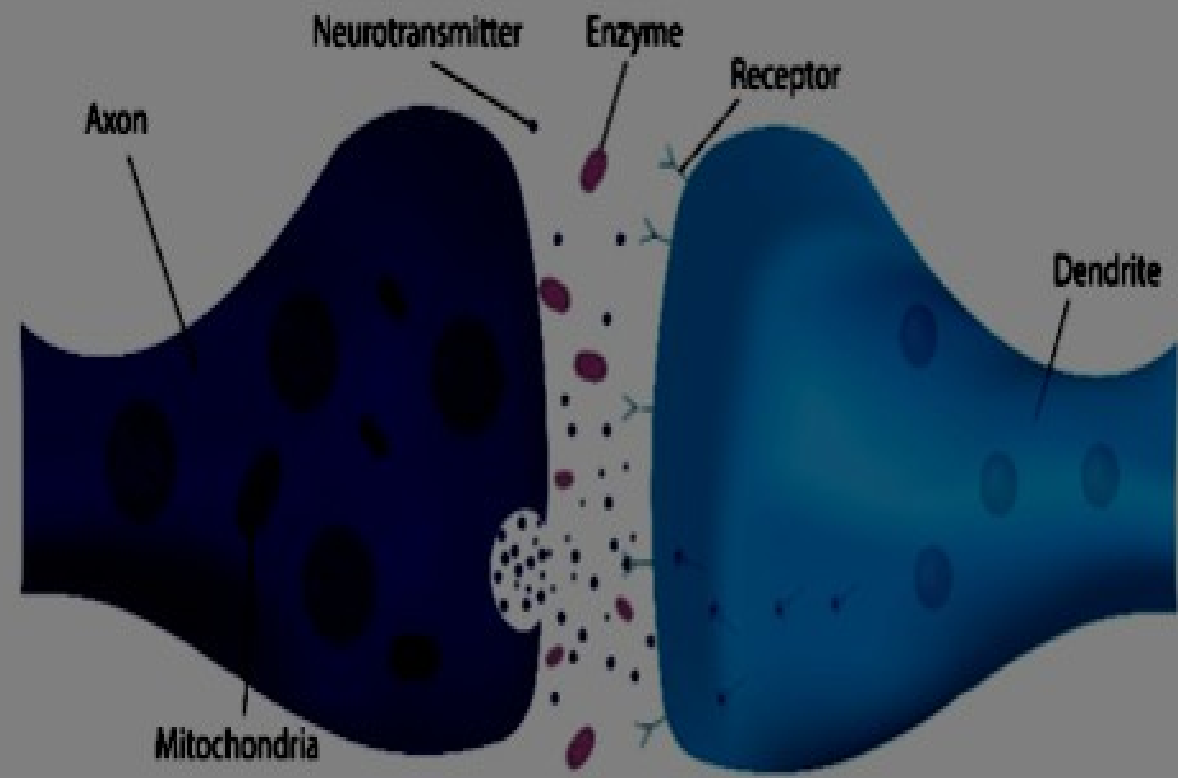
Not Depressed

Depression

Healthy Synapse




Synapse of a Depressed Person



Causes

▶ Most likely, depression is caused by a combination of genetic, biological, environmental, and psychological factors.

▶ Some types of depression tend to run in families. However, depression can occur in people without family histories of depression too. Scientists are studying certain genes that may make some people more prone to depression. Some genetics research indicates that risk for depression results from the influence of several genes acting together with environmental or other factors. In addition, trauma, loss of a loved one, a difficult relationship, or any stressful situation may trigger a depressive episode. Other depressive episodes may occur with or without an obvious trigger.



► Depressive illnesses are disorders of the brain. Brain-imaging technologies, such as magnetic resonance imaging (MRI), have shown that the brains of people who have depression look different than those of people without depression. The parts of the brain involved in mood, thinking, sleep, appetite, and behavior appear different. But these images do not reveal why the depression has occurred. They also cannot be used to diagnose depression.

Signs and symptoms include:

People with depressive illnesses do not all experience the same symptoms. The severity, frequency, and duration of symptoms vary depending on the individual and his or her particular illness.

- ▶ Persistent sad, anxious, or "empty" feelings
- ▶ Feelings of hopelessness or pessimism
- ▶ Feelings of guilt, worthlessness, or helplessness
- ▶ Irritability, restlessness
- ▶ Loss of interest in activities or hobbies once pleasurable, including sex
- ▶ Fatigue and decreased energy
- ▶ Difficulty concentrating, remembering details, and making decisions
- ▶ Insomnia, early-morning wakefulness, or excessive sleeping
- ▶ Overeating, or appetite loss
- ▶ Thoughts of suicide, suicide attempts

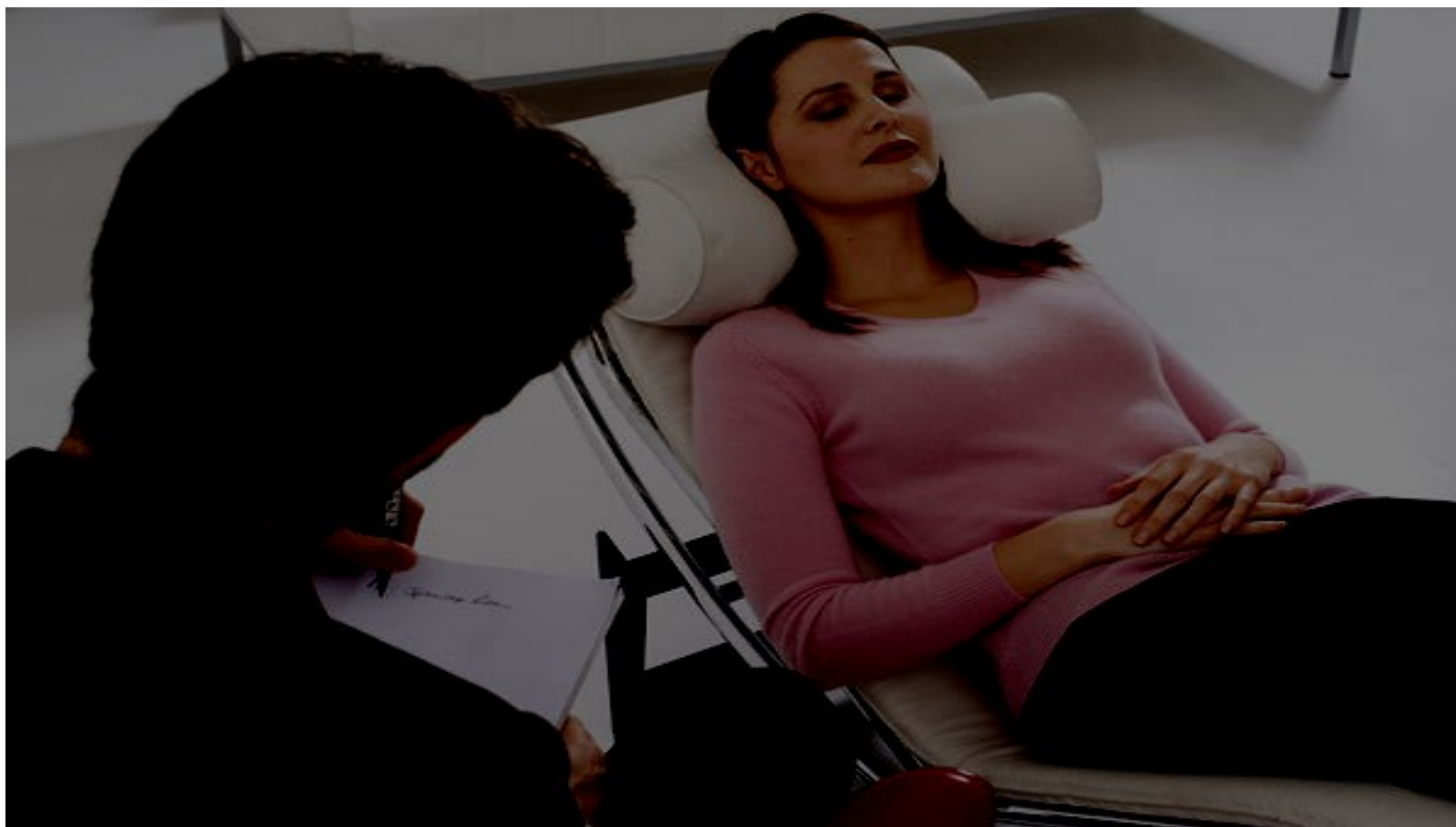
<https://www.youtube.com/watch?v=XiCrniLQGYc>

Treatments

Once diagnosed, a person with depression can be treated in several ways.

- ▶ Psychotherapy
- ▶ Medication

Psychotherapy



Cognitive behavioral therapy (CBT)

- ▶ Cognitive behavioral therapy (CBT) helps you understand your thoughts and behaviour and how they affect you.
- ▶ CBT recognizes that events in your past may have shaped you, but it concentrates mostly on how you can change the way you think, feel and behave in the present.
- ▶ It teaches you how to overcome negative thoughts, for example being able to challenge hopeless feelings.
- ▶ CBT is available on the NHS for people with depression or any other mental health problem that it has been shown to help.
- ▶ You normally have a short course of sessions, usually six to eight sessions, over 10 to 12 weeks on a one-to-one basis with a counsellor trained in CBT. In some cases, you may be offered group CBT.

Interpersonal therapy (IPT)

- ▶ IPT focuses on your relationships with other people and on problems you may be having in your relationships, such as difficulties with communication or coping with bereavement.
- ▶ There's some evidence that IPT can be as effective as antidepressants or CBT, but more research is needed.

Psychodynamic psychotherapy

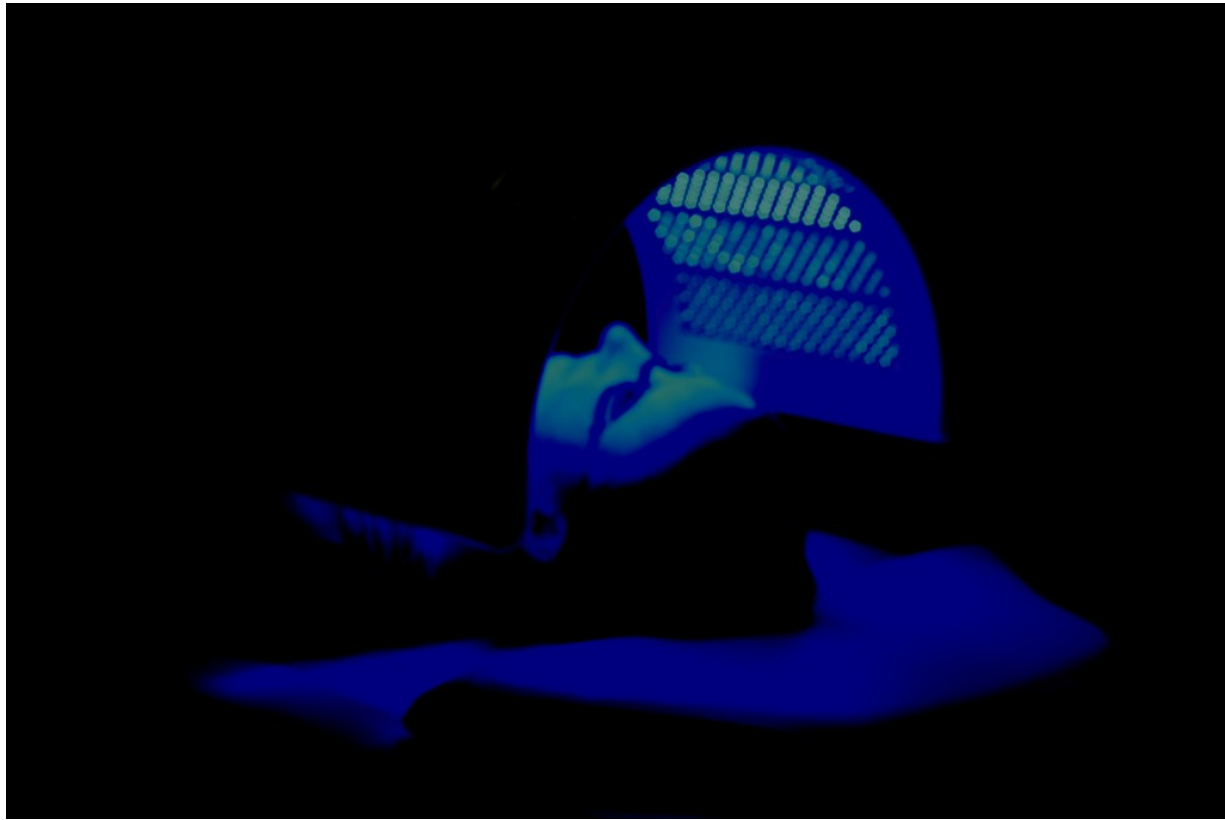
- ▶ In psychodynamic (psychoanalytic) psychotherapy, a psychoanalytic therapist will encourage you to say whatever is going through your mind.
- ▶ This will help you to become aware of hidden meanings or patterns in what you do or say that may be contributing to your problems.

Counselling

- ▶ Counselling is a form of therapy that helps you think about the problems you are experiencing in your life to find new ways of dealing with them. Counsellors support you in finding solutions to problems, but do not tell you what to do.
- ▶ Counselling on the NHS usually consists of six to 12 hour-long sessions. You talk in confidence to a counsellor, who supports you and offers practical advice.
- ▶ Counselling is ideal for people who are basically healthy but need help coping with a current crisis, such as anger, relationship issues, bereavement, redundancy, infertility or the onset of a serious illness.

Light Therapy

- ▶ Light therapy is a way to treat seasonal affective disorder (SAD) by exposure to artificial light. Seasonal affective disorder is a type of depression that occurs at a certain time each year, usually in the fall or winter.
- ▶ During light therapy, you sit or work near a device called a light therapy box. The box gives off bright light that mimics natural outdoor light.
- ▶ Light therapy is thought to affect brain chemicals linked to mood, easing SAD symptoms. Using a light therapy box may also help with other types of depression, sleep disorders and other conditions. Light therapy is also known as bright light therapy or phototherapy.



Electric shock treatment

- ▶ Sometimes electroconvulsive therapy (ECT) may be recommended if you have severe depression and other treatments, including antidepressants, haven't worked.
- ▶ During ECT, you'll first be given an anaesthetic and medication to relax your muscles. Then you'll receive an electrical "shock" to your brain through electrodes placed on your head.
- ▶ You may be given a series of ECT sessions. It is usually given twice a week for three to six weeks.



Medication

- ▶ Antidepressants are medicines that treat the symptoms of depression. There are almost 30 different kinds available.
- ▶ Most people with moderate or severe depression benefit from antidepressants, but not everybody does. You may respond to one antidepressant but not to another, and you may need to try two or more treatments before you find one that works for you.
- ▶ The different types of antidepressant work about as well as each other. However, side effects vary between different treatments and people.

Class	Antidepressants
Selective serotonin reuptake inhibitors (SSRIs)	Citalopram (Celexa), escitalopram (Lexapro), fluoxetine (Prozac), fluvoxamine (Luvox), paroxetine (Paxil), sertraline (Zoloft)
Serotonin norepinephrine reuptake inhibitors (SNRIs)	Desvenlafaxine (Pristiq), duloxetine (Cymbalta), milnacipran (Ixel), venlafaxine (Effexor)
Norepinephrine dopamine reuptake inhibitors (NDRIs)	Bupropion (Wellbutrin)
Tricyclic antidepressants (TCAs)	Amitriptyline (Elavil), clomipramine (Anafranil), desipramine (Norpramin), imipramine (Tofranil), nortriptyline (Aventyl)
Tetracyclic antidepressants (TetCAs)	Mianserin (Norval), mirtazapine (Remeron)
Monoamine oxidase inhibitors (MAOIs)	Phenelzine (Nardil), selegiline (L-deprenyl, Emsam)

Lithium

.If you've tried several different antidepressants and had no improvement, your doctor may offer you a type of medication called lithium in addition to your current treatment.

.There are two types of lithium: lithium carbonate and lithium citrate. Both are usually effective, but if you are taking one that works for you, it's best not to change.



Depression Test

- ▶ http://psychologytoday.tests.psychtests.com/take_test.php?idRegTest=1308
- ▶ <http://www.mentalhealthamerica.net/mental-health-screen/patient-health>

List of Literature

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Thank You For Your Attention!!!



