Depression- An Overview

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Abstract-

Depression is a physical state of mind during which a living being (an object) gets disturbed because of many surrounding factors. If an object shows negative or self-harming behaviour due to this, then it may be under depression. There are many trigger factors for it and any age group will show its effects. Close relatives, friends, and relatives should be observant of such a behavioural change. They must recommend such a type of case to a psychologist, psychotherapist, counsellor etc. if the object is unaware of it. The medical treatment, counselling and relaxation techniques can be proved beneficial if followed regularly.

Keywords- Depression, Grief, Types, Symptoms, Treatment, self-help.

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I. Introduction

When the body shows any sign of ill- health, a human being, immediately visits a doctor, starts getting treatment and gets cured. When there is any disturbance in the mind's health, it is human tendency to avoid revealing such a mental stage to others and get treated. In such a situation, it is always good to approach for help and get treated. A person should give equal importance to the health of the body and mind.

Feeling sad and having depression are two different issues. During the grieving process, sadness is a natural and unique feeling for each individual and shows similar symptoms as that of depression. These feelings generally involve sadness and withdrawal from usual activities.

Analysis

Dissimilarity in two concepts is as follows-

- In grief, painful feelings are often mixed with positive memories of the deceased. In major depression, mood and/or interest vanishes for a certain period of life.
- In grief, self-esteem is usually maintained. In major depression, feelings of worthlessness and self-loathing are common.
- In grief, thoughts of death may surface when thinking of or fantasizing about "joining" the deceased loved one. In depression, a person generally thinks about his/her life due to feeling worthless or undeserving and can not cope with surroundings.

The following factors play a major role in depression:-

- Neurotransmitters like serotonin, dopamine and norepinephrine are the chemicals secreted by the brain. An imbalance in their secretion can be a biochemical factor.
- When one of the siblings is undergoing depression there is a 70 percent chance of having this illness to the other one, sometime in life. A similar thing is true if parents or any of the family members are suffering from depression. So this can be considered as a genetic factor.
- People with less self-esteem, easily triggered by stress, or who are generally pessimistic may face depression easily, which can be considered a personality factor.
- Continuous exposure to violence, negligence, abuse or poverty can also encounter the risk of depression, which is considered an environmental factor.

Some of the types of depression are as follows-

- Perinatal depression- It refers to depression occurring during pregnancy or after childbirth. It starts during pregnancy and can be treatable. Feelings of extreme sadness, indifference and/or anxiety, as well as changes in energy, sleep, and appetite. One in seven women experiences this type of depression which affects a child, mother and everyone from the family.
- Seasonal affective disorder (SAD)- It is a form of depression which is also called seasonal depression or winter depression. People with SAD experience symptoms during fall and winter months like mood swings

and other symptoms similar to depression. The symptoms generally improved with the arrival of spring. It is more common among women than men.

- Bipolar disorder- It is a brain disorder that is related to changes in a person's mood, energy, and ability to function. Generally, people experience intense emotional mood swings. These mood fluctuations are categorized as manic/hypomanic or depressive. Sometimes they also show a neutral mood. The mood swings should not be disbelieved as mood fluctuations which last for some time depending on the experiences in day-to-day life. The symptoms of bipolar disorder accompany extreme degree of behaviour changes, and difficulty coping with daily routine and social interactions.
- Premenstrual dysphoric disorder (PMDD)- It generally affects menstruating women. A woman shows severe symptoms of depression, irritability, and tension about a week before menstruation begins. Common symptoms include mood swings, anger, depressed mood, marked anxiety or tension, decreased interest in usual activities, difficulty concentrating, lack of energy or easy fatigue, changes in appetite with specific food cravings (specifically for sweets and other carbohydrates), trouble sleeping or sleeping too much, or a sense of being overwhelmed or out of control. Physical symptoms may include breast swelling or tenderness, pain in joints or muscles, feeling "bloated", or weight gain. These symptoms begin a week to 10 days before the start of menstruation and improve or stop around the onset of menses. The symptoms lead to significant distress and may cause problems with regular functioning or social interactions.
- Premenstrual syndrome (PMS)- It is similar to PMDD. The symptoms occur seven to 10 days before a woman's period begins. However, the symptoms are fewer and less severe than PMDD.
- Disruptive mood dysregulation disorder- It is diagnosed in children and youth ages 6 to 18 and is more common in males than females. It involves chronic and severe irritability, which leads to severe and frequent temper outbursts. These children generally show verbal or physical aggression, which is not consistent with their developmental age which is in response to frustration. During the outbursts, the child's mood is persistently irritable or angry. There can be thoughts of death which may lead to suicidal attempts. Parents, teachers, and peers can easily experience this mood. This behaviour can disrupt family life, cause difficulties in school, and make it difficult for the child/youth to be friends with others. It may occur along with other disorders, including major depression, attention-deficit/hyperactivity, anxiety, and conduct disorders.
- Depression in youth- Causes can be:
- 1)Disagreements and fights with family or friends.
- 2) Change in educational environment, e.g. Change in school, entering college life after school.
- 3)Being bullied.
- 4) Experiencing a relationship break-up, recent death of pet/ family member/friend, abuse or neglect.

Depression can affect anyone. Every living going through a phase of sadness which may lead to depression, due to loneliness, not getting the demands fulfilled by others, selfishness, the desire to remain at the centre of attention and many more. The behaviour should be observed by close friends, family members, teachers, counsellors, mentors etc. The destructive nature and self-harming behaviour should be brought to the notice of authorities. The patients need to talk openly with trusted people. It is important to remove medication, sharp objects, and dangerous items from their vicinity. A strong support system should always be available for them.

The symptoms can vary from mild to severe and can appear in different ways in each person. All the symptoms may not be present in a depressed individual. Many times one or two or combinations of different symptoms are seen.

Symptoms are as follows:-

- The feeling of sadness, irritability, emptiness and/or hopelessness.
- Losing an interest or pleasure in activities in which an individual was interested before.
- Social withdrawal.
- In the case of students, poor academic performance.
- A significant change in appetite and/or weight. (a sudden increase or decrease).
- Little sleep, restlessness, insomnia or too much sleep.
- Decrease in physical energy, increase in tiredness or fatigue.
- Inability to sit still, pacing, hand wringing, slowed movements or speech which can be easily marked by others.
- Feeling worthless or excessively guilty.
- Difficulty in thinking process or concentrating, forgetfulness, and/or difficulty in making minor decisions.
- Thoughts of death, suicidal ideation, or suicide attempts.
- Addiction- frequent use of alcohol and drugs.

If the person goes through these symptoms and related causes for a longer time, it becomes a part of the individual's day-to-day experience, they may not seek help, just assuming that "I've always been this way." In this situation, parents, siblings, children, colleagues, and mentors play a major role in the preliminary diagnosis of the case. About 70%-90% of cases of depression are fully treatable if diagnosed correctly by family members along with the help of a medical practitioner and if a person suffering from it accepts and gives a positive response for the treatment. For correct diagnosis, a healthcare professional conducts a thorough diagnostic evaluation that includes a comprehensive interview to discuss the symptoms in addition to personal, medical and family histories. Apart from this, physical examination is also necessary including hormonal imbalance, vitamin deficiencies, neurological problems and importantly addiction to drugs and or alcohol. All these diagnostic tests are very important as the conclusion will determine the line of treatment.

Treatment

- Medication and psychotherapy- As an individual's brain chemistry plays a major role in depression, antidepressants and/ or mood stabilizers may be recommended. These medications are not sedatives or tranquilizers and no one gets addicted to the medication. They are generally used to improve brain health. Along with medication, psychotherapy to the patient and or to family members, colleagues, and peers is also suggested. Cognitive behavioural therapy (CBT), which is a type of psychotherapy, is effective in treating depression. It focuses on recognizing and correcting unhealthy thinking patterns to change thoughts and behaviours to respond to challenges in a more positive manner. It is recommended to use alone or in combination with antidepressant medication. Group therapy brings together, in a therapeutic environment, a group of people who are similarly experiencing depression, so that the person will not be conscious about the case. The medication and psychotherapy are recommended until all symptoms vanish but patients with a strong family history of depression are recommended to take long-term treatment as per the doctor's recommendation.
- Electroconvulsive Therapy (ECT)- It is the treatment which is done in the presence of a medical practitioner, psychiatrist, anaesthesiologist and physician's assistant. This treatment is recommended for those who have severe depressive episodes and who have not responded to other treatments. During the procedure, electric stimulations are given to the brain under anaesthesia to induce brief seizures.
- Self-help and Coping- There are several things people can do to help reduce the symptoms of depression. For many people, regular exercise helps create positive feelings and improves mood. Getting enough quality sleep regularly, eating a healthy diet and avoiding depressants like alcohol.

Self-help tips-

- Searching for positivity in each situation.
- Pursuing a creative activity like dance, painting, or playing a musical instrument.
- Focusing life on a particular goal
- Eating healthy food.
- Regular exercise like walking, swimming etc.
- Following relaxation techniques.

II. Conclusion

There is a taboo for talking about one's mental health. If relatives or colleagues are supportive, a person can approach them and open up or seek medical help. All types of depression are treatable and a person can lead a normal life after taking medical treatment, counselling etc. patiently.

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