

Depression

Often times depression gets mixed up with a sense of feeling down or having a blue day . At these times it is hard to figure out how you are feeling. For example, when you are down it may be that you are bored or maybe angry. It's so easy to say "Oh I'm so depressed today," when in fact you are frustrated or sad. Even experiencing a major disappointment may cause a deep sadness, grieving, some sleep disturbance and also anxiety but it's not for long and the person can regroup and go about life again. When depressed however, a person is unable to regroup and go about normal activities of daily living.

Clinical Depression : is a depressive illness as described in the DSM-IV as having a depressed mood most of the day as reported by the person or by others. This can also be called Anhedonia which is a decreased interest and lack of pleasure in activities for most of the day, almost everyday.

Along with depression comes :

- a) a significant weight loss or gain in a 2 week period.
- b) difficulty falling or staying asleep.
- c) being either restless or slowed down for a good part of the day.
- d) feeling fatigued or experiencing a loss of energy almost everyday.
- e) feeling worthless or having inappropriate guilt almost everyday.
- f) decreased ability to think or concentrate, or being indecisive almost everyday.
- g) repeated thoughts of death, suicidal ideas or specific plans made for a suicide attempt.

There are also different types of depression :

Unipolar depression : is a depressed mood for two weeks and at least four of the above symptoms.

Bipolar depression : commonly called manic depression. The person experiences extreme mood swings alternating from depression to mania. In the manic phase symptoms include an extra elevated mood, increased self esteem, being more talkative and experiencing racing thoughts.

Atypical depression: a type of depression that is characterized by a chronic depressed mood, overeating, over-sleeping and sensitivity to rejection.

Seasonal Affective Disorder: commonly called SAD. This form of depression is related to the seasonal changes in sunlight and lasts for about 5 months.

Dysthymia: Chronic depressed mood for at least two years without a break in symptoms for more than two months.

Psychotic depression: this is depression with delusions or hallucinations usually with morbid or sad themes. This type of depression requires psychiatric attention.

Postpartum depression: this depression occurs in 10% of new moms in the first to sixth week after delivery and it can interfere with the mother's ability to care for her baby.

Reactive depression: is a type of depression that is usually in response to a loss of some kind. It is a reaction to a difficult situation in one's life. This type of depression is not often one of a clinical nature.

Depression affects you and your relationship with your significant other:

1. Changes in roles: The things that the depressed person used to do they are unable to right now, so your work load increases
2. Financial Changes: the depressed partner is unable to work therefore you may have to go to work for the first time
3. Changes in Routine: You may need to be home more with your depressed spouse
4. Changes in social life: Your partner may not be able to muster up enough energy to have visitors or go out
5. You may expect the following changes as well: increased conflict, decreased sex drive, increased sympathy may change to an increased anger towards your partner, you may begin to feel unloved and unappreciated and begin to get depressed yourself.

Remember: *Depression is not willful. It is not a way that your partner is getting back at you. It does not mean that either of you is crazy although at times it feels like that.*

Guidelines to Remind Yourself:

1. **Have realistic expectations:** You are not responsible to remedy your partner's depression. Don't fool yourself in thinking "if only I could make him laugh, he'd feel better," or "if only I could make him get up, it would make him better."

Depression does not just occur overnight. Thinking that depression is a problem that you can help cure is unrealistic. Your partner's depression is not your fault or his. Although you can help him, you cannot make it go away. Depression, like many of life's experiences are not problems to be fixed but rather situations to be responded to.

2. **Offer Unqualified Support:** your partner needs unconditional love and support. They need to know that you will be there in spite of their moodiness and irritability. Don't come on too strong with all kinds of constant advise and suggestions. And if your partner seems distant and does not want your help, be careful not to take the rejection personally. Remember that the rejection is part of the depression. This is not really how your partner feels about you.

3. **Maintain Your Routine:** Although your partner is depressed, try to maintain your own routine; keep up with friends and your usual activities.

4. **Share Your Feelings:** It is very important that you let your partner know how you feel. Even when your partner is depressed you need to let him know what you are thinking and feeling. Let your partner know how you feel without attacking him or blaming him for the depression. Remind yourself that your partner's actions are part of the depression rather than intentional.

5. **Externalize:** There is an exercise in counselling called externalization. Often the depressed person feels that they are the depression. But it is important to remember that depression is something separate from your partner. It is like a thief that has robbed many things from your relationship together. You are on a team together with your partner to reclaim what the depression has stolen.

6. **Ask for help:** You need support too! Make your needs known. As your partner may need the help of health professionals you too may need support. You may need to talk about your frustrations. Living with a depressed person is very stressful and can take a toll on your work, your social life, and your health and your emotions.

7. **Work as a Team with Your Partner:** Remember to function as a team. You're on the same side to fight the depression.

Treatment: In the case of reactive depression the person may just need to seek out a good counsellor. However if it is more of a clinical depression then health care professional need to get involved and the depressed person may need an antidepressant and/or counselling.

How People Want to be Treated When They're Depressed:

- * with love
- * kindly, gently
- * with compassion
- * with respect
- * to be listened to
- * with patience
- * with tolerance
- * firmly
- * I want someone to keep me safe
- * I want someone to pray for me
- * I want reassurance
- * I want people to let me work it out
- * with an effort to keep me involved
- * with help to take care of my responsibilities
- * I want people to include me, but at the level I can participate
- * I want people to be nearby but not watching over me, not to try and cheer me up, just to listen; not to try to have any answers
- * I want people to remind me not to be so hard on myself
- * I want people to be direct and ask if I need to talk

What People Don't Want From Others During Depressive Episodes:

- * blame for what I can not help
- * humiliate me
- * desert me
- * put undue demands on me
- * tell me to get my act together
- * tell me to "pull myself up by my boot straps"
- * pressure me to go out (although being invited is better than not being invited)
- * make fun of me
- * avoid me
- * give me sympathy
- * tell me to cheer up