

We all feel sad or low sometimes. It is a natural human emotion to feel down when life gets hard. These feelings usually pass over time. However, some people experience these feelings intensely for weeks, months, or even years. Often the reason is not apparent. This is called depression.

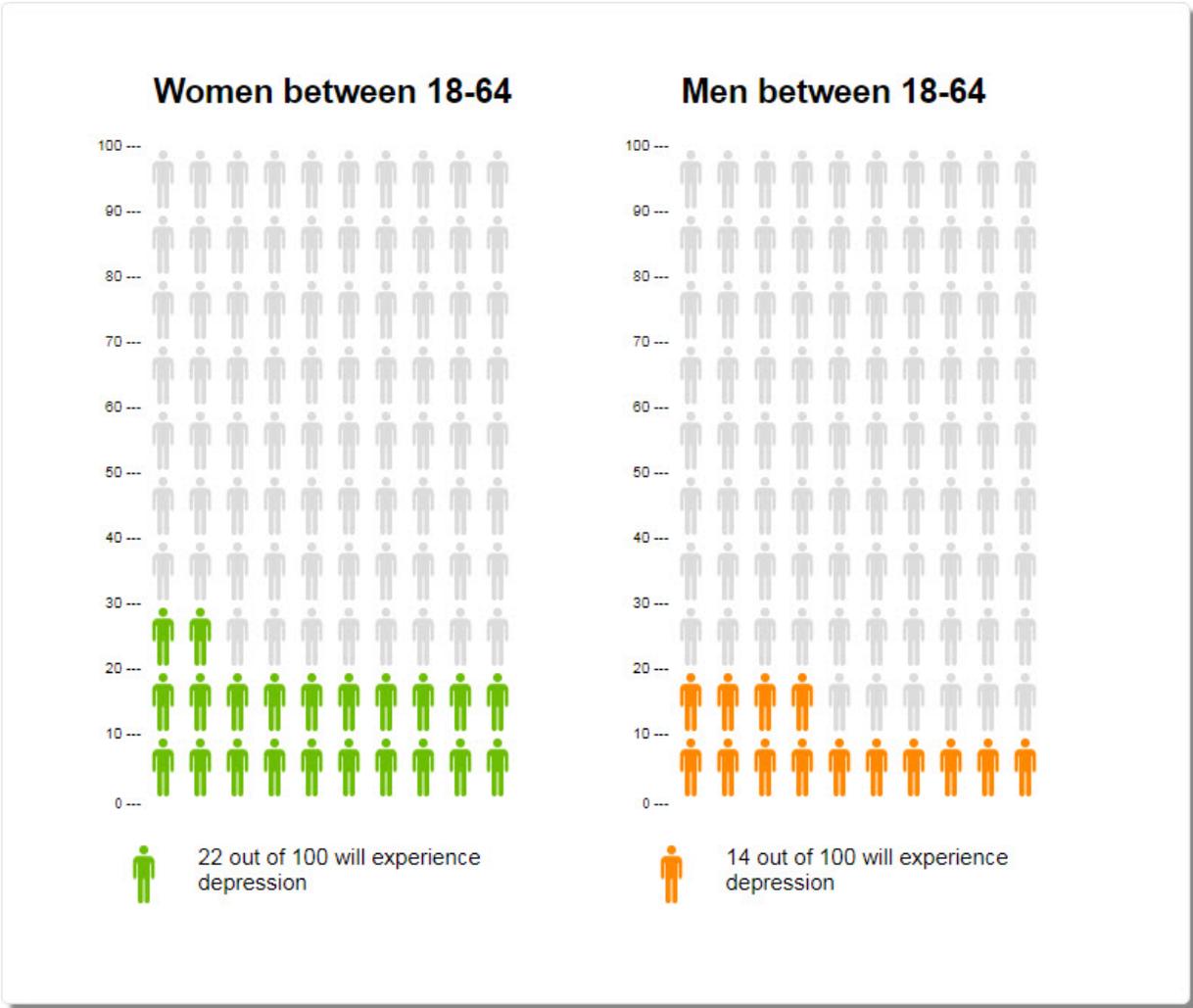
Depression is a serious mood disorder that affects how you feel, think, and manage daily activities. Depression is an illness in the same way that cancer, diabetes, and heart disease are illnesses.

Some facts about depression:

Depression does not discriminate. Men and women of every age, race, ethnicity, educational level, and social and economic background suffer from depression. The problems that result from depression often get even worse because most people with depression are never diagnosed, let alone treated.

There are ways you can feel better. When depression is identified and treated, its symptoms are manageable and there are many effective strategies for living with the disease. Depression and bipolar disorder are both treated most effectively in their earliest stages when symptoms are less severe.

You are not alone. The World Health Organization characterizes depression as one of the most disabling disorders in the world, affecting roughly 1 in 5 women and 1 in 10 men at some point in their lifetime. In the U.S., it is estimated that 22 out of 100 (22%) of women and 14 out of 100 (14%) of men between the ages of 18-64 will experience depression at some point in their lifetime.



What are the different types of depression?

Major Depressive Disorder (MDD) (clinical depression)

MDD is a mood disorder characterized by low mood and/or loss of interest and pleasure in activities. Depression is classified as “major” if someone experiences at least 5 symptoms of depression that interfere with daily life and functioning over a period of 2 weeks.

Persistent Depressive Disorder (PDD) (also called Dysthymia)

PDD is a milder form of depression that lasts for at least 2 years. The symptoms of dysthymia are similar to those of major depression but are less severe and longer-lasting.

Melancholic depression

Melancholic depression is a severe form of depression that is characterized by a complete loss of pleasure in all or almost everything, despair, and emptiness. Someone with this form of depression may experience extreme slowness of movement or irregular movement. The depression is regularly worse in the morning and is accompanied by lack of appetite and weight loss.

Perinatal depression

Perinatal depression is major depression that occurs during pregnancy or within a year after delivery (postpartum depression). Women frequently experience mild mood changes during or after pregnancy, but if these symptoms become severe, they may require treatment. Symptoms include extreme sadness, anxiety, exhaustion, and difficulty bonding with the baby, making it difficult for women to complete daily care activities for themselves and/or for their babies.

Psychotic depression

Psychotic depression occurs when a person with a depressive disorder loses touch with reality and experiences some kind of psychosis, such as having disturbing false beliefs that are not shared by others (delusions) or seeing or hearing upsetting things that are not really there (hallucinations).

Seasonal affective disorder (SAD)

SAD is depression that takes place during the fall and winter months, when there is less natural sunlight. SAD generally lifts during spring and summer and

returns every year. It is characterized by social withdrawal, increased sleep, weight gain, and hopelessness.

Treatment-resistant depression (TRD)

TRD is a term used to describe cases of depression that do not respond well to treatment. Treatment may not help much, or symptoms may improve but keep coming back. TRD may require various treatments to identify what helps.

Doctors are now recognizing that a significant percentage of people struggling with depression have TRD. As awareness of TRD has increased, so have the new approaches to address this condition.

Situational Depression

Situational depression is a short-term form of depression that can occur following stressful life events, including divorce, retirement, loss of a job and the death of a relative or close friend.

How is Major Depressive Disorder (MDD) diagnosed?

When diagnosing MDD, doctors must rely on a careful analysis of symptoms over time. Doctors use the following criteria from the American Psychiatric Association's guidelines to make a formal diagnosis:

Depressed mood or a loss of interest or pleasure in daily activities for more than 2 weeks.

- Mood represents a change from the person's norm
- Impaired function: social, occupational, educational
- At least 5 of these 9 symptoms are present nearly every day:
 1. Depressed mood or irritable most of the day, nearly every day
 2. Decreased interest or pleasure in most activities, most of each day
 3. Significant weight change or change in appetite
 4. Change in sleep

5. Change in activity level
6. Fatigue or loss of energy
7. Guilt/worthlessness: Feelings of worthlessness or excessive or inappropriate guilt
8. Concentration: Difficulty concentrating or thinking
9. Suicidality: Thoughts of death or suicide, or has suicide plan

For more information:

- University of Michigan Depression Center
- 1-800-475-MICH or 734-936-4400
- <http://www.depressioncenter.org/toolkit>

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Anxiety is a normal reaction to stress, but it can become a problem when it results in obsessive thoughts, excessive worrying, or uncontrollable fears about everyday events. Very often, people who experience anxiety also have depression - this is true in approximately 75 out of 100 people (75%).

Similar to depression, different factors may all play a role in bringing on an episode of anxiety: inherited characteristics, brain chemistry, and environmental factors, such as stressful life events. Anxiety can be treated successfully through medication or specific types of psychotherapy, or both.

What are the different types of anxiety disorders?

- **Panic Disorder** is characterized by unexpected, repeated episodes of intense fear, accompanied by physical symptoms such as rapid heart rate, dizziness, or sweating.
- **Social phobia, or Social Anxiety Disorder**, is characterized by intense, persistent anxiety and self-consciousness that arise in everyday social situations, or even just in anticipating those situations.
- **Obsessive-Compulsive Disorder (OCD)** is characterized by recurrent, intrusive thoughts (obsessions) and/or the compulsion to engage in certain repetitive behaviors or rituals.
- **Post-Traumatic Stress Disorder (PTSD)** can develop after a terrifying ordeal that involved real or threatened physical harm.
- **Specific Phobia** refers to a fear of specific objects or situations, and the distress when encountering those objects or situations. The primary symptom of phobia is avoidance.

- **Generalized Anxiety Disorder (GAD)** involves prolonged, excessive worrying about everyday matters. People with GAD often have fatigue, restlessness, insomnia, irritability, and poor concentration.

University of Michigan researchers are actively studying anxiety disorders to understand their causes and interactions with other illnesses. With early diagnosis and early treatment, it is possible that anxiety disorders may be better controlled and less likely to contribute to depression later in life.

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Stress is a part of everyday life. Feelings of stress can have a positive influence – for example they can motivate you to meet an important deadline or avoid a dangerous situation. However, stress often has the opposite effect, harming our emotional and physical health and limiting our ability to function.

Whether caused by an external trigger (like losing a job) or an internal trigger (like setting unrealistic expectations for yourself), your body and mind must attend to stress in order to return you to balance. This takes your energy away from other, more positive functions like concentrating or taking action. Since we are responsible for bringing about much of our own stress, however, we can also do much to reduce it.

Common signs of stress

- Feelings of anger
- Tension
- Tight muscles
- Changes in eating habits
- Changes in sleeping habits
- Inability to focus

Self-care strategies for managing stress

Many of the above signs are common to both stress and depression. That means you can use many of the same life changes and self-care strategies to ease the symptoms of depression *and* alleviate stress:

- Exercise regularly to burn off the energy generated by stress.
- Limit or eliminate stimulants like caffeine.
- Pace yourself through the day, and take breaks.
- Practice good sleep habits.

- Recognize the role your thoughts play in causing you stress. Challenge negative messages and unrealistic expectations you may be communicating to yourself. Practice positive self-talk to offset these counterproductive thoughts.
- Learn techniques for “reframing” situations to see their positive aspects.
- Find humor in life. Laughter is a great tension-reducer.
- Seek the support of friends and family.
- Explore different techniques to find those most effective at helping you relax your mind and body, such as abdominal breathing, progressive muscle relaxation, visual imagery, or mindfulness.

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When it comes to making lifestyle changes to positively affect your treatment, increasing your level of physical activity is one of the simplest and effective steps you can take.

Can exercise really help?

Physical activity has been shown to help counteract depression by:

- Reducing the severity of depressive symptoms.
- Leading to improved self-esteem.
- Relieving stress by burning off stress chemicals such as adrenaline.
- Providing distraction from negative thinking.
- Improving quality of sleep.
- Stimulating the body's release of endorphins, which are chemicals that have a naturally relaxing and calming effect on the body.



Getting motivated

If you find you need an additional “push” to get serious about exercise, keep in mind there are both immediate and long-term benefits:

- **Immediate:** regulating mood and lessening depressive symptoms.
- **Long-term:** greater strength, more energy, weight loss, muscle toning.

Research has shown that aerobic (or heart-rate elevating) activities can produce the most dramatic reductions in depressive symptoms. Other forms of exercise, such as strength training or conditioning, may also be effective. You can choose from a wide variety of activities!

Steps for getting started

1. Check with your doctor or health care provider before you begin any exercise program.
2. Choose an activity that you like to do. The key is simply to get moving.
3. Decide how much activity is right for you.
 - The American Heart Association recommends that adults devote 30 minutes a day, 5 days each week to physical activity to help maintain overall health. That's a good starting point.
4. Set and maintain a regular routine.
 - When you make exercise a priority on your daily calendar, you'll be less likely to forget or neglect it.
5. Start slowly and increase your activity level over time.
6. Keep a record of your activity levels.
7. There will be times when, for one reason or another, you fall short of your exercise goals. Keep going, and remember that **every** effort is worthwhile.

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Why is sleep so important when living with depression, bipolar disorder, and related illnesses? Sleep helps restore both brain and body. Sleep has been shown to help keep the body's immune system strong, and can also help regulate moods and reduce stress. Maintaining good habits for restful, effective sleep – sometimes called good *sleep hygiene* – is crucial for managing your mental health.

Tips for better sleep

Daily Activities

- Get outside and exercise during the daytime, but avoid energetic or stressful activities in the evening.
- Maintain a regular meal schedule. Limit caffeine.
- Avoid naps.
- Don't smoke or use tobacco.



Evening and bedtime routine: establishing a sleeping schedule

- Try to go to bed and get up at the same time every day, even on the weekend.
- Allow at least one hour to unwind before bed.
- Use dim light during your pre-bed routine.
- Don't take medicine that may keep you awake right before bed (ask your doctor about this).
- Don't drink alcohol before bedtime.

Where you sleep can affect how well you sleep

- Sleep only in the bedroom and keep it quiet, dark, and at a comfortable temperature.
- Reserve the bedroom only for sleep and sex - keep TV and other activities out.
- If you need a nightlight, use a red bulb.
- Consider a sleep mask, earplugs, or a “white noise” machine to block out noise.

When it is hard to fall asleep or stay asleep:

- Go to another room and do a quiet or boring activity until you feel very sleepy.
- Try a relaxation technique. Find some ideas in the Depression Center Toolkit!

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