

CHAPTER ONE

Are You Depressed?

IN THIS CHAPTER YOU WILL:

- ✓ Read a more detailed discussion of what is and is not depression.
- ✓ Understand why you should probably see a physician if you suspect that you are depressed.
- ✓ Take a quick test to find out if you or a family member is depressed.
- ✓ Read about the degrees of depression and the important differences between mild, moderate, and severe depression.
- ✓ Learn that, because depression has no single cause, it is usually fruitless to spend time searching for the precise reasons for this depression.

Do you, or someone you care for, suffer from depression? It's important to know. If what you are experiencing is a temporary sadness brought on by a crisis in your life, you'll find reassurance in knowing that it will pass. If what looks like depression actually is the result of a physical illness, finding the cause could save your life. (See chapter five.) Learning the nature and severity of your dark mood is the necessary first step toward defeating or preventing depression.

When Nathan's wife left him, he felt despondent. He hadn't wanted a divorce. Their only child moved with ex-wife Camilla to a city nearly 1200 miles away.

Camilla had always taken care of Nathan; she had cooked, cleaned, paid the bills, balanced the checkbook, and planned their vacations. Now he felt helpless and incompetent. He had no relatives within a thousand miles. Nathan's friends at work tried to be supportive, and members of his church had rallied around in the first weeks after the divorce. But there were no more parties at his house (that had been Camilla's specialty). He went fishing with his buddies a couple of times, but they made jokes about Camilla and about divorce in general. Nathan had trouble entering into their good-natured ribbing.

Nathan thought he would adjust as time went by, but he only felt worse. Four months after the divorce, he still found himself weeping when anything reminded him of her. He had trouble sleeping. He missed his wife terribly.

Was Nathan depressed? Perhaps not. Four months is not a very long time after the severing of such an important relationship. His grief was still quite fresh. He lacked a community to grieve with him; he shed his tears alone, at home, in his car, sometimes in the men's room. Nathan's responses to the loss of his marriage were normal, but because of his isolation he was walking the ragged fringe of depression. He needed to make some lifestyle changes, find supportive relationships, and take on one or two healthful activities to protect himself from a serious, long-term depression.

People usually feel down and distressed after an important loss such as the death of a spouse or loved one, divorce, disability, or other significant loss. It's normal. In fact, it would be abnormal *not* to respond with sadness or grief.

If this sounds like you, there is no particular reason to believe you have a major depression—not unless you have been down for an unusually long period of time and don't seem to be coming out of it. Read on for tips that can prevent your sadness from taking over your life.

Isn't/Is

Depression is *not discouragement* in a life filled with physical pain, tragedy, or oppression. It is not cynicism or outrage. It is not a short spell of feeling blue or a passing bout of deep sadness. Nearly all people go through times when they feel down.

Depression is not sin. It is *not* your fault. If you struggle with depression, you need skills to address it and work to control it; you do *not* need to take on a load of guilt. This perspective smoothes the way for positive change because, once you have learned how to handle depression, you can move forward to a more hopeful and productive future.

Depression is not necessarily feeling sad or low. Many people experience ebbs and flows in their moods: periods of high and low energy, times when they accomplish a great deal and times when they do little or nothing, procrastinate, or waste time. Life is not a sitcom with characters who are always upbeat, clever and witty. You need to recognize and accept that you can have periods of low mood; most people do. The important thing is what you do about it.

Many people try to deny their despondent feelings. They may act strong and in control, upbeat all the time. They may refuse to acknowledge what is happening to them. Others may admit to feeling depressed, but beat up on themselves for feeling that way. They may see themselves as sick, lazy, good-for-nothing, losers, and worse; they expect their lives to be like the lives of those absurdly euphoric young adults in beer commercials on TV.

Depression (also called *melancholia* or *melancholy* in this book) is a unique disorder because it affects the total human organism—your body as well as your thinking, feeling, interpersonal relationships, and behaviors. It has an infinite number of possible causes and triggers. Because it is so complex, the steps that you take to overcome depression need to be tailored to your own specific circumstances.

When to See a Doctor

It is important to keep in mind that some of depression's symptoms are also characteristics of physical diseases. Several years ago I knew a man who described low mood, exhaustion, weight loss, and marital strife. He had a history of depressive episodes, but the rapid weight loss and his general out-of-sorts feeling suggested that his problem might be something other than depression or marital strife. A physical examination revealed that he had cancer and needed immediate surgery. After his recovery, the depressive symptoms vanished. Not the marital strife, however. After several sessions of marriage counseling, he and his wife began to achieve a more mutually satisfying relationship.

Important point!

If you have any symptoms of depression, you need to have a thorough medical examination and tell the doctor your symptoms. Most likely you do not have a physical illness, but you *must* check it out. If you feel too shy or embarrassed to talk about your depression, get someone to do it for you or write it down on a piece of paper and hand it to your doctor.

Take This Quiz before Moving On

Here is a quick checklist that you can use to find out if you or your loved one has symptoms of depression. It is very important to remember that this checklist is a preliminary screening test only. It is intended solely for the purpose of identifying the symptoms of depressive disorders, and not to provide a diagnosis for major depressive disorder. As such, it cannot replace a formal therapeutic or psychiatric evaluation.

Remember, only a physician or qualified mental health professional can make an accurate diagnosis for depression (or any other psychiatric disorder), after giving a complete evaluation, including a physical exam to rule out any medical illnesses or conditions.

The Quiz

Put a check mark in the box next to each of the following statements that refer to you and how you have felt, at least part of the time, for the last two weeks.

- On many mornings I wake up too early and have trouble going back to sleep.
- I have lost interest in things that I used to enjoy.
- I find that I am avoiding people.
- Many times it is an effort to leave the house.
- I find that I am increasingly irritated, even angry, over trivial things.
- I am tired a lot of the time and lack energy to do things I need to do.
- I am gaining or losing weight (more than 10 lbs. in the last 6 months or less if you are a female or small male).
- I feel as if I have lost control of my life.
- Most days of the week I feel blue, sad, or unhappy part of each day.
- My sleeping patterns have changed.
- Sometimes I think that people would be better off if I weren't around.
- I don't have the appetite that I use to have.
- I just can't seem to get things done like I used to do.
- I don't feel as happy as I used to feel.
- I feel guilty much of the time over things that never used to bother me.
- I often feel that I am not much good to anyone, including myself.
- I feel worse in the morning than at other times of the day.
- I am not thinking as clearly as I used to and it is harder to concentrate.
- I feel that things always go wrong no matter what I do.
- I have been depressed in the past.

Now add up your check marks.

- ✓ 0-3: You are reading this book to help someone else, or to try to prevent a future episode of depression.
- ✓ 4-6: You may be on the borderline of depression. Keep reading, and start doing the action steps listed at the end of each chapter.
- ✓ 7-9: There is a good chance that you are depressed. Put into action the ideas discussed here. Consider getting a physical.
- ✓ 10-12: It's likely that depression has haunted you for some time. Change is not only possible but also likely, if you take action and follow through. Be sure to treat yourself with tenderness along the way. See your physician to determine if there are physical causes for the way you feel.
- ✓ 13-20: Unless other factors influenced your answers, you appear to be suffering from significant depression. Start working on the changes that are discussed

here. See a physician and/or psychotherapist to help guide you in addressing your melancholy (turn to chapter twenty-two for guidelines on selecting a therapist).

Remember that this quiz only determines *symptoms* of depression. If your score is medium to high (7 or more), I recommend that you take a more sophisticated test and/or see a physician or counselor to help determine if you really are depressed.

The Zung Scale is in Appendix A

You can use several inventories to help determine the existence and extent of your depression. These include the Beck Depression Inventory (1967), the Zung Self-Rating Depression Scale (1965), the Raskin Rating Scale for Depression (1970), and the Hamilton Rating Scale (1969).

Ultimately, you must be the judge. If you are not feeling your old self or doing the things you used to do, you may be struggling with depression. Or, at the very least, it is knocking at your door.

Is It Really Depression?

You don't have to call it depression, melancholia, or melancholy. (It is good to note that psychiatrists refer to melancholia as a specific type of atypical depression, a distinction beyond the scope of this book.) All three terms are used interchangeably in this book; *melancholic* refers to a person who suffers from depression. Name it the blues, if you prefer. Whatever the label, this malady is very different from the occasional low periods that people go through in the course of living. Psychiatrists use the term *major depression* to distinguish it from normal, passing sadness. Criteria for diagnosing major depression include the following nine symptoms:

- Low mood, sadness, and irritability for part of nearly every day
- Reduced pleasure or interest in daily activities
- Considerable weight loss or gain, or a change in appetite
- Significant change in sleeping patterns (most common is early waking)

- Marked increase or decrease in movement (usually a slowdown)
- Fatigue and loss of energy
- Feelings of worthlessness or guilt
- Difficulty concentrating
- Ideas about suicide or death

According to the American Psychiatric Association, a person who exhibits at least *five* of these symptoms for a minimum of two weeks, and has either low mood or reduced pleasure/interest for at least part of most days, suffers from major depression (APA 1994).

“Wait a minute,” you might say. “Checking items off a list can't tell the whole story of my unique experience.” You would be right—but these criteria serve as a good starting point for determining if depression exists. They signal a possible problem.

How Bad Is It?

Can you weigh the severity of your own depression? Yes, you can. The extent of a true depression is ranked as mild, moderate, or severe. You may find encouragement in learning that your condition is mild or moderate, but if your depression is severe, you need to know it so that you can get the help you need to pull out of it. By a vast majority, most individuals are only mildly depressed and will reap immense benefits by doing some of the exercises this book suggests.

The Different Levels of Depression

Mild

In mild depression, people may feel sad or blue. This feeling comes and goes; at times they may be quite cheerful. Possibly they lose interest in work or hobbies, suffer from insomnia, experience moderate but uncharacteristic fatigue or restlessness. The unwell feeling can improve temporarily (or permanently) with compliments and jokes, a new job, a vacation, or a piece of good news. Other symptoms of mild depression may get better with regular, strenuous exercise, a reevaluation of goals, changes in diet, and similar measures.

Moderate

The moderately depressed tend to feel more sad and low, more of the time. They are less responsive to attempts at offering cheer. The low mood usually is worse in the morning and may lighten somewhat as the day progresses. Many people who are moderately depressed pull away from friends and family, and their relationships may be troubled.

Severe

It seems as if those who struggle with severe depression live on a dismal and barren planet. They are apt to feel relentlessly hopeless and miserable. Their sadness is painful. They feel hopeless. Often they slow down to an extreme, can't think clearly, feel exhausted and passive. Their relationships and their normal functioning suffer greatly. Severe depression usually calls for therapy and medications.

No Single Cause

Let's not try to pinpoint the exact cause of a particular depression. It's not necessary. Probably it's impossible. There could be a genetic predisposition, previous occurrences of depression, worries or anger about social injustice, unrealistic expectations, distorted thinking styles, a troubled relationship, unhealthy diet or drug use, and many, many more causes.

Life is full of risk. When you apply for a job, you risk not getting it. When you bake a cake or paint a picture, you risk that others may not like it. When you love someone, you risk being rejected if your loved one leaves you or being left alone if your loved one dies.

It is not what happens to people that causes depression. Many get turned down for job after job without becoming depressed. Parents die, children get in trouble with the law, siblings commit suicide, spouses leave, houses burn down, businesses fail—and the wounded carry on. People have lost entire families in automobile accidents or natural disasters and yet, though their grief is unfathomable and will never leave them entirely, do not succumb to depression.

Why, then, do some people plummet into the depths of depression after a tirade from a stranger at an intersection? A perceived snub from a neighbor? A mixed performance review at work? It is completely normal to feel bad when bad things happen; getting depressed over them is a different matter entirely.

How we think about depression shapes how we will respond to it. First, it is a *disorder*, not a disease like cancer. There is no blood test for it, no way it will show up in a MRI (magnetic resonance imaging). In fact, it may be better to talk about depressions, plural, because no single cause or symptom defines it.

Indeed, if you had a chance to look at videotapes of counseling with melancholic people, you would see many shapes and colors of depression. For some, melancholia mainly

affects their personal relationships. Others experience dark emotions. Still others just stop doing what they used to do. Many people distort what is happening around them; they think about positive events as neutral, and neutral events as negative.

If you suffer from even mild depression, by now you have heard people urge you to cheer up. They may have told you that, if you only try hard enough or want to change badly enough, you will change. Don't listen to them! Let me go on record from the beginning: *the wish to change is not enough*. It's very important, to be sure, but you also need to develop a specific plan and take appropriate steps to overcome your depressive symptoms.

You already have the desire to change your depression. How do I know? You picked up this book. It's a good beginning. In these pages you will find methods, tips, and tricks that you can use to develop a plan to control your melancholy, to conquer the effects of depression, and to move forward into a satisfying and hope-filled life.

TAKE ACTION

Take the quick checklist included earlier in this chapter. It allows you to find out if you have the typical symptoms of depression. This checklist is a preliminary screening test only, but can give you an idea if depression is troubling you. If you haven't taken the quiz yet, why not do it now.

FOR THE FAMILY

- ✓ Take the depression quiz provided in this chapter—twice.
- ✓ The first time, take the quiz for yourself. It is good to know if you are beginning to slip into depression because living with someone who is melancholic makes you especially vulnerable.
- ✓ The second time, answer the questions as if you were the family member about whom you are concerned. Try your best to be that person for five or ten minutes. Doing so may help you to discern if depression is the real problem.
- ✓ Now spend some time in the family talking about the answers to your quizzes. Listen to how others think and feel. Begin talking about how the family can respond to the impact of the depression on the family.