

Depression -The individual battle



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I am depressed.’
Everyone in our generation has definitely said this. We have all experienced some version of it. Depression is a word that needs no introduction. It is estimated that around 280 million people in the world have depression and the number is only growing. Back in 2020, Dr Anurag Kumar’s suicide came as a shocker to many. He was psychiatry resident in the best medical college in the country. Still, tragedy struck. He lost his battle with depression. You could be a successful entrepreneur. You could be the topper of your class. You could be an actor, doctor, musician or anyone. Yet you could be suffering from depression.

What causes depression?

One of the first accepted theories of depression is believed to be due to a functional deficiency of the brain’s monoaminergic transmitters - norepinephrine, serotonin and dopamine. Another hypothesis for the pathophysiology of depression involves the inability of the central nervous system to make appropriate adaptive responses to stress or other aversive stimuli. Presently, there is no singular accepted theory for depression. ‘Monoaminergic systems are modulated by other factors, e.g., CRH, vasopressin, neuropeptide Y, cytokines, excitatory amino acids, or neurotrophic factors.

Moreover, chronic stress, which is doubtless an important precipitating factor in depression, has many effects, not only on behaviour, but also on the endocrine, immune, and neurotransmitter systems, and the data implicate a close link between stress and changes in the HPA axis and the central NE system. Accordingly, depression may result from dysfunctions in the areas of the brain that are modulated by these systems, such as the frontal cortex, hippocampus, amygdala, and basal ganglia.’[1]

How do we diagnose depression?

Some common symptoms include:

- Sleep disturbances
- Loss of interest in pleasurable activities
- Guilt or feelings of worthlessness

- Decreased energy
- Decreased concentration
- Loss of appetite/weight changes
- Psychomotor retardation or agitation
- Suicidal ideation

Experiencing ≥ 5 of the above 9 symptoms for ≥ 2 weeks is considered to be a major depressive disorder and needs medical attention.

More often than not, we confuse feeling sad with being depressed. The former is a reaction to the day-to-day stressors of life. While the latter needs to be identified and treated.

What can we do?

It is human nature to believe what we can see and to just ignore what is invisible. The barriers to seeking help arise from the various stigmas society has placed on mental

health issues or lack of resources. Some say you are just making excuses. Others say it is not real. Seeking therapy is as good as branding oneself as ‘mad’ in many people’s opinion. This stops one from asking for help. Depression can lead to suicide if not intervened in a timely manner. We can all do our bit to help. The most effective strategy against stigma would be to create awareness and educate people. Normalize it. Just like taking paracetamol for fever is the most logical thing to do, so is therapy for mental health issues.

If you know someone suffering from depression, be there for them – listen, encourage, talk, and help them reach out for help. The most difficult part is to ask for help when we need it. It takes as much courage, if not more to

seek help than to suffer in silence.

As health professionals, how do we approach a patient

with depression?

First and foremost, rule out any medical condition that could be the cause of depression like vitamin deficiencies, or thyroid abnormalities.

Find out about the history of previous depressive or manic

episodes. Starting a bipolar patient on anti-depressants could induce a manic episode.

Assess if the patient has suicidal ideations. Having a clear-cut plan to die carries a much higher risk of suicide. Such patients need to be hospitalized and closely monitored.

A stable patient can be managed with psychotherapy along with anti-depressants like SSRIs/SNRIs.

We live in an era where all of us have so much to deal with – high stake jobs, climate crisis, a pandemic, a possible recession and countless other personal problems. Depression need not be one of them. It is completely treatable. Reach out for the help you need and life can go back to being as colourful as it once was. We all need help at some point. After all, no man is an island.

Links to some online helplines:

1. Helplines | Live Love Laugh (thelivelovelaughfoundation.org)
2. National Suicide Prevention Lifeline at 800-273-8255

References:

1. Pathophysiology of depression and mechanisms of treatment - PMC (nih.gov)
2. First Aid 2022
3. <https://www.who.int/news-room/fact-sheets/detail/depression>