



Major Depression Frequently-Asked Questions

What is major depression?

Major depression is a serious illness. It affects 9.9 million American adults. Unlike normal feelings of sadness, loss, or passing moods, it lasts much longer. It can get in the way of your thinking and how you act. It can harm your health.

More than twice as many women as men suffer from major depression. It can occur at any age. All ethnic groups and both rich and poor can suffer from it. Many who have major depression once will encounter it again in their lives. Some may have several episodes in a year. If untreated, episodes can last anywhere from six months to a year. Left untreated, it can lead to suicide.

Major depression, also known as clinical depression or unipolar depression, is only one type of depression. Other depressive disorders include dysthymia (chronic, less severe depression) and bipolar depression (the depressed phase of bipolar disorder or manic depression). People who have bipolar disorder show signs of both depression and mania. Mania involves very high-up moods.

What are the signs of major depression?

At first major depression may not be obvious if it is mild. The signs of major depression mark a big change from how a person was before the illness. The signs of major depression include:

- Sadness that seems to not go away
- Major changes in sleep, appetite and energy
- Trouble thinking
- Agitation
- Lack of interest in activities you once enjoyed
- Feelings of guilt, hopelessness and emptiness
- Thoughts of death or suicide
- Symptoms that do not get well, such as headaches, stomach troubles and chronic pain

When to get a doctor's help?

When a few of these signs of major depression happen at once, last longer than two weeks and get in the way of regular life.

What are the causes of major depression?

There is no single cause of major depression. Psychological, biological and environmental factors may all add to it. Whatever the specific causes of major depression, research shows it is a brain disorder.

Chemical messengers that send signals between brain cells play a part in major depression. Scientists believe that major depression happens when these chemicals are out of balance. Antidepressant drugs work by putting these chemicals back at their right levels.

Scientists also think genes play a part. Depression may run in families. Major life events like the death of a loved one can cause episodes of depression.

How is major depression treated?

Major depression is treatable. People who suffer from it can return to regular activities and feelings. Many types of treatments are available. There are three basic types of treatment for major depression. They are: medications, psychotherapy and electroconvulsive therapy (ECT).

- **Medication.** The first antidepressant medications were introduced in the 1950s. Studies show that chemicals in the brain can be put at their right levels with antidepressants. Four groups of antidepressants are most common:
 - *Tricyclic antidepressants* (TCAs) – Still widely used for severe depression. TCAs raise the mood in depressed individuals. It can take up to three or four weeks to respond. These drugs include amitriptyline (Amitril, Elavil), desipramine (Norpramine), doxepine (Sinequan), imipramine (Antipress, Imavate, Tofranil), nortriptyline (Aventyl, Pamelor), and protriptyline (Vivactyl).
 - *Monoamine oxidase inhibitors* (MAOIs) – Often work with people who do not respond to other drugs or who have "atypical" depressions with being tense, sleeping too much and other issues. These drugs include phenelzine (Nardil) and tranylcypromine sulfate (Parnate).
 - *Selective serotonin reuptake inhibitors* (SSRIs) – Act specifically on the neurotransmitter serotonin. In general they cause fewer side effects than TCAs and MAOIs. They include fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), citalopram (Celexa) and escitalopram (Lexapro).
 - *Serotonin and norepinephrine reuptake inhibitors* (SNRIs) – Work well with people taking an antidepressant for the first time and with people who have not responded to other antidepressants. They often have fewer side effects than TCAs and MAOIs. They include Venlafaxine (Effexor).
 - *Bupropion* (Wellbutrin) – Newer drugs are classified as a dopamine reuptake blocking compound. It acts on the neurotransmitters dopamine and norepinephrine. In general bupropion causes fewer side effects occur than with TCAs and MAOIs.

Consumers and their families must be careful when treatment with drugs first starts. Normal energy levels often return before mood gets better. At this time the risk of suicide may increase for a while.

- **Psychotherapy.** There are several types of psychotherapy that have been shown to work for depression. Studies show that mild to moderate depression can often be treated with either of these treatments alone. However, serious depression appears more likely to respond to a combination of psychotherapy and medication.

- *Cognitive-behavioral therapy (CBT)* – Helps to change the negative thinking and behavior that come with major depression, while teaching people how to re-program the ways of acting that add to it.
- *Interpersonal therapy (IPT)* – About helping people relate to others.
- *Electroconvulsive therapy (ECT)* – Works in very serious depressive episodes. It is also used when other treatments do not work.

What are the side effects of drugs used to treat major depression?

All drugs have side effects. Different drugs cause side effects in different people. Half of the people who take depression medications have some side effects during the first weeks of treatment.

- *Tricyclic antidepressants (TCAs)* cause side effects that include dry mouth or constipation. It can also lead to bladder problems, sexual problems, blurred vision, dizziness, drowsiness, skin rash and weight gain or loss.
- *Monoamine oxidase inhibitors (MAOIs)* – People taking (MAOIs) may have to be careful about eating certain foods. Less serious side effects occur including gaining weight, dry mouth and dizziness.
- *SSRIs, and SNRIs* tend to have fewer and different side effects. They may be nausea, nervousness and trouble sleeping.
- *Bupropion* generally causes fewer common side effects. Its side effects include trouble sleeping and restlessness. Bupropion (Wellbutrin) was removed from the market for a while because some people had seizures. However that was in people who took very high doses. Lower doses are now used.

Reviewed by Ellen Frank, PhD May 2003

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