## UNDERSTANDING DEPRESSION AND TREATMENT

Paul A. Buongiorno, MD, DLFAPA

Depression is a serious disease that affects more than 16.1 million American adults, or about 6.7% of the U.S. population age 18 and older in a given year. Like so many other diseases, Depression can start in childhood and persist to old age. It is a disease that runs in families and affects how a person thinks and acts. It affects relationships as well as performance in work and school. Depression also affects other diseases that a person may have, prolonging recovery from those illnesses and often making the diseases more difficult to treat. The common outdated misconception that Depression is a disorder of will power, is incorrect.

Depression involves the chemicals in the brain and how they work. The symptoms of this disease are different from symptoms of sadness or grief resulting from a traumatic event. The warning signs and symptoms of Depression are: a loss of interest in activities that were once enjoyed, changes in appetite, trouble sleeping, loss of energy, feeling worthless, difficulty concentrating, feeling slowed down intellectually and thoughts of death or suicide. Importantly, these symptoms must be present daily for a minimum of 2 weeks. There are subtypes of depression including Postpartum depression (depression that occurs after the birth of a child), Psychotic depression (depression that occurs with symptoms that are out of touch with reality), Seasonal Affective Disorder (depression that occurs with the changes in seasons), and Bipolar Depression (depression that occurs with mood cycling). Recognizing these subtypes is important because they each require a unique type of treatment.

The good news is that Depression is a treatable disease. Despite being a serious disorder, treatment options can be very effective. Starting with a consultation with your provider when the diagnosis of Depression is made, treatments outlined below can be used alone, or in combination.

Treatment options include medications such as **antidepressants** that replace the chemicals in the brain that are deficient in depressed individuals. Antidepressants do not alter a person's personality, but help the brain's ability to make necessary chemicals to prevent depressive symptoms, and with the addition of medication, the brain can perform its necessary functions. Different types of medications work on different chemicals and have different side effects. Depending on the medication, an individual will start to feel better in the first 1-2 weeks, but often it can take as long as 6 weeks before a complete response may be felt. It is recommended that medications be continued for at least 6 months after symptoms have improved, and maintenance treatment may be necessary to prevent future episodes. Antidepressants are not addictive. A person cannot become dependent on them.

**Psychotherapy,** or talk therapy, is very effective in treating the symptoms of depression both alone and in combination with medications. **CBT** (Cognitive Behavioral Therapy) has shown to be particularly effective in treating depression. Psychotherapy may involve the individual but can also include couples and families. The length of therapy depends on the severity of the problems.

Other non-pharmacologic (non-medication) treatments such as **stimulation therapies** have shown to be effective in treating depression for individuals in whom medications and or therapy has been inadequate. Currently there are two types of stimulation therapy - **ECT** (electroconvulsive therapy) and **TMS** (transcranial magnetic stimulation). ECT is commonly reserved for individuals who have not responded to other treatments. It involves a brief electrical stimulation to the brain while the individual is under general anesthesia. Typically, treatments are done 2-3 times per week until the depression is gone and can be done inpatient or outpatient. Occasionally, maintenance ECT (1 treatment per month) may be necessary to keep the depression in remission. TMS is an outpatient procedure involving the use of a strong magnet placed on the left side of the head that sends magnetic pulses to the area of the brain causing depression. Unlike ECT, TMS does not require anesthesia. Treatments last between 20 and 40 minutes and can take 20-30 treatments to relieve the depressive symptoms. Other novel treatment approaches on the horizon are **tDCS** (transcranial direct current stimulation) and **DBS** (deep brain stimulation) which will allow more options for treating this devastating disease.

Finally **self-help** groups can be an important educational resource and support for individuals that may feel they are alone. Individuals, families, and friends can reach out to local and national organizations such as NAMI (National Alliance for the Mentally III) that provide resources and excellent support groups.

Depression can be a devastating disease however, with proper diagnosis and treatment, a person can overcome it. The first step is to see your provider and talk about your concerns.

Paul Antony Buongiorno, MD chose Georgetown University in Washington, DC for medical school, internship and a residency in Psychiatry. He specializes in adult and geriatric psychiatry at Paul A. Buongiorno, MD.