



ARNIE BAKER CYCLING

# Major Medical Depression

The following is information about the medical illness *depression*. Depression is an illness affecting the mind and body, causing a person to feel miserable in many ways.

Most people think that the most common symptom of depression is sadness. Although sadness may be present, the most common symptom is *fatigue*.



MEDICAL  
HANDOUT

## What Causes Depression?

There are several types of depression. Sometimes we feel low when things in our lives are going poorly. Or when we suffer a loss—when we or someone we know is sick, or our job or significant relationships are not going well.

*Medical depression* relates to a chemical abnormality in the nerve tissues in the brain. Sometimes a person has reason to be depressed, but is more depressed than might be expected or more than might be considered “normal.” More frequently, there is no apparent reason for the depression and a person becomes depressed anyway. This may be *medical depression*.

## Is Depression Common?

Yes. It is one of the most common illnesses in medicine. Not necessarily one often talked about. With colds and the flu, depression probably accounts for more visits to the doctor than all other illnesses. It is often confused with other illnesses.

Many people with depression are often told they have “low blood,” vitamin deficiency, chronic viral infection, sinus headaches, low sugar, or hypoglycemia. They may be told that they have menopause symptoms, “need a vacation,” “are burnt out,” or need more exercise. Sometimes they are told “it’s all in your head.”

Frequently such people have a depression causing their trouble.

Depression may co-exist with other problems, such as other medical illnesses, alcoholism, or drug abuse. It is associated with chronic fatigue syndrome and fibromyalgia.

If other problems exist, those problems, *as well as the depression*, must also be treated.

## How Does a Person Feel?

A person with depression will usually feel many of the following:

1. **Tired.** Fatigue even without exertion, or working too hard. Resting on the weekend does not seem to help, or help enough.
2. **Sleep disorders.** Either waking up too early in the morning, and not being able to get back to sleep; interrupted sleep patterns; or wanting to sleep all the time, even during the day.
3. **Sex drive decreased.** Depressed persons usually don’t feel like making love with their usual partners.
4. **Irritable.** And upset over things usually not otherwise upsetting.
5. **Sad.** Often without apparent reason. May be tearful without knowing why.
6. **Pains.** Most commonly a headache, not necessarily severe, but often a band-around-the-head type of feeling, or neck pain. Or chronic back pains, or abdominal (belly) pains. Or almost anywhere else. The pains are *real*, often severe; they are not imagined.
7. **Enjoyment gone.** Difficult to have a good time. Little enthusiasm, even for things that one used to look forward to. May be the worst when one has a day off, and with leisure time.
8. **Bowels not right.** Often constipation, sometimes diarrhea, gas, or bloating. May gain or lose weight.
9. **Concentration.** Difficult to make decisions, or study, feeling of fuzzy thinking.
10. **Worthless feelings.** May feel guilty, unwanted, sinful; worst of all, sometimes feeling like life is not worth living at all.
11. **Appetite change.** Either not feeling like eating, or overeating.

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ABC Handout #904

Adapted and modified from material by Joseph. H. Talley, MD.

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### **Is Depression Serious?**

Sometimes. In a mild depression a person may just think they have “winter blahs” or “are getting older.” But this *disease can cause very healthy and generally happy persons to kill themselves.*

### **Can a Person Do Anything to Fight this Disease without a Doctor?**

Sometimes.

With a mild depression, emotional support from friends and family may help. Professional counseling can also help resolve conflicts or other personal issues.

Exercise or other activities may improve some of the symptoms.

Serious medical depression can get better by itself, but this may take a year or longer. And it may come back.

Generally, a person has relatively little control over serious medical depression.

### **What is the Role of Alcohol?**

Alcohol is both a cause and a symptom.

Alcohol consumption, even in small quantities, is one of the most common factors associated with depression.

Those depressed often turn to alcohol. This worsens depression.

Those with depression should *stop alcohol completely.*

### **Is There Effective Treatment?**

Absolutely. There are medications that are usually very effective in depression. These medicines return the chemical abnormalities in the brain back to normal. They are very safe when compared to many medicines. Serious side effects are very rare.

Whereas a few years ago medicines were used only to treat serious medical depression, we now know that they can also be effective in milder depression.

### **Are These Medicines Addicting?**

No. Absolutely not. A person cannot become addicted even if they are used for years.

### **Are These Tranquilizers, Sleeping, Pain, Hormone, or Sex Pills?**

No. None of these. They are called antidepressants.

### **Are There Side Effects?**

Rarely are there serious side effects.

There are some annoyances. Newer anti-depressant medications may interact with caffeine or decongestants causing increased anxiety or jitteriness. (Avoid or reduce caffeine and decongestant use.). They may also cause sexual side effects such as delayed orgasm.

Older medications may cause increased drowsiness or dry mouth.

Sometimes there are other minor problems.

Most problems are avoided with proper doses.

And most people feel so much better taking antidepressants that they don't mind the relatively minor problems.

### **Are These Pills Uppers or Pep Pills?**

No. Pep pills or amphetamines will give almost everyone a boost of energy or anxiety. Such pills are dangerous and rarely used.

Antidepressants work in people with depression. They are among the safest of medicines.

### **How Long Does a Person Take this Medicine?**

Usually at least several months.

Most people with depression feel so much better with these medicines they do not mind taking them for long periods. Since they feel so much better, some people are reluctant to stop.

Many people will continue to function better with them than without them.

They can be taken as long as they are needed, even a lifetime.

### **Can Depression Occur Without Anything in One's Life Causing It?**

Often this is true.

Sometimes something in one's personal life can cause depression to get much worse and be noticed as a problem.

Or, if there are personal difficulties, for example in one's marriage or job, and then someone gets a depression, then the problems at work or at home may get much worse.

But depression often occurs without any discernable provocative cause.

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### **Is Depression “Catching”?**

Not exactly. It is so common that it may almost seem so.

When one person in a family is depressed, as when there is any medical illness in the family, other family members usually are concerned and sometimes sad. This may add to stress.

One of the most common reasons children are depressed is that their parents are also depressed.

### **Should I Tell Other People About This?**

People with depression often find that their spouse or loved ones are very much affected by their illness.

Other people are aware of your depression before you are. Or others may recognize that something is amiss, but not know what is wrong.

Sometimes your spouse may think that you don't love them because you are not happy. Sometimes your spouse may feel it's their fault.

Sharing this information may help your family understand that neither you nor they may be responsible for the way that you feel.

### **When Will I Be Better?**

Antidepressant medications usually take at least two weeks to start working. They may take 4 to 6 weeks to work. Maximum effectiveness may not be reached for months.

If antidepressant medicines do not work, the most common reason usually turns out to be that the patient has not taken them. Antidepressants need to be taken regularly, not just on days when you feel like them.

Most antidepressants help about 60% of people. If one does not work, it is worth trying a second or third medicine, because a second or third medicine increases effectiveness rates.

Typically others will notice improvement before you do. Typically your behavior will improve before your feelings do.

### **Stopping Antidepressant Medicine**

When you do feel better, it's common to forget how badly you previously felt. It is common to forget the role medication played in your improvement.

When, under medical advice, you do stop medication, let a few others around you know. Ask these family or friends to let you know if you seem to be slowing down or getting depressed again—so that you can get better more quickly by going back on medication and not waiting so long next time. **AB**