

Phillip Gold On Camera Introduction

Depression is a serious illness. However, only a third of people suffering with it seek treatment. Hello, I'm Dr. Philip Gold, Senior Researcher at the National Institute of Mental Health. Today research and public awareness are chipping away at its stigma. Effective treatments are available, in fact, up to 80 percent of people with depression can be successfully treated and go on to lead fulfilling lives. It's important to understand this condition because as many as one in five with untreated depression commit suicide. This program, Depression: Treatments that Work explains how depression affects the brain and how anti-depressant medications work providing hope to millions of people.

Narrator

Former magazine executive Ellen Whitmore has suffered with depression for most of her adult life.

Ellen Whitmore, Depression Patient

"It's kind of like you're stuck in this black tunnel. Everything looks dark around you and there's no way out of it and you're filled with such gloom and sadness."

Narrator

Ellen's depression didn't relent even after she had sought medical help and began taking medication. Finally the darkness and sadness that tormented Ellen became intolerable after the death of her father.

Ellen Whitmore, Depression Patient

"I just was in so much pain. I felt I'm never going to get better. This depression is always going to be here and I swallowed sixty valium."

Narrator

Fortunately, her attempt at ending her life wasn't successful. But for so many others death by their own hand appears to be the only escape from a life filled with darkness and despair.

Tom Insel, MD, Director, National Institute of Mental Health

"Sometimes people say that I feel that I'm dead inside. And that's very much at the core of what we mean by major depressive disorder."

Narrator

Dr. Thomas Insel is the Director of the National Institute of Mental Health.

Tom Insel, MD, Director, National Institute of Mental Health

"The disorder that's probably the largest source of disability for Americans between the ages of 15 and 44."

Narrator

Clinical depression is a long-lasting biologically based brain disorder. Dr. Susan Blumenthal is a clinical professor of Psychiatry at Georgetown University School of Medicine.

Susan J. Blumenthal, MD, Georgetown University School of Medicine

"We all get blue after a loss or with a medical illness. That's normal. But if the symptoms persist, symptoms like sadness, inability to concentrate, losing interest in usual activities that gave you pleasure, social withdrawal, having trouble sleeping. If they persist and cluster these symptoms for more than two weeks then that signals that clinical depression may be there "

Narrator

Again, those symptoms are:

- Depressed mood (in children or adolescents, can be irritability).

- Loss of interest or pleasure in most activities

- Combined with:

 - Unintended weight loss or gain

 - (greater than 5% body weight in one month)

 - Insomnia or excessive sleepiness

 - Fatigue or loss of energy

 - Feelings of worthlessness or excessive guilt

 - Indecisiveness, inability to think or concentrate

 - Recurrent thoughts of death or suicidal ideation

Narrator

And the type of depression can vary along with the severity. Dr. Murali Doraiswamy, is Chief of the Division of Biological Psychiatry, at Duke University Medical Center.

P. Murali Doraiswamy, MD, Duke University Medical Center

"Major depression itself can be subdivided into mild, moderate and severe. And there are other forms of depression such as manic depression and there is also a form of depression called minor depression where you can have only 2 or 3 of these symptoms, but symptoms have been present for at least 2 months or longer."

Narrator

48-year-old Danny Hershey experienced his first major depressive episode in his early thirties, after being rehabilitated for a gambling addiction.

Danny Hershey, Depression Patient

"Couldn't sleep. Couldn't eat. Couldn't think. The things we take for granted every single day, I couldn't do any of those things."

Narrator

While it can be obvious in some, depression may be difficult to spot in others. It can be hidden or disguised, by seemingly paradoxical behaviors. These include:

- Agitation
- Anger
- Overeating
- Excessive sex drive
- Alcohol or drug abuse
- Forced Smiling
- Chronic physical pains without apparent cause or
- Anxiety

Narrator

According to experts, in any given year, between 13 million and 14 million people will experience a depressive episode. Of those, only about 20% receive adequate treatment.

P. Murali Doraiswamy, MD, Duke University Medical Center

“Depression actually affects more people in the U.S. than coronary artery disease, cancer or AIDS put together. And when you compare it to all 3 of these diseases, it’s the easiest to diagnose and the easiest to treat.”

Narrator

Suffering with depression not only has a negative effect on the person’s health and well being, but also approximately 97% of those reporting depression said that their work, home life and relationships suffered as a result.

Ellen Whitmore, Depression Patient

“I had a very good job. I was a research manager for Women’s Day magazine and at the time making good money. But what I did is I quit and I just said then you know, I’m going to be trying something else. I was too embarrassed to tell my boss what I had.”

Narrator

Depression after a pregnancy contributes to the higher rate of the condition in women. Approximately 80% of women will have what is known as “the baby blues” right after the birth of the baby. For the vast majority of women, those blues tend to go away after a few weeks. But in about 10% of the cases, women develop a much more serious condition called postpartum depression in the months following the birth of a child.

Susan J. Blumenthal, MD

“In postpartum depression the symptoms of depression: that sad mood, the trouble sleeping, loss of appetite, loss of pleasure will persist for a much longer period of time. And it’s very important to seek medical help. Now a very small percentage of women, say 1%, might have such severe symptoms that she thinks about doing harm to

herself or to her baby and again this is a life-threatening emergency for which you must get medical help.”

Narrator

Depression also occurs in about 15% of those over age 65. Unfortunately only about 10% of the elderly experiencing depression seeks professional help.

P. Murali Doraiswamy, MD, Duke University Medical Center

“Aging is not a risk factor for depression per se, but there are many things associated with aging such as grief. Older people tend to have more losses, such as loss of a loved one, loss of a job, not knowing what to do all of a sudden when they retire.”

Narrator

Undiagnosed and untreated depression can have a profound impact on every organ in the body.

Tom Insel, MD, Director, National Institute of Mental Health

“This is an illness. It is a total body illness. It involves the heart, it involves the immune system, it even involves the bones. People who have heart disease or people who have diabetes or have other chronic medical illnesses are at greater risk for depression.”

P. Murali Doraiswamy, MD, Duke University Medical Center

“Cardiologists are fully aware of the interactions between heart disease and depression. Over the last 4 or 5 years now they are recognizing that giving a simple depression screening test may be as important a risk factor as say measuring your cholesterol level or measuring your blood pressure.”

Narrator

Although women experience depression at double the rate of men, men are three times as likely to commit suicide.

Danny Hershey, Depression Patient

“I had the 3rd and the most serious depressive episode in my mental illness history in July and it culminated in September with me taking an overdose of a prescribed sleeping pill. And I went to sleep one night and the next thing I knew I woke I was in the emergency room of the hospital.”

Narrator

One in seven men will develop depression within 6 months of becoming unemployed and retired men are also at an increased risk for depression

Suicide is most common among men who are separated, widowed, or divorced. Older, single men who are medically ill with a condition that causes chronic pain are especially at risk.

P. Murali Doraiswamy, MD, Duke University Medical Center

“There are statistics that show that nearly 20% of all suicide victims saw a physician within the last 24 hours especially in the older population. And about 40% of them I think saw a physician within the last 1 week.”

Narrator

In order to recognize and begin targeted treatment, it is important to understand the basis of depression in the brain.

P. Murali Doraiswamy, MD, Duke University Medical Center

“The belief is that depression has strong chemical origins just like diabetes is caused by an insulin deficiency.”

Narrator

There are two main chemicals in the brain called neurotransmitters that are thought to play a role in mood regulation: norepinephrine and serotonin.

3-D Animation

Narrator

Researchers believe that a deficiency or poor regulation of serotonin may cause the sleep problems, irritability, and anxiety associated with depression. And decreased amounts or function of norepinephrine, which regulates alertness and arousal, may contribute to the fatigue and depressed mood of the illness.

Medications that raise the levels of these two brain chemicals, or increase the efficiency of their use closer to those found in non-depressed individuals, have been helpful in treating patients diagnosed with depression.

Narrator Tease One

Next we'll talk about manic depression, also known as bipolar disorder.

Narrator

For most of her life, Melissa has been battling the extreme mood swings brought on by her bipolar illness. She's found that her artwork helps her better cope with the disorder.

Melissa, Patient

“The fact that there is no bandage on my arm or that there's no outward physical appearance that people can see that there's something broken, there's something wrong, it makes it very difficult for people to understand that this is an ongoing battle for me.”

Natural Sound

You keep me from depression baby!

Narrator

50-year-old Charles Rogers has been struggling with bipolar disorder for as long as he can remember.

Charles Rogers, Patient

"It's like a movie projector. The movie is over when everybody goes home, but in my brain the flick keeps going on and on and on."

Narrator

Bipolar disorder is a condition characterized by mood swings going from extreme lows, deep depression and suicidal thoughts to extreme highs called mania that can include substance abuse and sometimes, psychotic behavior

In the past, the lack of clear diagnostic criteria is one of the factors that have led to the lack of recognizing depression and bipolar disorder.

P. Murali Doraiswamy, MD, Duke University Medical Center

"Sometimes bipolar depression is not screened for very properly in primary care practice because many doctors are not trained in assessing for bipolar disorder."

Narrator

Just as depression can be masked by physical symptoms, there are certain forms of depression that can be the result of a specific medical condition.

P. Murali Doraiswamy, MD, Duke University Medical Center

"In some cases depression may be a manifestation not just of your life stresses or of negative events in your life, but it can be due to small blockages in certain blood vessels in the brain. And this is a new form of depression that we are sort of relatively learned about over the last say decade or so and it's called vascular depression. That is depression caused by cardiovascular disease, diabetes, and small mini strokes that happen in the brain."

Narrator

These strokes do not happen in the part of the brain that affects your arm use, speech, or ability to walk.

P. Murali Doraiswamy, MD, Duke University Medical Center

"So you're not even aware that you had these mini strokes in the brain other than the fact that it's slowing you down a little bit. It's making you a little bit sadder and a little tearful and perhaps it's making you slower in terms of concentration and your memory tasks."

Narrator

Knowing if a person's depression is caused by these strokes is crucial so the proper treatment can be prescribed. Anti-depressants wouldn't be effective. Rather cardiovascular medicines—blood pressure and cholesterol medicines for example, would be appropriate.

P. Murali Doraiswamy, MD, Duke University Medical Center

"The way you would diagnose one of these cases is you would get an MRI scan of the brain and you would look for small strokes in certain key areas of the brain that regulate your emotions and your mood. And if you have that, and then you would also order what we call memory testing because many of these individuals have specific cognitive deficits."

Narrator

In addition to the healthcare provider performing a thorough history and physical exam to look for evidence of depression, a person who is a caregiver or a loved one can also be clued into the symptoms of depression.

Danny Hershey's mother Barbara is keenly aware of the signs to watch for her son.

Barbara Virue, Patient's Mother

"We went out to dinner and I noticed that he was very quiet, and he's quiet anyway, but he was very quiet. And I didn't like the way he was acting and it was getting worse and worse so I took him to the doctor."

Narrator

Barbara noticed her son was physically deteriorating right before her eyes.

Barbara Virue, Patient's Mother

"He couldn't eat. He couldn't sleep. He couldn't work. He lost 30 pounds. He was a basket case."

Narrator Tease 2

Coming up we'll take a look at the treatments that are giving patients with depression their lives back.

BREAK #2

Narrator

The stigma surrounding depression and other mental illnesses can lead to delays in receiving the proper diagnosis. Many people with undiagnosed depression look for relief outside of the medical community.

Danny Hershey, Patient

"I think when I started gambling at age 15 that was a medication for what was probably depression."

Narrator

And the refusal to admit that anything is wrong is another serious problem for people, especially men who are depressed.

Barbara Virue, Patient's Mother

"Some people are in denial, which is the worst thing. They pretend they don't have something. I had a physical illness that I was in denial about for a long time. I said "Oh, it'll go away." It didn't go away. I had to take care of it and this is the same thing. It's not going to go away.

You need to go to a doctor. You need to get on the right medication. You need to get into therapy whether it's a group or one on one."

Narrator

Since depressive disorders vary among individuals, successful treatment may involve a multifaceted approach.

Tom Insel, MD, Director, National Institute of Mental Health

"Structured psychotherapies, cognitive behavior therapy, another one called interpersonal therapy, those really do seem to be very helpful and they're helpful for a large number of people in something like ten to twelve weeks. Medication is also a really important aspect of the treatment of major depressive disorder. Sometimes in those people who don't respond to psychotherapy, cognitive behavioral therapy or in more severe forms of depression, this is the first line of treatment."

Narrator

There are a variety of treatments available for people with depression. Finding the best treatment or treatment combination for the individual depends on the type and severity of the depression.

Current treatment options include: psychotherapy, medication (antidepressants) and for more severe and non-responsive cases of depression: electroconvulsive therapy (ECT) and other brain stimulation techniques: transcranial magnetic stimulation (TMS) Vagus nerve stimulation and deep brain stimulation, which are usually reserved for the most severe and non-responsive cases.

When looking for medications, it is important to properly diagnose the type of depression. This is especially critical for people with bipolar disorder.

P. Murali Doraiswamy, MD, Duke University Medical Center

"In those types of patients there's a different class of medication that's used to treat these patients called mood stabilizers. So it's very important to start someone with bipolar depression on a mood stabilizer first and then consider adding an

antidepressant. If you don't do that you run the risk of switching them from an extreme low to an extreme high, a state we call as mania."

Narrator

For many one of the most frustrating aspects is dealing with treatment resistant depression.

Tom Insel, MD , Director, National Institute of Mental Health

"Treatment resistant depression is a subtype of depression that doesn't respond in the usual way to either medication or psychotherapy."

Narrator

The results of a landmark depression study by the National Institutes of Health revealed that patients became symptom-free with either an additional medication or by switching to a different antidepressant.

Tom Insel, MD , Director, National Institute of Mental Health

"Half of the people who come in with what appears to be treatment resistant depression or major depressive disorder will ultimately be in remission that is they will be well, not just better, but well with one of these treatments. Is there one second treatment which is considerably better than all the others? Not apparently. When you look at the entire group it looks like all of these treatments are worthwhile, they're effective and they're effective in about half the people who are treated."

Narrator

Other issues that need to be addressed with the use of medication include compliance and side effects. And while most medications have some side effects these can often be minimized with dosage adjustments or a change to a different medication.

Charles Rogers, Patient

"The only way you can ever correct side effects of medication if you open up and tell the doctor what is going on. Check with them. Ask them how long do they feel it should take before the medicine kicks in."

Narrator

While medication may be needed in many cases, psychotherapy and social support can also be very effective treatment.

Susan Blumenthal, MD

"Generally people start with cognitive behavioral therapy for a mild to moderate depression: working on the negative thoughts that occur with depression.

Narrator

Research has concluded that medication in combination with psychotherapy is the most effective treatment for depression.

Ellen Whitmore, Depression Patient

“Try to find the right doctor. Someone you’re comfortable with. Someone you trust. You tell the doctor when the medication isn’t working. You have to be assertive. Go to therapy and definitely go to support groups.”

Narrator

Also, exercise. New research compared patients with mild to moderate depression who were taking anti-depressants with other patients who exercised intensely enough to bring their heart rate to a certain level three times a week. Patients should consult with their doctors to determine the proper heart rate level. Early results indicate the exercise was as beneficial as the medications in treating the mild to moderate depression symptoms.

Narrator Tease Three

Still ahead we’ll see how peer group counseling can be helpful.

BREAK #3

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Charles Rogers, Patient

“Groups are there because you’re not alone.”

Narrator

Peer group support can be an effective tool in the management of their depression. The Depression and Bipolar Support Alliance is a national organization that provides peer support groups and works to raise public awareness of the disorders.

Barbara Virue, Patient’s Mother

“I think groups like this are wonderful. I think they’re great for the person with the illness and for the people who are involved with them.”

Narrator

Peer group support enables the people with depression and bipolar disorder to relate to each other at a level not possible in interactions with the community at large. Members of the group understand all too well the pain and despair that can be associated with depression

Danny Hershey, Patient

“The chemicals in the brain just stop working and everybody at the support group knows what that’s like.

Narrator

The future shows promise as more effective treatments are developed and the stigma surrounding mental illness continues to wane. Because of ongoing research, people with depression can be assured that there is help and hope for them.

Danny Hershey, Patient

"My business has come back strong. I average about 30 tutoring appointments a week, again that's how I make my living and fortunately, my brain's working again."

Charles Rogers, Patient

"Depression cannot hit a moving target. I have a goal that I strive for and I go for it. So as long as I'm moving it's behind me.

Melissa, Patient

"I look forward to improving in my health, feeling better and better. I like being happy. I like smiling, I like having fun, so I look forward to being able to do that more and more."

Credits

This program was reviewed by:

Bruce B. Dan, MD
Managing Editor
The Patient Channel

Matthew Rudorfer, MD
Acting Chief, Adult Treatment Intervention Branch
National Institute of Mental Health

For More Information on Depression or any other Mental Illness contact:
The National Institute of Mental Health @ nimhinfo@nih.gov or call
1-866-615-6464 (toll-free) 1-866-415-8051 (TTY toll-free)

Or write:
National Institute of Mental Health (NIMH)
Public Information and Communications Branch
6001 Executive Boulevard Room 8184, MSC 9663
Bethesda, MD 20892-9663

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