How To Help Yourself
If You Are Depressed

Depressive disorders make one feel exhausted, worthless, helpless, and hopeless. Such negative thoughts and feelings make some people feel like giving up. It is important to realize that these negative views are part of the depression and typically do not accurately reflect the actual circumstances. Negative thinking fades as treatment begins to take effect.

In the meantime:

• Set realistic goals in light of the depression and assume a reasonable amount of responsibility.
• Break large tasks into small ones. Set some priorities, and do what you can as you can.
• Try to be with other people and to confide in someone; it is usually better than being alone and secretive.
• Participate in activities that may make you feel better.
• Mild exercise, going to a movie or ballgame, or participating in spiritual, social, or other activities may help.
• Expect your mood to improve gradually, not immediately. Feeling better takes time.
• It is advisable to postpone important decisions until the depression has lifted. Before deciding to make a significant transitions: change jobs, get married or divorced etc., discuss it with others who know you well and have a more objective view of your situation.
• People rarely "snap out of" a depression. But they can feel a little better day-by-day.
• Remember, positive thinking will replace the negative thinking that is part of the depression and will disappear as your depression responds to treatment.
• Let your family and friends help you.

IUPUI Counseling and Psychological Services (CAPS)
Walker Plaza, Suite 220
719 Indiana Avenue
Indianapolis, Indiana 46202
(317) 274-2548
capsindy@iupui.edu
http://caps.iupui.edu/

Find us on Facebook by searching for "IUPUI CAPS." Learn about our latest events, articles of interest, and other links.

Monday – Friday 9:00am – 4:00pm
Evenings by appointment only

IUPUI - CAPS
Promoting psychological health, well-being, and success for all students.

Empowering student learning, inclusion and success through engagement.
Clinical Depression or Depressive Disorder

In any given 1-year period, 9.5 percent of the population, or about 18.8 million American Adults, suffer from a depressive illness. The economic cost for this disorder is high, but the cost in human suffering cannot be estimated. Depressive illnesses often interfere with normal functioning and cause pain and suffering not only to those who have the disorder, but also to those who care about them. Serious depression can destroy family life as well as the life of the ill person. Most people with a depressive illness do not seek treatment, though the great majority, even those whose depression is extremely severe, can be helped. Thanks to years of fruitful research, there are now medications and psychosocial therapies that ease the pain of depression.

What Is A Depressive Disorder?

A depressive disorder is an illness that involves the body, emotions, and thoughts. It affects the way a person eats and sleeps, the way one feels about oneself, and the way one thinks about things. A depressive disorder is not the same as a passing blue mood. It is not a sign of personal weakness or a condition that can be willed or wished away. People with a depressive illness cannot merely "pull themselves together" and get better. Without treatment, symptoms can last for weeks, months, or years. Appropriate treatment, however, can help most people who suffer from depression.

Types of Depression

**Major depression** is manifested by a combination of symptoms (see symptom list) that interfere with the ability to work, study, sleep, eat, and enjoy once pleasurable activities. Such a disabling episode of depression may occur only once but more commonly occurs several times in a lifetime.

A less severe type of depression, **Dysthymia**, involves long-term, chronic symptoms that do not disable, but keep one from functioning well or from feeling good. Many people with Dysthymia also experience major depressive episodes at some time in their lives.

Another type of depression is **Bipolar Disorder**, also called manic-depressive illness. Not nearly as prevalent as other forms of depressive disorders, bipolar disorder is characterized by cycling mood changes: severe highs (mania) and lows (depression). Sometimes the mood switches are dramatic and rapid, but most often they are gradual. When in the depressed cycle, an individual can have any or all of the symptoms of a depressive disorder. When in the manic cycle, the individual may be overactive, over-talkative, and have a great deal of energy. Mania often affects thinking, judgment, and social behavior in ways that cause serious problems and embarrassment. A less extreme form of Bipolar Disorder is call **Cyclothymia**.

Diagnostic Evaluation and Treatment

A good diagnostic evaluation will include a complete history of symptoms; treatment choice will depend on the outcome of the evaluation. There are a variety of antidepressant medications and psychotherapies that can be used to treat depressive disorders. Some people with milder forms may do well with psychotherapy alone. People with moderate to severe depression most often benefit from antidepressants. Most do best with combined treatment: medication to gain relatively quick symptom relief and psychotherapy to learn more effective ways to deal with life's challenges.

Symptoms of Depression and Mania

Not everyone who has depression or bipolar disorder experiences every symptom of depression or mania. Some people experience a few symptoms, some many. Severity of symptoms varies with individuals and also varies over time.

**Depression**
- Persistent sad, anxious, or "empty" mood
- Feelings of hopelessness, pessimism
- Feelings of guilt, worthlessness, helplessness
- Loss of interest or pleasure in hobbies and activities that were once enjoyed, including sex
- Decreased energy, fatigue, being "slowed down"
- Difficulty concentrating, remembering, making decisions
- Insomnia, early-morning awakening, or oversleeping
- Appetite and/or weight loss or overeating and weight gain
- Thoughts of death or suicide; suicide attempts
- Restlessness, irritability
- Persistent physical symptoms that do not respond to treatment, such as headaches, digestive disorders, and chronic pain

**Mania**
- Abnormal or excessive elation
- Unusual irritability
- Decreased need for sleep
- Grandiose notions
- Increased talking
- Racing thoughts
- Increased sexual desire
- Markedly increased energy
- Poor judgment
- Inappropriate social behavior