

MENTAL HEALTH AND WELL-BEING SERIES

Depression

Paul E. Norrod, DrPH RN and Laura Weddle, MBA*Family and Consumer Sciences Extension*

Depression is a set of symptoms used to describe conditions often associated with feeling sad. However, depression is more than just sadness, and its symptoms are common. From 2013 to 2016, more than 8% of people in the U.S. reported experiencing depressive symptoms. Since 2016, self-reported symptoms of depression have nearly tripled. Here in Kentucky, 36% of people reported experiencing symptoms of anxiety and depression. Overall, 746,000 Kentuckians have a mental health condition, and as of 2022, 40,000 youths were diagnosed with depression. The prevalence of Kentuckians who experience anxiety or depressive symptoms is 5% higher than in the rest of the nation. That statistic shows the importance of understanding the symptoms and risk for depression so we can help our community members.

Symptoms and risk for depression

Depression is characterized as a mood disorder because its symptoms generally affect one's mood. There are several different types of depressive conditions including major depressive disorder, dysthymic disorder (less severe, but more long-term depression), psychosis (perceiving reality differently than others) depression, postpartum (after child delivery) depression, and seasonal affective disorder (SAD). The symptoms of depression vary and can include excessive sadness for a period of weeks, feelings of worthlessness, loss of appetite or overeating, excessive sleepiness, or not sleeping at all. Other symptoms associated with depression



can include fatigue, irritability, problems focusing, and difficulty recalling details about events. Serious symptoms of depression include thoughts of death and suicide that are not merely a fear of dying. Loss of interest in normally enjoyable activities is also a symptom of depression in adults and children.

The symptoms of depression in children are similar to what adults experience, however, there are slight differences in symptoms in children. Children may struggle with their attention span, have problems with school assignments, or show

changes in sleeping and eating habits. Also, children may be irritable as an expression of sadness and look for attention by acting out. They may not enjoy fun activities with family or friends like going to the park or coloring. It is important to watch for self-injurious behavior in children, such as cutting, as a sign of depression. Self-injurious behaviors can also be a sign children are struggling with suicidal thoughts. Adults should look for suicide cues in children because suicide is the second leading cause of death for people ages 10 to 34.

Risk factors

Depression does not result from any one specific problem but can come from a variety of predisposing factors including genetic, personal, family, socioeconomic, and environmental factors. Some of the most common risk factors include chronic (excessive) stress, alcohol and substance misuse, smoking, obesity, and having one or more chronic health conditions.

In some cases, people who live with depression may experience other mental health challenges

such as anxiety or substance use disorder. You should contact your health care provider or tell a friend or family member if you begin experiencing problems in addition to your depression. It is also important to note that using alcohol, unprescribed medications, or illicit substances can worsen depression. If you have a chronic illness such as diabetes, heart disease, or chronic obstructive pulmonary disease (COPD), you are at higher risk for developing depression because of the chronic illness. In some cases, depressive symptoms may cause you to struggle. So, it is important to take your regular medications and talk with your doctor if you are struggling.

Managing depression

If you or someone you know is experiencing depressive symptoms or worsening depression, it is vital to seek professional help. One reason to seek professional help is that many different health problems can lead to depression. Some examples of health problems that cause depressive symptoms can include thyroid disorder or medication interaction.

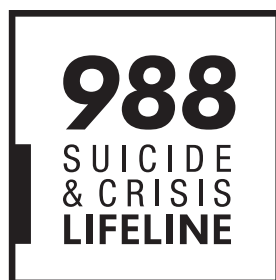


If you experience depressive symptoms or your condition worsens, it is important to call your primary care provider and schedule an appointment.

If you experience depressive symptoms or your condition worsens, it is important to call your primary care provider and schedule an appointment. After consulting a professional, there are several steps you can take to minimize your symptoms. These steps include starting a regular sleep schedule, avoiding fast foods, eating fruits and vegetables, taking medications as prescribed, and increasing sun exposure on warmer days. You might discuss light therapy with your provider, which involves using a specially designed light to provide you with the UV light you generally get during the summer.

Other ways to manage your depressive symptoms can include mindfulness practices, making a list of things you are grateful for, and using coping skills to help reduce your stress and improve your mood. Some simple coping skills can include physical activity like taking a walk, spending time outdoors, sewing, drawing, painting, or spending time with family or friends. Seeking social support is also an important part of managing depression. It can help increase oxytocin and dopamine, which are “feel good” hormones known to improve your mood.

Lastly, if you begin having thoughts of death or suicide, it is important to tell someone and contact a professional. **You can also call or text 988 to speak with a crisis counselor.**



References

- Centers for Disease Control and Prevention (CDC). (2022). Anxiety and depression in children.
- CDC. Retrieved September 26, 2022 from <https://www.cdc.gov/childrensmentalhealth/depression.html>.
- Hammen, C. (2005). Stress and depression. *Annual Review of Clinical Psychology*, 1(1), 293–319. <https://doi.org/10.1146/annurev.clinpsy.1.102803.143938>.
- Hunter, R., Barson, E., Willis, K., & Smallwood, N. (2021). Mental health illness in chronic respiratory disease is associated with worse respiratory health and low engagement with non-pharmacological psychological interventions. *Intern Medicine Journal*, 51(3), 414–418. <https://doi.org/10.1111/imj.15225>.
- Langlieb, A. M., & J. Raymond DePaulo, J. (2008). Etiology of depression and implications on work environment. *Journal of Occupational and Environmental Medicine*, 50(4), 391 - 395.
- Malhi, G. S., & Mann, J. J. (2018). Depression. *The Lancet*, 392(10161), 2299–2312. [https://doi.org/10.1016/S0140-6736\(18\)31948-2](https://doi.org/10.1016/S0140-6736(18)31948-2).
- Mofrad, L.. (2014). *Diabetes and Wellbeing: managing the psychological and emotional challenges of diabetes Types 1 and 2* Jen Nash Chichester: Wiley-Blackwell, 2013. pp. 221, £19.99 (pb). ISBN: 978-1-119-96718-7. *Behavioural and Cognitive Psychotherapy*, 42(2), 255–255. <https://doi.org/10.1017/s1352465813001203>.
- U.S. Department of Health and Human Services. (n.d.). Depression. National Institute of Mental Health. Retrieved January 30, 2023, from <https://www.nimh.nih.gov/health/topics/depression>.