

National Institute
of Mental Health

depression

Do you feel very tired, helpless,
and hopeless? Are you sad most
of the time and take no pleasure
in your family, friends, or hobbies?
Are you having trouble working,
sleeping, eating, and functioning?
Have you felt this way for a
long time?

If so, you may have depression.

What is depression?

Everyone feels low sometimes, but these feelings usually pass after a few days. When you have depression, the low feelings persist and they can be intense. These low feelings hurt your ability to do the things that make up daily life for weeks at a time. Depression is a serious illness that needs treatment.

What are the different forms of depression?

The most common types of depression are:

Major depression—severe symptoms that interfere with your ability to work, sleep, study, eat, and enjoy life. An episode can occur only once in a person's lifetime, but more often, a person has several episodes.

Persistent depressive disorder—depressed mood that lasts for at least 2 years. A person diagnosed with persistent depressive disorder may have episodes of major depression along with periods of less severe symptoms, but symptoms must last for 2 years.

What are the signs and symptoms of depression?

Different people have different symptoms. Some symptoms of depression include:

- Feeling sad or “empty”
- Feeling hopeless, irritable, anxious, or guilty
- Loss of interest in favorite activities
- Feeling very tired
- Not being able to concentrate or remember details
- Not being able to sleep, or sleeping too much
- Overeating, or not wanting to eat at all
- Thoughts of suicide, suicide attempts
- Aches or pains, headaches, cramps, or digestive problems.

What causes depression?

Different kinds of factors play a role in the risk of depression. Depression tends to run in families. One of the reasons for this has to do with genes. Some genes increase the risk of depression. Others increase resilience—the ability to recover from hardship—and protect against depression. Experiences such as trauma

or abuse during childhood and stress during adulthood can raise risk. However, the same stresses or losses may trigger depression in one person and not another. Factors such as a warm family and healthy social connections can increase resilience.

Research has shown that in people with depression, there can be subtle changes in the brain systems involved in mood, energy, and thinking and how the brain responds to stress. The changes may differ from person to person, so that a treatment that works for one person may not work for another.

Does depression look the same in everyone?

No. Depression affects different people in different ways.

Women experience depression more often than men. Biological, life cycle, and hormonal factors that are unique to women may be linked to women's higher depression rate. Women with depression typically have symptoms of sadness, worthlessness, and guilt.

Men with depression are more likely to be very tired, irritable, and sometimes even angry. They may lose interest in work or activities they once enjoyed, and have sleep problems.

Older adults with depression may have less obvious symptoms, or they may be less likely to admit to feelings of sadness or grief. They also are more likely to have medical conditions like heart disease or stroke, which may cause or contribute to depression. Certain medications also can have side effects that contribute to depression.

Children with depression may pretend to be sick, refuse to go to school, cling to a parent, or worry that a parent may die. Older children or teens may get into trouble at school and be irritable. Because these signs can also be part of normal mood swings associated with certain childhood stages, it may be difficult to accurately diagnose a young person with depression.

How is depression treated?

The first step to getting the right treatment is to visit a doctor or mental health professional. He or she can do an exam or lab tests to rule out other conditions that may have the same symptoms as depression. He or she can also tell if certain medications you are taking may be affecting your mood.

The doctor should get a complete history of symptoms, including when they started, how long they have lasted, and how bad they are. He or she should also know whether they have occurred before, and if so, how they were treated. He or she should also ask if there is a history of depression in your family.

Medications called antidepressants can work well to treat depression. They can take several weeks to work. Antidepressants can have side effects including:

- Headache
- Nausea—feeling sick to your stomach
- Difficulty sleeping or nervousness
- Agitation or restlessness
- Sexual problems.

Most side effects lessen over time. **Talk to your doctor about any side effects you have.**

It's important to know that although antidepressants can be safe and effective for many people, they may present serious risks to some, especially children, teens, and young adults. A “black box”—the most serious type of warning that a prescription drug can have—has been added to the labels of antidepressant medications. These labels warn people that antidepressants may cause some people, especially those who become agitated when they first start taking the medication and before it begins to work, to have suicidal thoughts or make suicide attempts. Anyone taking antidepressants should be monitored closely, especially when they first start taking them. For most people, though, the risks of untreated depression far outweigh those of antidepressant medications when they are used under a doctor's careful supervision.

Psychotherapy can also help treat depression. Psychotherapy helps by teaching new ways of thinking and behaving, and changing habits that may be contributing to the depression. Therapy can help you understand and work through difficult relationships or situations that may be causing your depression or making it worse.

Researchers are developing new ways to treat depression more quickly and effectively. For more information on research on depression, visit the **NIMH website** at <http://www.nimh.nih.gov>.

How can I help a loved one who is depressed?

If you know someone who has depression, first help him or her see a doctor or mental health professional.

- Offer support, understanding, patience, and encouragement.
- Talk to him or her, and listen carefully.
- Never ignore comments about suicide, and report them to your loved one's therapist or doctor.
- Invite him or her out for walks, outings, and other activities.
- Remind him or her that with time and treatment, the depression will lift.

How can I help myself if I am depressed?

As you continue treatment, gradually you will start to feel better. Remember that if you are taking an antidepressant, it may take several weeks for it to start working. Try to do things that you used to enjoy before you had depression. Go easy on yourself. Other things that may help include:

- Breaking up large tasks into small ones, and doing what you can as you can. Try not to do too many things at once.
- Spending time with other people and talking to a friend or relative about your feelings.
- Once you have a treatment plan, try to stick to it. It will take time for treatment to work.
- Do not make important life decisions until you feel better. Discuss decisions with others who know you well.

Where can I go for help?

If you are unsure where to go for help, ask your family doctor. You can also check the phone book or online for mental health professionals, contact your local mental health association, or check with your insurance carrier to find someone who participates in your plan. Hospital doctors can help in an emergency.

If you or someone you know is in crisis, get help quickly.

- Call your doctor.
- Call 911 for emergency services.
- Go to the nearest hospital emergency room.
- Call the toll-free, 24-hour hotline of the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255); TTY: 1-800-799-4TTY (4889).

For more information on conditions that affect mental health, resources, and research, go to **MentalHealth.gov** at <http://www.mentalhealth.gov>, the **NIMH website** at <http://www.nimh.nih.gov>, or contact us at:

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