

UNDERSTANDING DEPTHS OF DEPRESSION

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DOI: <https://www.doi.org/10.56726/IRJMETS63425>

ABSTRACT

Depression is the leading cause of disability in the world. In the United States, close to 10% of adults struggle with depression. But because it's a mental illness, it can be a lot harder to understand.

One major source of confusion is the difference between having depression and just feeling depressed. Almost everyone feels down from time to time. Clinical depression is different. It's a medical disorder, and it won't go away just because you want it to. It lingers for at least two consecutive weeks, and significantly interferes with one's ability to work.

I. INTRODUCTION

DEPRESSION:

Depression is a mental state of low mood and distaste of activity.

Depression can a lot of different symptoms:

- A low mood,
- Loss of interest in things you'd normally enjoy,
- Changes in appetite,
- Feeling worthless or excessively guilty,
- Sleeping either too much or too little,
- Poor concentration,
- Restlessness or Slowness,
- Loss of energy,
- Or recurrent thoughts of suicide.

If you have at least 5 of those symptoms, according to psychiatric guidelines, you qualify for a diagnosis of depression. And it's not just behavioral symptoms.

Depression has physical manifestations inside the brain. First of all, there are changes that could be seen with the naked eye and X-ray vision. These include smaller frontal lobes and hippocampal volumes.

On a more microscale, depression is associated with a few things: The abnormal transmission or depletion of certain neurotransmitters, especially serotonin, nor-epinephrine, and dopamine, blunted circadian rhythms, or specific changes in the REM and slow wave parts of your sleep cycle, and hormone abnormalities.

According to the National Institute of Mental Health, it takes the average person suffering with a mental illness over ten years to ask for help. But there are very effective treatments. Medications and therapy complement each other to boost brain chemicals. In extreme cases, electroconvulsive therapy, which is like a controlled seizure in the patient's brain, is also very helpful.

Understanding Depression

What is Depression?

Depression is a mental state of low mood and distaste of activity. One major source of confusion is the difference between having depression and just feeling depressed. Almost everyone feels down from time to time. Clinical depression is different. It's a medical disorder, and it won't go away just because you want it to.

Types of Depression

Depression is the most commonly diagnosed mental health condition, but did you know that the term depression can refer to multiple different diagnosis?

Depression comes in many different forms and affects each person in different ways leading to multiple classifications.

1.*Major Depressive Disorder:*

Major depressive disorder, other known as clinical depression, is a depressive disorder characterized by persistent low moods, loss of interest in your favorite activities, and a lack of motivation to carry out basic tasks. MDD is the most common form of depression. So when someone says that they have been diagnosed with depression, they're likely referring to this condition.

Symptoms:

- Feeling low energy all day even if you have had a proper amount of sleep,
- Feeling like a burden on others or having a low self worth,
- Difficulty concentrating and making decisions,
- Sleeping too much or too little,
- Loss of interest or pleasure in activities,
- Recurring thoughts of death or suicide,
- And significant weight loss or gain.

Symptoms of MDD must be present for at least two weeks in order to be diagnosed.

2.*Persistent Depressive Disorder or Dysthymia:*

Persistent Depressive Disorder (PDD), is a depressive disorder similar to MDD except that it is long lasting. The symptoms of PDD are similar to those of MDD, but often fewer and not as intense.

Symptoms:

- Low mood most of the day and almost everyday,
- Loss of enjoyment in ones pleasurable things,
- A major change in weight or appetite,
- Insomnia or excessive sleep almost everyday,
- Being physically restless or run down in a way that is noticeable to others,
- Fatigue or loss of energy almost everyday,
- Problems with concentration or making decisions almost everyday.

These symptoms must occur for at least two years to be diagnosed.

3.*Bipolar Disorder:*

It is a group of mood disorders in which symptoms of mania and depression alternate. The DSM-V has four different classification for the condition.

Bipolar 1 disorder is where the individual fluctuates between episodes of mania and major depressive episodes or experience a mix of these.

Bipolar 2 disorder is when the individual fluctuates between major depressive and less intense manic episodes known as hypomania.

Cyclothymic disorder is recognized by periods of milder depressive episodes and hypomania.

The dramatic periods of high and low moods in bipolar disorder are often unpredictable and can sometimes occur at the same time in mixed episodes.

Symptoms of mania or the highs:

- Excessive happiness, hopefulness and excitement,
- Restlessness,
- Rapid speech and poor concentration,
- Making grand and unrealistic plans,
- Becoming more impulsive,
- Less need for sleep

4.*Seasonal Affective Disorder or SAD:*

Commonly known as the winter blues, seasonal affective disorder is a disorder in which there is a predictable occurrence of major depressive episodes, manic episodes, or both at particular times of the year. The typical

pattern is the occurrence of major depressive episodes during the fall or the winter months, but in some cases can occur in spring and summer.

People with SAD typically sleep much more than usual.

Symptoms:

- Feeling sad
- Cranky or hopeless
- Less energy
- Trouble concentrating
- Greater appetite
- Increased isolation and
- Thoughts of suicide

5.*Postpartum Depression*

It is a depressive episode that affects some women within 4 weeks to six months after childbirth.

Symptoms:

- Depressed mood or severe mood swings,
- Difficulty bonding with your baby,
- Withdrawing from family and friends,
- Loss of appetite or eating much more than usual,
- Insomnia or excessive sleep,
- Severe anxiety and panic attacks,
- Thoughts of harming yourself or your baby

II. CAUSES AND RISK FACTORS

Causes:

While there is no single cause of depression, most experts believe there is a combination of biological, social and psychological factors that contribute to depression risk. Biologically, we think about genetics or a family history of depression, health conditions such as diabetes, heart diseases or thyroid disorders and even hormonal changes that happen over the lifespan, such as pregnancy and menopause.

Changes in brain chemistry, especially disruptions in neurotransmitters like serotonin, that play an important role in regulatory functions including mood, sleep and appetite, are thought to play a particularly important role in depression.

Socially stressful and traumatic life events, limited access to resources such as food, housing, and healthcare and a lack of social support all contribute to depression risk. Psychologically, we think of how negative thoughts and problematic coping behaviors, such as avoidance and substance use, increase our vulnerability to depression.

Risk factors:

- Family history of depression or other kinds of mental illness
- Biological factors
- Personality traits
- Trauma or stressful life events
- Medical conditions such as heart disease, diabetes, cancer
- Substance abuse and alcohol dependence

TREATMENT

1.*Therapy:*

- Cognitive Behavioral Therapy
- Psychotherapy

2.*Medication:*

- Antidepressants

3.*Lifestyle changes:*

- Physical activity
- Healthy diet
- Complete sleep cycle

4.*Support Networks:*

- Good relationship with family and friends

MYTHS ABOUT DEPRESSION:

- Depression is just sadness or a temporary "bad mood".
- People with depression can "snap out of it" if they try hard enough.
- Depression is a sign of weakness or character flaw.
- Depression only affects women.

III. CONCLUSION

In conclusion, depression is a complex and deeply personal mental health condition that affects millions worldwide, influencing their thoughts, emotions, and daily lives. Understanding depression's roots, symptoms, and treatment options can help reduce stigma and support those who struggle with it. Recovery is possible, but it requires compassionate support, self-awareness, and access to effective care. By fostering open conversations and promoting mental health awareness, we can build a society that prioritizes well-being, helping individuals with depression find hope, resilience, and a path to healing.

IV. REFERENCE

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