

QC0065 - Let's Talk About Depression.

We hear so much about depression these days, you might think that it's a common and cliché thing to talk about...unless you struggle with depression. Then, depression is anything but common and cliché. And even if you don't suffer with depression, it's a pretty safe bet that someone you know and love does.

I was sitting in my office a few months ago when someone lightly tapped on my door. As a pastoral counselor serving in a church, this is not unusual. But when this person stepped into the room, I knew something was seriously wrong. Their shoulders were lowered, their head was down, their countenance was fallen, and they looked like they were trying to hold back an ocean of tears.

I ushered them in and closed the door, as they slumped deep into the sofa in my office. Once they told me their name, I asked them what was going on. With their head down and their eyes averted they said, "I can't do this anymore." That was all they said. We both sat there as the silence hung heavy in the office. Finally, I asked, "What can't you do anymore?" Their response was, "Life. I can't live like this anymore."

With a little prompting, they went on to tell that their struggles with depression and anxiety were making their life unmanageable and unwanted. So I asked the question... "Have you thought about killing yourself?" With little hesitation they said, "Yes." Then I asked, "How recently have you thought about killing yourself?" And they said, "In the last few days." I knew this was serious.

We talked a little more, and then they raised their head, looked me in the eyes, and asked, "Am I insane?" The question broke my heart. I quickly said, "You are not insane." Their mood seemed to lighten some and they raised their head. We then went on to talk about depression...both its causes and its treatments.

DEPRESSION

So many people are confused and misinformed about depression. Though it's better than it once was, depression still carries with it a stigma and shame that keep people from talking about it and getting help.

The National Institute of Mental Health estimates that of adults in the U.S....

- 7.8% of adults...that's over 19 million adults...have had at least one episode of major depression.

- 3% had dysthymia (which is a chronic type of depression.)
- 1% develop Bipolar depression.
- 5% experienced seasonal depression (SAD.).
- Between 6.5% and 20% of women develop postpartum depression.

When you add up the stats for the various types of depression, you find that over 20% of the US adult population will struggle with some sort of depression at one time or another. And many of these statistics are pre-pandemic statistics... which means the numbers are probably higher! Depression is a real and pressing problem.

So today, we're going to talk about depression. This will not be an in-depth and comprehensive dive into the subject of depression. And since I'm not a doctor, I can't give you any medical advice. But we can talk generally about the symptoms, causes, and treatments of depression.

SYMPTOMS OF DEPRESSION

There are some general symptoms I listen for if I suspect someone is struggling with depression.

Problems with Sleeping.

Sometime this means the person is sleeping excessively. Perhaps, they have trouble getting out of bed, or are sleeping in the middle of the day. Or, it could be the opposite and they're having trouble sleeping. They may be sleeping fitfully, or in short segments, or just not enough. Both are possible signs of depression.

Problems with Appetite.

The problems with appetite are similar to the problems with sleeping. A person either is hungry and eating all the time, or their appetite is waning, and they're just not that hungry. This is a possible indicator of depression.

Lack of Enjoyment.

When a person doesn't enjoy the things they use to enjoy, or when they're experiencing a general lack of enjoyment across the board, it could be a sign of depression.

Interference with Work, School, or Social Connections.

When a person's mood is so down or disrupted that it begins to cut into their job, their school, or their social connections, depression could possibly be in play.

Thoughts or Actions of Self-Harm or Suicide.

And then, certainly when a person is having thoughts of self-harm or suicide...or if they're actually acting on those thoughts and impulses...then depression is most probably at work.

You may be thinking, "Well I've not had any self-harm or suicidal thoughts or actions, but I've had one or two of the others. Does that mean I'm suffering with depression?" And the answer is...not necessarily.

We all get down sometimes and have the blues at times. But feeling down tends to come and go with the situations and circumstances. With depression, these symptoms last longer and more intense. The symptoms are more pervasive and more deeply entrenched. They don't come and go. They come and stay.

Those are some of the symptoms of depression. Now, let's look at some of the causes of depression...

CAUSES OF DEPRESSION.

Depression can be triggered and fueled by several things.

Genetics.

When someone comes to me with possible depression, I always ask if others in their family have experienced similar problems with depression or anxiety. Why? Because depression has a way of being passed on genetically. Does this mean that if you have a parent, grandparent, or other family member who is depressed or anxious that it's certain that you will have it also? No. But the more you see these things in your family line, the more it raises the probability for you.

Family Upbringing.

Families that are critical, oppressive, combative, or abusive tend to breed depression in the family members. Yes, there are people who come out of such families apparently unscathed by that, but the odds are slim.

Physical Health Issues.

There are certain diseases and disorders that can foster and fuel depression. For example:

- After open heart surgery, many people experience depression.
- If your thyroid is not functioning properly, it could cause depression.
- Many pregnant mothers experience postpartum depression after delivery.

- Chronic illnesses and chronic pain can lead to depression.
- Traumatic brain injury can have many effects on a person...including depression.
- Anything that interferes with the production and transmission of hormones has the possibility to bring on depression.

Let's go back to the story I was telling at the beginning of this podcast. It turns out they were suffering from a chronic illness that was creating their depression.

You see, our mood can be closely tied to our physical well being.

Negative Events and Traumas.

Negative and traumatic events can set the stage for depression. The more negative or traumatic the event, the more probable the depression. And the more on-going and repetitive the event, the more probable the depression.

Spiritual Factors.

People from certain faith backgrounds and traditions may view depression as the sign of a weak faith at best and spiritual warfare at worst. While I certainly believe that our spiritual strength and condition plays a part in our mental and emotional health, I believe that all the possible causes need to be considered when it comes to depression. We are holistic beings and we need to investigate things such as depression holistically.

So there are some of the possible causes of depression. Now let's move on and talk about...

TREATMENTS FOR DEPRESSION

Like the causes of depression, the treatment for depression can be multi-faceted.

BUT...If you feel like you want to hurt yourself or kill yourself, then you should immediately...

- Tell a parent, a spouse, or a close friend.
- Call the suicidal prevention hotline at 800.273.8255
- Call your physician.
- Go to the ER.

Do not wait out feelings of self-harm or suicidal thoughts!

But, if your depression is not leading you to self-harm or suicidal thoughts, then there are still some things you can do. Let's look at three broad treatment approaches for depression...

Take Care of Yourself Physically.

Believe it or not, there are some very simple things you can do for yourself physically that can have an impact on your depression.

- Get the proper amount of sleep. Lack of sleep can fuel depression. If possible, you should be getting between 7.5 and 8 hours of sleep. Practice good sleep hygiene. This would be things like keeping a regular bed time and wake time - guarding your caffeine and food intake before bed - learning to give yourself an emotional and physical wind-down time as you approach bed time. And...if your depression is preventing you from getting good sleep, then you may need to talk to your doctor about a sleep aid.
- Get more exercise. Exercise produces natural endorphins which help lift depression. Exercise also improves heart and lung capacity, and can make your body more ready for bed. Now I'm not talking about spending hours in a gym or running a half-marathon. I'm talking about something as simple as going for a 20-30 minute walk or bike ride most days.
- Watch your diet. You don't have to be a food nazi, but eating better can have a great effect on your depression. Shoot for less sugars and carbs and more fruits and vegetables. Also, reducing your caffeine intake can have a positive effect on your depression.

Taking care of your body will help you take care of your mind and your emotions.

Talk to Someone.

A second thing you can do about your depression is to talk things out with someone. It may be the last thing you want to do, but depression thrives in withdrawal and isolation. So talk to someone. Start with your family, your friends, or your pastor if you have one. If this isn't helpful and the depression persists, then talk to a counselor. You need to talk things out, hear them, process them, and get feedback.

Grow Spiritually.

If you're a person of faith, then you can lean into that aspect of life. Regularly read and consume Scripture and things that will fuel your faith and your outlook. Pray, meditate, and get involved in serving others. As you strengthen yourself spiritually, you may find that it will strengthen you mentally and emotionally also.

Tell Your Physician.

And finally, if none of these things bring you relief, then you may need to see your physician and be evaluated for a possible anti-depressant. I know many people push back on this suggestion. They feel like they should be able to take care of this aspect of their life themselves. This is especially true with people of faith, who can tend to believe that depression is a spiritual issue and that taking anti-depressants is a lack of faith. For whatever reason you might find yourself pushing back against this idea, just remember...

- If you were diabetic, you wouldn't reject insulin and think you could take care of it yourself.
- If your cardiologist told you that you needed to be on a blood pressure medicine, you would probably do it.
- And if you've ever taken aspirin or Tylenol for a stress headache, then you've proven you're not against medicine to help you when you need it.

Your brain is just another organ of the body, and like any other organ, it may occasionally need some help.

A FINAL THOUGHT...

No one is above experiencing depression. So if and when that happens, remember...

- First...Depression is a multi-faceted issue and often needs to be addressed on more than one front.
- Second...Treating depression can require some time and patience. Depression rarely goes away over-night...even with an antidepressant. An antidepressant can take 4-6 weeks to reach a therapeutic level, and even then it may still need to be tweaked and adjusted.

But experiencing depression doesn't mean you're crazy or insane. It just means you're a human being living in a difficult world with difficult circumstances that can produce difficult reactions.

Give yourself some grace, cut yourself some slack, and do whatever you need to do overcome the depression and get back to being the person you want to be.