

FamilyGrowth ReportsTM

By Larry E. Quicksall, LCSW

Depression Basics

Introduction

Everyone feels depressed from time to time. However, sometimes depression is more than a passing phase that leaves after a few minutes or hours. Sometimes depression lingers for weeks, months, or years, and in some cases, depression leads to suicide. So, what is this depression that can affect people so differently? Let's start by defining three different flavors of depression and looking at some real life examples.

Three Types of Depression

In my counseling practice I see three different flavors of depression that I term *The Blues*, *Situational Depression*, and *Biochemical Depression*.

The Blues

The Blues is a short-term depressed feeling that everyone gets from time to time. Sometimes it comes unexpectedly and other times we can tag it to a specific situation, frustration, or loss. The Blues usually lasts from a few minutes to a few hours, and most people can shake the blues off by redirecting themselves such as going to see a friend, watching television, going for a walk, or going to bed.

An example of The Blues from my life occurred during the fall of 2000. I am a deer hunter, and I was eagerly awaiting my deer tag to come in the mail. One day a letter came from the Illinois Department of Conservation, and I knew it was my tags, but what it contained was not what I wanted to see. It was a refund check for \$15 and a letter stating that they were out of tags for Shelby County, which is where I hunt. Oh no! No tags....no deer hunting....no carrying my gun through the woods....no watching for that big buck that has my name written on his antlers (*I know some of you are cheering for the deer right now, aren't you!*).

I was immediately depressed. All I could do was hang around the deer camp, make the meals, and be a "dog" walking through the woods flushing out the deer to my waiting hunting buddies on the other side. All I could think about was my disappointment and loss, and I proceeded to mope around the house for the next hour or so. Finally, my wife said, "get over it" and to quit making myself more depressed. I knew she was right, so I started busying myself with the kids and within a few minutes my depressed feelings were gone, and I was accepting of what was to be. The next day I wasn't even bothered by the lack of a tag. The Blues were gone.

(For those who care, I did receive a second letter from the Department of Conservation the next day with a deer tag enclosed – I had apparently requested two tags, and only one was rejected, so I got to go hunting after all!)

Situational Depression

Situational Depression is similar to The Blues but it is more severe and longer lasting. In Situational Depression the person has experienced some significant loss or frustration that can be specifically identified. Sometimes the situation is short-term while other times it is an ongoing frustration. The depressed feelings generally last from a few days to a few months. Some examples of Situational Depression can include the death of a spouse or family member, loss of a job, problem marriage, serious illness, arrest, failing a class, or having to moving to another state. In each of these examples, there is a significant change that is undesirable and can impact several life areas.

This compounding of the loss makes recovery more difficult than what we saw in The Blues. Sometimes Situational Depression will lift on its own as the situation resolves itself or with the passage of time. For example, someone who loses a spouse to death will usually feel quite depressed for a few weeks, but

generally after a month, they will notice that their depression is lifting. Other times the person may feel "stuck" and benefit from counseling or self-help group support. This type of counseling is generally short-term unless multiple losses are involved.

Biochemical Depression

Biochemical Depression can start with Situational Depression or can begin completely on its own. The thing that separates Biochemical Depression from other types is an actual chemical change in the brain that results in depressed feelings. In the brain the individual nerve cells never actually touch one another, but come very, very close together with a tiny gap in between. To communicate, nerve cells secrete chemical messengers that float across the gap and make connection with adjacent nerve cells.

One very important chemical messenger is **Serotonin**. Sometimes a person's serotonin level drops resulting in severe and persistent symptoms of depression. Serotonin level can drop because of malnourishment such as in Anorexia Nervosa, or they can drop following a long-term Situational Depression. Current research is suggesting that when we experience long-term stress, our body initially burns-up the B-Complex vitamins in our system. If the stressor continues, our body will then begin to either exhaust its supply of or fail to create additional serotonin. Other times, serotonin levels drop on their own for no apparent reason other than there is a family history of Biochemical Depression.

Common symptoms of biochemical depression can include the following symptoms: irritability, changes in appetite, changes in sleep patterns, lack of energy, lack of motivation, loss of enjoyment in family, friends, and activities, profound guilt, and suicidal thoughts, plans, or attempts.

Biochemical Depression is a very serious medical condition that needs to be properly diagnosed and treated. It is common and affects approximately 20 percent of the population at some point over the lifetime. Also, approximately 15 percent of those with Biochemical Depression will attempt or commit suicide. Simply put, don't take this condition lightly.

What Should I Do?

What should you do if you suspect Biochemical Depression in yourself or a loved one?

First, seek help today!

Make an appointment with a physician or trusted counselor who can assess the symptoms and recommend a proper course of treatment. If it is biochemical in nature, the person will likely be prescribed an antidepressant medication that is designed to increase the serotonin levels in their brain. Most people will need to take the medication for approximately one year, and then the physician will consider tapering off the dosage. Others may have a more chronic variety of depression and will need to take the medication long-term, like high blood pressure medication. Most people with depression will benefit from a combination of medication and counseling.

Counseling Helps!

Counseling helps the person restore their thought patterns to seeing and interpreting life in a more healthy way. Typically, the longer a person lives with depression, the longer they will need counseling to reach a point of healthy restoration.

Don't Be Ashamed!

Remember, do not be ashamed of depression: it affects 1-in-5 people, it is not a sign of weakness, it is a serious condition, and the quicker you deal with it in an effective way the better!

About the Author

Larry E. Quicksall is a Marriage & Family Therapist and founder of Christian Counseling Associates of Effingham and FamilyGrowth Publishing. He received his Bachelor of Arts degree in Psychology from Eastern Illinois University and his Master of Social Work degree from the University of Illinois. He received his Clinical Social Worker license in 1993.

Larry has worked extensively in several fields of practice including substance abuse prevention, crisis intervention, severe mental illness, terminal illness and hospice care, parental coaching, and marital growth and restoration. He is also a member of the adjunct faculty of Lake Land College where he has taught in the field of psychology since 1991. Larry is a professional speaker and trainer in the human services field, and you can view his website at www.FamilyGrowth.org.