

# Depression DA Summary Tool

## This program is for adults who

- Have not been diagnosed but are wondering if they have depression
- Have been told they have clinical depression
- Want to know more about depression

## This program is NOT for patients who

- Have bipolar disorder
- Have premenstrual dysphoric disorder
- Have seasonal affective disorder
- Have post-partum depression

**People with SAD and PPD may find some information in the program helpful, especially if their condition develops into longer-term depression.**

## Summary

1 in 10 adults have depression in any given year. Depression is more than normal sadness. It is a biological condition due to an imbalance in neurotransmitters that can be caused by stress, genetics, developmental issues or a combination of these. Considerations for choosing treatments include: personal preferences, what worked in the past, what worked for family members, other health conditions, and the ability to adhere to the chosen treatment. The treatment choice should be reconsidered in 1-2 months if improvement does not occur.

## Symptoms of Depression

- Feeling sad, down, irritable, or hopeless.
- Losing interest in your usual activities or feeling as though you just don't enjoy things anymore.
- Feeling tired or lacking energy.
- Having difficulty thinking, concentrating, or making decisions.
- Feeling agitated or having slowed movement.
- Having a significant increase or decrease in appetite or losing or gaining weight without trying to.
- Having trouble falling asleep, staying asleep, or oversleeping.
- Feeling worthless or guilty, or having low self-esteem.
- Having thoughts of death or suicide.

## Comments:

- PHQ-9 Depression screening instrument is included with the decision aid booklet.
- National Suicide Hotline: 800-SUICIDE or 800-784-2433

## Key messages

- There are 3 types of depression: major, minor, and dysthymia.
- With milder symptoms, about 1 out of 3 people gets better without treatment. This means that 2 out of 3 people with mild symptoms *don't* feel better without treatment.
- For people who have more severe depression that has lasted weeks or months, there's a greater chance that they won't get better, or that they'll get worse, without treatment. Waiting a long time before getting help can make depression harder to treat.
- About one-third of people with depression have thoughts of suicide. About 4 out of 100 have active thoughts of harming themselves.
- About 1/2 of people who have had depression at some time have relapse of depression after recovery.

## Treatment Options (individual or in combination)

Treatment Option	How long it takes to work	Benefits	Who they work for	Common Side Effects / Complications
Self guided help (exercise, relaxation, books, etc)		Least expensive, no risk of medication side effects	Mild depression	Check in with provider every 2-3 weeks
Medication	2-6 weeks. Usually taken for 6 months after response to prevent relapse	~55/100 report depression improves with the first medication, 70/100 improve with a second medication.	Moderate depression, symptoms that have lasted a long time, more than one bout of depression	See table below. Most side effects improve over time. Sexual side effects can persist, but may be treatable. Possible increased risk of suicide for people under 25 in the first 2 months of treatment.

<b>St. John's Wort</b>	Unsure	60/100 feel better after taking	Mild depression	Dry mouth, nausea, headaches, vomiting, stomach pain, dizziness. Can interact with prescription meds. Not regulated by FDA.
<b>Counseling*</b>	6-8 weeks. Can last 12-20 sessions.	50/100 feel better. Can teach life skills for dealing with depression.	All types	Time commitment of 1h/week usually. May not be covered by insurance.
<b>Electro-convulsant therapy</b>			Severe depression not responding to medications	
<b>Combination therapy</b>		Up to 74/100 people with severe depression will improve.	For severe major depression, major depression for a year or longer, 3+ bouts of depression	
<b>Hospitalization</b>			May be helpful for those with very severe depression or thoughts of suicide.	

### \*Types of Counseling

- **Interpersonal** – improve relationships with other people to lift depression. Improve difficulties relating to others.
- **Problem-solving** – identify problems and have structured method to find solutions. Establish daily routines and rewarding activities
- **Cognitive-behavioral** – how thoughts might contribute to depression and identify and change thinking patterns. Examine interactions with the world, do things that improve mood.
- **Mindfulness-based cognitive** – help become aware of painful or negative thoughts and feelings. Experience and accept the thoughts and feelings without avoiding

<b>Antidepressants and Their Side Effects</b>			
<b>Antidepressant Type</b>	<b>Medication Names</b>	<b>Common Side Effects</b>	
Selective serotonin reuptake inhibitors (SSRIs)	fluoxetine (Prozac <sup>®</sup> ) sertraline (Zoloft <sup>®</sup> ) paroxetine (Paxil <sup>®</sup> ) citalopram (Celexa <sup>®</sup> ) escitalopram (Lexapro <sup>®</sup> )	• Restlessness • Nausea or upset stomach • Headache	• Sexual side effects • Trouble falling or staying asleep
Tricyclic antidepressants	amitriptyline (Elavil <sup>®</sup> ) nortriptyline (Pamelor <sup>®</sup> ) imipramine (Tofranil <sup>®</sup> ) desipramine (Norpramin <sup>®</sup> )	• Sleepiness • Dry mouth • Dizziness	• Constipation • Sexual side effects • Weight gain
Norepinephrine & dopamine reuptake inhibitors	bupropion (Wellbutrin <sup>®</sup> )	• Headache • Decreased appetite	• Restlessness or anxiety
Serotonin & norepinephrine reuptake inhibitors (SNRIs)	venlafaxine (Effexor <sup>®</sup> ) duloxetine (Cymbalta <sup>®</sup> )	• Sleepiness • Dizziness • Nausea	• Constipation • Trouble falling or staying asleep
Serotonin & norepinephrine antagonist	mirtazapine (Remeron <sup>®</sup> )	• Sleepiness • Dry mouth	• Weight gain
Monoamine oxidase inhibitors (MAOIs)*	isocarboxazid (Marplan <sup>®</sup> ) phenelzine (Nardil <sup>®</sup> ) tranylcypromine (Parnate <sup>®</sup> )	• Sleepiness • Dry mouth • Upset stomach • Headache • Difficulty starting urination	• Muscle jerks • Low blood pressure • Severe high blood pressure or headaches when combined with certain foods

\*People who take MAOIs should see the information provided on the following Web site:  
[www.cc.nih.gov/ccc/patient\\_education/drug\\_nutrient/maoi1.pdf](http://www.cc.nih.gov/ccc/patient_education/drug_nutrient/maoi1.pdf)

**Reference:** *Coping with Symptoms of Depression*. ©Health Dialog Services Corporation 2009.  
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