

## What's Up, Doc?

***Ben decided it was finally time to talk to his doctor. Maybe you should too.***

“Doctor, it’s probably nothing, but...” Ben hesitated, and then gathered the strength and courage to continue. “I haven’t been feeling like myself lately.”

“What seems to be the trouble?” His doctor asked.

“I don’t know. I get angry at the drop of a hat. My stomach’s been acting up –but maybe that’s because I’ve been drinking more than usual. I don’t rush home to spend time with my wife and kids anymore. And... my interest in sex is basically zero. What’s wrong with me?”

“How long have you been feeling this way?” His doctor asked.

Ben reluctantly confided, “This has been going on for months.”

“We’ll first need to run a few tests, Ben. But it sounds to me like you’re experiencing depression: Your physical symptom of abdominal distress, plus your anger, drinking, and not enjoying the things you used to – are all classic signs.”

“I didn’t know depression caused physical symptoms. And I definitely didn’t associate depression with anger.” Ben admitted.

Ben isn’t alone. About 19 million Americans suffer from depression, and 6 million are men.

“Depression is ***very treatable***, Ben,” his doctor said matter-of-factly.

“I didn’t know that either,” Ben said. And with that, Ben felt something he hadn’t felt in a long time: A sense of relief.

## Beyond The Blues

So, you’re in kind of a funk? Feeling blue or down in the dumps? If you’ve only been feeling that way for a few days, or something tragic has recently happened, it’ll probably pass.

However, if it’s been weeks, months or even years, since you’ve felt right, then you may have depression.

Depression is a serious medical condition that affects your ability to function in everyday life – including the way you think, feel and behave. Depression can even make you physically ill.

You deserve better. (And if you think you don’t deserve better...that’s your depression talking.) Do whatever it takes –bring a friend if that’ll help– but tell your doctor what’s going on with you. You can do this. You just have to be willing to take the first step.

## A River of Tears vs Screaming Over Spilled Milk

Men and women are wired up differently. And while there are certainly similarities as to how men and women *experience* depression, there are also *notable differences* in symptoms:

- Women's depression typically includes feelings of hopelessness and helplessness; with men that's far less common.
- Women think of themselves as crying all the time, or crying over "nothing"; men tend not to cry, or don't admit to it if they do.
- Men are more likely to show signs of anger, irritability and discouragement.
- Men's depression is also often masked by socially acceptable behaviors such as working excessively long hours, and drinking alcohol.
- Men are also less likely to seek treatment than women, *even if they recognize* they're depressed.

### For Men, Only *Do you know someone like this?*

He gets grumpy or irritable at the drop of a hat, and he's definitely lost his sense of humor. Maybe he drinks too much or abuses drugs. Perhaps he's become physically or verbally abusive to his wife and kids – or at least he *thinks* about doing that sometimes. He works all the time and compulsively seek thrills in high-risk behavior. And other times, he comes across as withdrawn, isolated, and no longer shows any interest in the people or activities he used to enjoy.

Perhaps you know someone who's a bit like that? Perhaps that someone is you.

If so, it's important that you clearly understand three things about depression:

- 1.) ***It's a brain disorder:*** Your negative feelings and behaviors aren't your fault.
- 2.) ***It's real:*** Scientists have developed sensitive imaging devices that enable us to see depression in the brain.
- 3.) ***It's treatable:*** More than 80 percent of those suffering from depression respond to existing treatments, and new ones are continually becoming available and helping more people.

Look, men are less likely to admit to depression and – for whatever reason – doctors are less likely to suspect it. *That puts the ball in your court.* Talk to your healthcare provider about how you're really feeling (or not feeling....), and get the treatment that's right for you.

## You're In Good Company *Busting The Myth*

Let's put this myth to rest right now: Depression is neither a sign of weakness nor a comment on one's character. Want proof? Here's two: Abraham Lincoln and Winston Churchill. Yes, both of these highly respected people suffered from serious depression. Case closed.

## You Gotta Play To Win

If you had better than an 80 percent chance of winning a multi-million dollar lottery, you'd seriously consider giving it a try, wouldn't you?

Well, unrecognized depression continues to cause unnecessary suffering – even though treatment can ease the symptoms over 80 percent of the time. Yes, this is true even if your depression is severe.

You have everything to gain and nothing to lose. So, what are you waiting for?

## Caution: Objects May Be Closer Than They Appear

### ***Depression alters your perceptions –especially your self-perception***

You know those negative thoughts swirling around inside your head? You know the ones, like, “you’ve gotten what you deserve” and “what did you expect from such a loser” or maybe “nothing ever goes right for me.”

Well, those thoughts *are part of your depression*. It may be hard to believe right now, but it’s the truth.

Here’s the thing: When you’re depressed, you may *think* that you perceive things clearly (and therefore you believe you’re making good choices)...but you’re probably not.

The bottom line is this: Left untreated, depression isn’t only disabling, it’s potentially fatal. And if the thought of it being potentially fatal is somehow comforting to you...then please, tell your doctor how you feel immediately.

You could be feeling better than you have in years in a matter of weeks. And your only regret will be wondering why you waited so long. That’s a regret we can all live with.

## Role Playing

The latest studies suggest that when you play an active role in selecting your treatment options for depression – drug therapy, counseling or a combination of both – you’ll do even better than if you had simply accepted whatever treatment had been offered.

*Source: Annals of Behavioral Medicine, October 2005*

Now, there’s a variety of antidepressant ***medications*** and ***counseling styles*** (also called “***talk therapies***) that can be used to treat your depression. Here are some general guidelines:

- Some people with milder forms of depression may do well with psychotherapy alone.
- People with moderate to severe depression often benefit from antidepressant medication.
- Most people do best with a combination of both:
  - Medication to help you gain relatively quick symptom relief (usually within 3 to 8 weeks)
  - Therapy to help you learn effective ways of dealing with life’s problems.

## It's a Brain Thing

The latest brain-imaging technologies reveal that when you're depressed, the nerve circuits that are in charge of *regulating* your moods, thinking, sleeping, appetite and behavior fail to function properly.

Additionally, the chemicals necessary for nerves cells *to communicate* critical information in your brain (called *neurotransmitters*) have gotten out of balance.

The brain's *three neurotransmitters* (also called *monoamines*) are serotonin, norepinephrine, and dopamine. Antidepressant medications work by *restoring* the brain's chemical balance:

- **SSRI's** (Selective Serotonin Re-uptake Inhibitors) work by increasing your serotonin levels.  
*Note: SSRI's have the least unwanted side effects*
- **Tricyclics** work by increasing your serotonin and norepinephrine levels
- **MAOIs** (Monoamine Oxidase Inhibitors) work by blocking (inhibiting) an enzyme called *monoamine oxidase* from getting rid of serotonin, norepinephrine and dopamine.

Which one is best for you? That would depend on which neurotransmitters are out of balance. Finding the best one (and the appropriate dosage) for you is highly individualized and may requires some trial and error. Just hang in there. The best is yet to be.

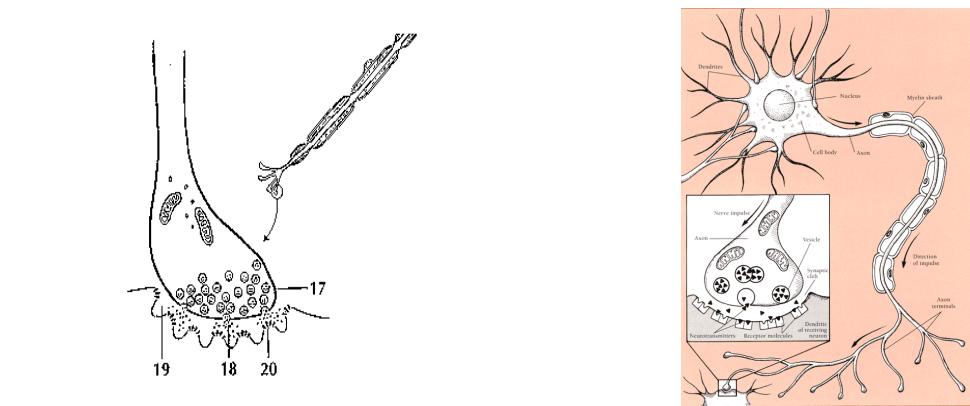
## Technically Speaking: Making The Connections *(see graphic below)*

### *The way the brain is supposed to work*

The brain and the rest of the nervous system are composed of many different types of cells, but the primary functional unit is a cell called the neuron. All sensations, movements, thoughts, memories, and feelings are the result of signals that pass through neurons.

Scientists have learned a great deal about neurons by studying the synapse—the place where a signal passes from the neuron to another cell:

When the signal reaches the end of the axon it stimulates tiny **sacs** (17). These sacs release chemicals known as **neurotransmitters** (18) into the **synapse** (19). The neurotransmitters cross the synapse and attach to **receptors** (20) on the neighboring cell. These receptors can change the properties of the receiving cell. If the receiving cell is also a neuron, the signal can continue the transmission to the next cell.



## Mood Food

There's no question that there's a mind-body connection: Research shows that eating a healthy diet can improve your mood, memory, creativity, and even mental aging.

So, choose a wide variety of fruits and vegetables that are deep in color (such as blueberries and spinach); lean meats and poultry; nuts and beans, whole grain foods, and good fats (like omega 3's found in salmon, tuna, sardines, and flaxseeds).

## Go Get Sweaty

Research shows that people with mild to moderate depression showed a 50 percent *reduction in depressive symptoms* when they participated in 30 minutes of aerobic exercise 3 to 5 times a week. Getting regular exercise can definitely:

- Improve your mood
- Lower your blood pressure
- Increase your cardiovascular health
- Decrease fatigue
- Reduce stress
- So, what are you waiting for?

## This is only a Test....

While not a hard and fast rule, men and women tend to express their depression differently. Which of these four actual quotes do you think were made by men and which do you believe were made by women?

1.) "I can remember it started with a loss of interest in basically everything that I like doing. I just didn't feel like doing anything. I just felt like giving up. Sometimes I didn't even want to get out of bed."

2.) "When I was feeling depressed I was very reckless with my life. I didn't care about how I drove, I didn't care about walking across the street carefully, I didn't care about dangerous parts of the city. I wouldn't be affected by any kinds of warnings on travel or places to go. I didn't care. I didn't care whether I lived or died and so I was going to do whatever I wanted, whenever I wanted. And when you take those kinds of chances, you have a greater likelihood of dying."

3.) "As you get sick, as you become drawn in more and more by depression, you lose that perspective. Events become more irritating, you get more frustrated about getting things done. You feel angrier, you feel sadder. Everything's magnified in an abnormal way."

4) "I start to feel paralyzed. Like I can't do anything right, so what's the point? I just want to stay home in bed and hide under the covers. I begin to doubt my abilities and my value to the universe, as a whole. And, I find myself crying over stupid things."

**The Answers:** Men said the first three quotes. A woman said the last quote. The first quote was said by a **police officer**; the second by a **lawyer**; the third by a **publisher**; and the fourth by a **writer**.

The point? Anyone can suffer from depression. It's a disease, not a character flaw. And, it's definitely not your fault. What is your responsibility, however, is to do something about it. All you have to do is ask.

### **Sidebar: Post-Traumatic Stress Disorder (PTSD)**

Depression is especially common among people with PTSD, an often debilitating condition that can occur after exposure to a terrifying event or ordeal in which grave physical harm occurred or was threatened. If your symptoms include any of the following, tell your doctor:

- Re-experiencing the event/ordeal in the form of flashback episodes, memories or nightmares
- Experiencing emotional numbness
- Feeling irritable and/or having outbursts of anger
- Having intense guilt
- Avoiding any reminders or thoughts of the event/ordeal

### **(Sidebar) Get With The Program, People!**

It's true. Some people still hold outdated beliefs about depression— for example, that the emotional symptoms caused by depression “aren't real” –and that you should be able to merely “will yourself” out of it.

But fortunately, you know better: Depression is a real medical condition that *can be treated effectively* with conventional medicine, including antidepressant drugs and counseling.

## **Getting On The Healing Path**

It's essential that your treatment be a partnership between you and your doctor. Make sure you know and understand your treatment options and discuss any concerns as they arise.

### **Steps to healing:**

- Check your symptoms against the list called, “Reality Check” on page X.
- Talk to a health or mental health professional.
- Choose a treatment professional and a treatment approach with which you feel comfortable.
- Consider yourself a partner in treatment and be an informed consumer.
- If you aren't comfortable or satisfied after 2 to 3 months, discuss this with your provider. Different or additional treatment may be recommended.
- If you experience a recurrence, don't hesitate to seek help again. In fact, the sooner a recurrence is treated, the shorter its duration will be.

## In The Meantime

Once you start getting effective treatment for your depression, those intrusive, negative thoughts will begin to fade away. But in the meantime:

- **Postpone important decisions.** Before deciding to make a significant transition—change jobs, get married or divorced—discuss it with others who know you well and have a more objective view of your situation.
- **Expect your mood to improve gradually, not immediately.** Feeling better takes time. Often during treatment of depression, sleep and appetite will begin to improve before depressed mood lifts.
- **Engage in mild exercise.** Take a walk around the block, wash the car or weed the garden.
- **Break large tasks into small ones,** set some priorities, and do what you can as you can.
- **Try to be with other people** and to confide in someone; it is usually better than being alone and secretive.
- **Participate in activities** that may make you feel better.
- **Remember, positive thinking** will replace the negative thinking as your depression responds to treatment.
- And finally, please let your family and friends help you.

## A Word About Suicide

### ***Paul vividly remembers what he felt like, before he got the help he needed.***

“You are pushed to the point of considering suicide, because living becomes very painful. You are looking for a way out; you’re looking for a way to eliminate this terrible psychic pain. And I remember, I never really tried to commit suicide, but I came awful close, because I used to play matador with buses. You know, I would walk out into the traffic of New York City, with no reference to traffic lights, red or green, almost hoping that I would get knocked down.” —

Paul Gottlieb, Publisher

If you are thinking about suicide, get help immediately:

- Call your doctor’s office.
- Call 911 for emergency services.
- Go to the emergency room of the nearest hospital.
- Ask a family member or friend to take you to the hospital or call your doctor.
- Call the toll free, 24 hour hotline of the National Suicide Prevention Lifeline at 1 800 273 TALK (1 800 273 8255) to be connected to a trained counselor at the suicide crisis center nearest you.

### ***Patrick shares what he felt like after he started getting the help he needed***

“And pretty soon you start having good thoughts about yourself and that you’re not worthless and you kind of turn your head over your shoulder and look back at that, that rutted, muddy, dirt road that you just traveled and now you’re on some smooth asphalt and go, ‘Wow, what a trip. Still got a ways to go, but I wouldn’t want to go down that road again.’ ” —Patrick McCathern, First Sergeant, U.S. Air Force, Retired

## St. John's Wort & Depression

St. John's wort is a long-living plant with yellow flowers that contains a lot of different chemical compounds. How these compounds actually work in the body is not yet known.

There is some scientific evidence that St. John's wort is useful for treating mild to moderate depression. However, recent studies suggest that St. John's wort doesn't provide any benefit in treating major depression of moderate severity.

However, to be clear: St. John's wort is not a proven therapy for depression. It's also known to limit the effectiveness of certain drugs, chemotherapy, and should never be taken if you have HIV/AIDS. There can also be a number of side effects associated with taking St. John's wort, including: dry mouth, dizziness, diarrhea, nausea, increased sensitivity to sunlight and fatigue.

Talk with your doctor about your depression, and all of the treatment options that may be right for you.

Most importantly: If you have depression and don't get the appropriate treatment you need, your depression could become severe – which sometimes leads to suicide.

*SOURCE: The National Center for Complementary and Alternative Medicine (NCCAM) of the National Institutes of Health and Department of Health and Human Services. NCCAM Publication No. D005.*

## Not Necessarily The Blues

### *Sidebar: I Think Someone I Care About Is Depressed*

If you know someone who seems depressed, here are some things you can do:

- Kindly share your concerns with your friend or loved one
- Give him or her a copy of this booklet
- Talk to him or her about the importance of getting evaluated by a doctor
- If the doctor offers the name and number of therapy professional, encourage him or her to call and make an appointment the same day
- Take him or her to the appointment and/or arrange to get together afterward
- Provide unconditional support to your friend or loved one

## REALITY CHECK

Carefully read this list and check all of the answers that sound like you. Even if you only check off a few, please show this list to your doctor anyway.

- I lash out at people who don't deserve it.
- I'm really sad most of the time.
- I don't enjoy doing the things I've always enjoyed doing.
- I don't sleep well at night and am very restless.
- I'm always tired, and I find it hard to get out of bed.
- I don't feel like eating much.
- I feel like eating all the time.
- I have lots of aches and pains that won't go away.
- I have little to no sexual energy.
- I find it hard to focus and am very forgetful.
- I am mad at everybody and everything.
- I feel upset and fearful, but can't figure out why.
- I don't feel like talking to people.
- I feel like there isn't much point to living, nothing good is going to happen to me.
- I don't like myself very much. I feel bad most of the time.
- I think about death a lot. I think about how I might kill myself.

## Help Is Just A Phone Call Or Click Away

- National Institute of Mental Health

[www.nimh.nih.gov](http://www.nimh.nih.gov)

Toll-Free: 1-866-227 NIMH (6464)

The Federal government agency whose mission is to reduce the burden of mental illness and behavioral disorders through research on mind, brain, and behavior. NIMH is a part of the National Institutes of Health, U.S. Department of Health and Human Services.

- National Mental Health Association

[www.nmha.org](http://www.nmha.org)

Toll-Free: 1-800-969 NMHA (6642)

An association that works with more than 340 affiliates nationwide to promote mental health through advocacy, education, research, and services.

- National Foundation for Depressive Illnesses

[www.depression.org](http://www.depression.org)

Toll-Free: 1-800-239-1265

A foundation that informs the public about depressive illness and its treatability, and promotes programs of research, education, and treatment.

- Substance Abuse and Mental Health Services Administration

[www.mentalhealth.samhsa.gov](http://www.mentalhealth.samhsa.gov)

Toll-Free: 1-800-789-2647

SAMHSA's National Mental Health Information Center provides the public information on mental health services and referrals to Federal, State, or local resources for more information and help. SAMHSA is an agency of the U.S. Department of Health and Human Services.