How to Recognize Depression and Its Related Mood and Emotional Disorders

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Depression’s Devastating Toll on the Individual

- Reduces or eliminates pleasure and joy
- Compromises and destroys relationships
- Interferes with academic success
- Impairs career development and vocational functioning
- May lead to self-injury and suicide
Depression’s Devastating Toll on Society

- Lifetime prevalence 16.2%, 12-month prevalence 6.6% (National Comorbidity Study Replication)

- Top cause of disability worldwide (bipolar disorder also in top 10)

- Leading cause of workplace absenteeism and diminished economic productivity

- Drain on limited health care resources

- Suicide: Approximately 10% of people with depression commit suicide

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Prevalence of Psychiatric Disorders

Leading study revealed the following lifetime prevalence rates:

- Mood disorders: 20.8%
  - Unipolar depression: 16.6%
  - Dysthymia: 2.5%
  - Bipolar disorder: 3.9%
- Anxiety disorders: 28.8%
- Impulse control disorders: 24.8%
- Substance abuse disorders: 14.6%

Comorbidities

- Two or more disorders: 27.7%
- Three or more disorders: 17.3%
DSM Diagnosis of Major Depressive Episode

- At least 5 of the following for 2 weeks:
- 1) Sad mood
- 2) Diminished interest or pleasure
- 3) Weight change
- 4) Sleep disturbance
- 5) Physical restlessness or slowness
- 6) Fatigue, loss of energy
- 7) Feelings of worthlessness or guilt
- 8) Trouble concentrating, indecisiveness
- 9) Morbid thoughts or suicidal ideation

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Variants of Depression

- Unipolar depression
- Bipolar depression
- Dysthymia
- Atypical depression
- Post-partum depression
- Seasonal affective disorder
- Depression due to a general medical condition
- Depression due to substance abuse

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Unipolar Versus Bipolar Depression

- Bipolar depression occurs in context of a bipolar disorder, characterized by mania (bipolar I), hypomania (bipolar II), or marked mood instability (bipolar Spectrum disorder).
- Manic symptoms include euphoria, grandiosity, racing thoughts, pressured speech, irritability, distractibility, decreased sleep need, impulsivity.
- Mania may involve psychotic symptoms.
- Manic episodes alternate with depressive episodes (“mixed episodes” also common).
- Important to distinguish unipolar and bipolar depression, as treatment approaches differ.
“Comorbidities” of Unipolar Depression

✓ Major depression is often accompanied by other disorders:

✓ Anxiety disorders

✓ Substance abuse disorders

✓ Impulse control disorders

✓ General medical conditions
Anxiety Disorders Often Accompany Depression

- Generalized anxiety disorder
- Panic disorder
- Post-traumatic stress disorder (PTSD)
- Obsessive compulsive disorder (OCD)
- Anxiety disorder not otherwise specified
59% of people with Depression also have an Anxiety Disorder.
Substance Abuse Disorders Often Accompany Depression

- Alcohol abuse or dependence
- Illicit drug abuse or dependence
- “Self-medication” is a major problem in depressed individuals
- Substance abuse can cause or exacerbate major depressive episodes

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24% of people with Depression also have a Substance Use Disorder.
Impulse Control Disorders Often Accompany Depression

- Bulimia nervosa
- Intermittent explosive disorder
- Pathological gambling
- Conduct disorder
- Antisocial personality disorder
30% of people with Depression have an Impulse Control Disorder
Need for Research on Depression

- Current treatments are often ineffective, costly, and limited by intolerable side effects
- Burden of illness remains extraordinarily high for individuals, families, employers, and society as a whole
- Novel approaches required in the 21st century
- Pharmaceutical companies continue to fund much of the research
- Novel, paradigm changing approaches are less funded but probably more promising