Understanding the Causes, Signs and Treatment Options of Major Depressive Disorder

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What You Need to Know About Major Depressive Disorder

We've all felt a bit "blue" now and then. After a fight with a friend or a significant other, we may feel down. The weather takes a turn and ruins our plans. A bad grade can feel change our outlook on the day.

But what if "feeling blue" is a bit… more?

According to the National Institute of Mental Health, major depression is one of the most common mental illnesses in the United States. They state an estimated 16.2 million adults are living with this type of depression – this equates to approximately 6.7 percent of our population.

Let's take a closer look at major depression.

What Is Major Depressive Disorder?

According to the *Diagnostic and Statistical Manual of Medical Disorders*, 4th edition, a major depressive episode is clinically defined as "A period of two weeks or longer during which there is either depressed mood or loss of interest or pleasure, and at least four other symptoms that reflect a change in functioning, such as problems with sleep, eating, energy, concentration, self-image or recurrent thoughts of death or suicide."

What Causes Major Depression Disorder?

There is no clear cause of major depression, although there are several factors. For example:

- **A change in hormones could trigger depression.** The thyroid regulates certain hormones, and when the thyroid is imbalanced, this could lead to depression. Changes in hormone due to pregnancy as well as postpartum can also lead to depression.
- **Inherited traits.** It is thought that people who have family members with depression are at a higher risk of developing depression.
- **Biological differences.** According to Mayo Clinic, those with depression appear to have differences in the makeup of their brains.
- **Brain chemistry.** Research shows that certain neurotransmitters are involved in mood stability. When these neurotransmitters are in flux, this could lead to depression.

There are also certain risk factors for the development of depression, such as:

- Having a history of traumatic events, such as sexual abuse
- Having a history of other mental health disorders

- Being on certain medications
- Certain personality traits, such as having low self-esteem
- Having a history of alcohol abuse
- Having a chronic illness

Symptoms of Major Depressive Disorder

To be diagnosed with major depression, you must have a depressed mood most of the day as well as a loss of interest in activities and relationships, for a minimum of two weeks.

However, most people have other symptoms as well. Other common major depressive disorder symptoms may include:

- Weight gain or weight loss (a change of five percent or more in a month)
- Fatigue
- Feelings of worthlessness or guilt
- An inability to concentrate
- Thoughts of suicide
- Insomnia or hypersomnia (excess sleeping)

Treatment for Major Depression Disorder

Major depression is treatable. The treatment prescribed will depend on the severity of symptoms.

Major Depressive Disorder Medications

Typically, major depressive disorder treatment begins with taking antidepressant medications such as:

- Selective serotonin reuptake inhibitors (SSRIs). SSRIs are often one of the first prescribed antidepressants because they have the fewest side effects than other antidepressants. Examples include citalopram, fluoxetine, escitalopram, paroxetine, and sertraline.
- Serotonin-norepinephrine reuptake inhibitors (SNRIs). Similar to SSRIs, examples of SNRIs include duloxetine, desvenlafaxine, and venlafaxine.
- Atypical antidepressants. These are antidepressants that don’t “fit” in any other drug category. Examples include bupropion, mirtazapine, and trazodone.
- Tricyclic antidepressants. These antidepressants are highly effective but have a worse side effect profile, so are only prescribed after an SSRI is prescribed with failure. Examples include nortriptyline, amitriptyline, doxepin, and protriptyline.
- Monoamine oxidase inhibitors (MAOIs). MAOIs are only prescribed when other medications have failed because they have serious side effects and require a strict diet. For example, someone who is prescribed MAOIs cannot consume certain cheeses, wines, and pickles. Examples include isocarboxazid, phenelzine, and tranylcypromine. A newer MAOI called selegiline is utilized as a patch and has fewer side effects than oral formulations.

Psychotherapy and ECT

Psychotherapy is typically prescribed in conjunction with oral medications. Examples include cognitive behavior therapy and interpersonal therapy. There are various goals of psychotherapy, but one of the major goals is to better cope with problems and to better adjust to crisis (although goals are individualized).

Electroconvulsive treatment (ECT) is sometimes prescribed for people who do not get better with the above treatments alone, or for people who can’t take oral medications. This treatment option uses electrical currents to the brain to impact how the neurotransmitters are affecting the brain.

Can Major Depressive Disorder be Prevented?

If you’re at risk for depression, prevention is also important. Here are some types of prevention for depression:

- Getting plenty of exercise. Not only is this great for your mental health, but it is also good for your physical health!
- Work hard to control your stress, as well as increase your resilience.
- Reach out to your support systems when you are stressed.
- Get help at the earliest possible moment. If you feel that you are beginning to feel depressed, seek help right away!