

Men and Depression

Depression is a serious but treatable medical condition - a brain disease - that can strike anyone, including men. In America alone, more than 6 million men have depression each year. Whether you're a company executive, a construction worker, a writer, a police officer, or a student; whether you are rich or poor; surrounded by loved ones or alone; you are not immune to depression. Some factors, however, such as family history, undue stress, the loss of a loved one, or serious illnesses can make you more vulnerable.

If left untreated, depression can lead to personal, family, and financial difficulties. With appropriate diagnosis and treatment, however, most people recover. The darkness disappears, hope for the future returns, and energy and interest in life becomes stronger than ever. In this article you will learn about the signs and symptoms of depression, treatments and getting help, and where to learn more.

Signs and Symptoms

Not everyone who is depressed experiences every symptom. Some people experience only a few symptoms; some people suffer many. The severity of symptoms varies among individuals and also over time. Symptoms typically include:

- Persistent sad, anxious, or 'empty' mood
- Feelings of hopelessness, pessimism
- Feelings of guilt, worthlessness, helplessness
- Loss of interest or pleasure in hobbies and activities
- Decreased energy, fatigue, being 'slowed down'
- Difficulty concentrating, remembering, making decisions
- Difficulty sleeping, early-morning awakening, or oversleeping
- Appetite and/or weight changes
- Thoughts of death or suicide; suicide attempts
- Restlessness, irritability
- Persistent physical symptoms

If these signs and symptoms describe you or a man that you care about, talk to your healthcare provider, or click this [Getting Help](http://www.nlm.nih.gov/health/topics/depression/men-and-depression/getting-help/index.shtml) (<http://www.nlm.nih.gov/health/topics/depression/men-and-depression/getting-help/index.shtml>) link for more information.

Stress and Psychological Issues

Stress, including work related stress, is a major factor in depression. Even daily hassles can collect over time and cause pressure. Major events like September 11, 2001, the death or illness of a loved one, a divorce, auto accidents, retirement or a natural disaster may also increase the likelihood of developing depression.

However, it is not only the events themselves, but how well-prepared a person is to cope with the events, that influences the likelihood of depression. People, who have low self-esteem, are overly self-critical, or who are always pessimistic seem more prone to depression by the stresses of life. Optimistic people seem to bounce back from these stresses more easily.

Another factor is a condition called 'learned helplessness', which people can develop when under high levels of stress or moderate levels for long periods of time. They become convinced that their efforts to control, change, predict or avoid the

stressful situations will not work, no matter what they do. So they give up trying and become helpless. Men who feel helpless are much more likely to develop depression.

Treatment

Depression is a treatable illness. The majority of people with depressive disorders improve when they receive appropriate treatment. The first step to getting appropriate treatment for depression is a physical examination by a physician. Certain medications as well as some medical conditions such as a viral infection, thyroid disorder, or low testosterone level can cause the same symptoms as depression, and the physician should rule out these possibilities through examination, interview, and lab tests. If no such cause of the depressive symptoms is found, the physician should do a psychological evaluation or refer the patient to a mental health professional.

A good diagnostic evaluation will include a complete history of symptoms: i.e., when they started, how long they have lasted, their severity, and whether the patient had them before and, if so, if the symptoms were treated and what treatment was given. The doctor should ask about alcohol and drug use, and if the patient has thoughts about death or suicide. Further, a history should include questions about whether other family members have had a depressive illness and, if treated, what treatments they may have received and if they were effective. Last, a diagnostic evaluation should include a mental status examination to determine if speech, thought patterns, or memory has been affected, as sometimes happens with depressive disorders.

Treatment choice will depend on the patient's diagnosis, severity of symptoms, and preference. There are a variety of treatments, including medications and short term psychotherapies (i.e., 'talk' therapies), that have proven effective for depressive disorders. In general, severe depressive illnesses, particularly those that are recurrent, will require a combination of treatments for the best outcome.

Medications

There are several types of medications used to treat depression. These include newer antidepressant medications—chiefly the selective serotonin reuptake inhibitors (SSRIs)—and older ones, the tricyclics and the monoamine oxidase inhibitors (MAOIs). The SSRIs (and other newer medications that affect neurotransmitters such as dopamine or norepinephrine) generally have fewer side effects than tricyclics. Sometimes the doctor will try a variety of antidepressants before finding the most effective medication or combination of medications for the patient. Sometimes the dosage must be increased to be effective. Although some improvements may be seen in the first couple of weeks, antidepressant medications must be taken regularly for three to four weeks (in some cases, as many as eight weeks) before the full therapeutic effect occurs.

Patients often are tempted to stop medication too soon. They may feel better and think they no longer need the medication, or they may think it isn't helping at all. It is important to keep taking medication until it has a chance to work, though side effects may appear before antidepressant activity does. Once the person is feeling better, it is important to continue the medication for at least four to nine months to prevent a relapse into depression. Some medications must be stopped gradually to give the body time to adjust, and many can produce withdrawal symptoms if discontinued abruptly. Therefore, you should never discontinue your medication without first talking to your doctor. For individuals with bipolar disorder and those with chronic or recurrent major depression, medication may have to be maintained indefinitely.

What you can do about it

By learning all you can about depression, you can be in a better position to take care of yourself both physically and emotionally. Exercise, good nutrition and learning more positive ways of thinking can all help to prevent and/or minimize depression. The Mayo Clinic offers additional information: <http://www.mayoclinic.com/health/male-depression/MC00041>.

Source: National Institutes of Health