

Depression

Fact Sheet

What is Depression?

Major depressive disorder (simply known as clinical depression or just depression) is a mental disorder that causes a persistent feeling of sadness and loss of interest¹. Depression is characterized by extended periods of low mood. It can lead to a variety of emotional and physical problems and can negatively affect a person's personal life as well as sleeping, eating habits, and general health decrease a person's ability to function at work and at home.

Key facts



Depression is a common illness worldwide, with more than 264 million people affected².



Major depression is one of the most common mental disorders with a 1-year prevalence of 7.1% with 2/3 having severe functional impairment but with only 1/3 seeking help³.



Major depression reduces life expectancy by about 10 years.

History

The term depression derives from the Latin verb *deprimere* ("to press down"). The Greek physician Hippocrates first described a syndrome of melancholia ("black bile") characterized by all "fears and despondencies, if they last a long time"⁴. Depression became a synonym of melancholia by the end of the 19th century, probably thanks to the German psychiatrist Emil Kraepelin who was the first to use it as a global term. The denomination "Major depressive disorder" was introduced in the mid-1970s and was incorporated into the Diagnostic and Statistical Manual of Mental Disorders (DSM)-III in 1980.

Symptoms

Not everyone who is depressed experiences every symptom of depression. In many cases, depression symptoms are severe enough to cause problems in daily activities, such as work, school, social activities or relationships. These symptoms may include:



Psychological symptoms

Persistent feeling of sadness; irritability; feelings of hopelessness or frustration; recurrent thoughts of death, suicide or suicide attempts.



Physical symptoms

Decreased energy or fatigue; slowed moving or talking; feeling restless or having trouble sitting still; difficulty concentrating, remembering or making decisions; difficulty sleeping or oversleeping; reduced appetite or weight changes.



Social symptoms

Loss of interest or pleasure in hobbies, activities or pleasure in most or all normal activities.

In children and older adults, depression symptoms may slightly change. While in younger children, symptoms of depression may affect their mood and emotional well-being (including sadness, irritability, clinginess, worry, etc.), among adults it's more common to find physical pain, fatigue, loss of appetite, sleep problems or loss of interest in sex. Older men more often experience suicidal thinking.

People can also be affected by Dysthymic disorder, also called dysthymia, which is characterized by long-term (two years or longer) but less severe symptoms that may not disable a person but can prevent one from functioning normally or feeling well. People with dysthymia may also experience one or more episodes of major depression during their lifetime.

Known causes of Depression

The cause of major depressive disorder is unknown. It is understood through brain-imaging technologies that the brains of people who have depression look different to those of people without depression, and that neurotransmitters— chemicals used for communication in the brain— appear to be out of balance. However, it is not known why this occurs. The biopsychosocial model proposes that it can occur for a variety of reasons (biological, psychological and social) and it has many different triggers such as childhood trauma, traumatic events, illness, bereavements, etc. Depression is more common in people who have cases of depression in the family. Some studies show that 40% of individual differences in risk for major depressive disorder can be explained by genetic factors⁵. If one identical twin has depression, the other has a 70 percent chance of having the illness sometime in life⁶.

Diagnosis

After experiencing symptoms of depression every day for more than 2 weeks without improvement, it is important to talk with a suitably trained general practitioner, a psychiatrist or psychologist to receive diagnostic assessment. The doctor may determine a diagnosis of depression based on physical exams, lab tests, psychiatric evaluations or using the criteria for depression listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5).

Patients are assessed using a questionnaire that forms part of a recognised rating scale. There are a wide range of scales; the two most frequently used scales are the:

- Diagnostic and Statistical Manual Fourth Edition (DSM-IV) classification
- International Statistical Classification of Diseases and Related Health Problems – 10th edition (ICD-10): Mental and Behavioural Disorders.

Treatment

Treatment options are pharmacotherapy, psychotherapy and neuromodulation.



Medication

Brain chemistry may contribute to an individual's depression and different types of antidepressants modifying the way the brain uses certain chemicals could be prescribed by a doctor. Antidepressants may produce some improvement within the first week or two of use, but they usually take 2 to 4 weeks to work and full benefits may not be seen for two to three months. Several different medication types or combinations could be needed to improve symptoms, with manageable side effects. Response rates (50% improvement) are typically around 50-60% after 8 weeks, and multiple strategies do exist for those not responding (dose optimization, combination treatment, switching strategies, augmentation strategies). The need for more different treatment attempts to give a satisfactory outcome results in a higher chance of relapse or recurrence. Recently, new agents are in development targeting other neurotransmitters/ receptors (e.g. NMDA) or targeting inflammatory mechanisms. Recently one of them (e.g. esketamine) got approval and shows a much more rapid onset of action than traditional antidepressants but is indicated for more difficult to treat depressions due to cost and side effect profile.



Psychotherapy

Different forms of psychotherapy (also called "talk therapy") have been proven to be equally effective and the combination of antidepressants and psychotherapy gives better results than the one or the other separately⁷. It is used for treatment of mild depression and it can be delivered to individuals, groups, or families by mental health professionals.



Electroconvulsive Therapy (ECT)

Neuromodulation has also a place: repetitive transcranial magnetic stimulation is effective for milder forms of depression (but with few data on long term efficacy), electroconvulsive therapy is still the most powerful antidepressant treatment and vagal nerve stimulation is promising for the long-term treatment of difficult to treat depression.

Further information

European Depression Association



www.eurodepressionday.eu

GAMIAN - Europe



www.gamian.eu

REFERENCES

¹ <https://www.nimh.nih.gov/health/topics/depression/index.shtml>

² GBD 2017 Disease and Injury Incidence and Prevalence Collaborators. (2018). Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990–2017: a systematic analysis for the Global Burden of Disease Study 2017. The Lancet. DOI.

³ Wang et al. Use of mental health services for anxiety, mood, and substance disorders in 17 countries in the WHO world mental health surveys. The Lancet. 2007; 370(9590):841-50.

⁴ Hippocrates, Aphorisms, Section 6.23

⁵ Sullivan PF, Neale MC, Kendler KS (October 2000). "Genetic epidemiology of major depression: review and meta-analysis". The American Journal of Psychiatry. 157 (10): 1552–62

⁶ American Psychiatry Association, <https://www.psychiatry.org/patients-families/depression/what-is-depression>

⁷ Gartlehner, Gerald; Wagner, Gernot; Matyas, Nina; Titscher, Viktoria; Greimel, Judith; Lux, Linda; Gaynes, Bradley N; Viswanathan, Meera; Patel, Sheila (2017).



ACKNOWLEDGEMENTS

We would like to express our very great appreciation to Prof. Koen Demyttenaere for her valuable and constructive suggestions during the development of this fact sheet.