What is a depressive disorder?
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The word ‘depression’ is commonly used to describe the feelings of sadness that all of us experience at times in our lives. It is also a term used to describe a number of diagnosable depressive disorders. Because feelings of depression are so common, it is important to understand the difference between unhappiness and sadness in daily life and the symptoms of a depressive disorder.

When faced with stress, such as the loss of a loved one, relationship breakdown or great disappointment or frustration, most people will feel unhappy or sad. These are emotional reactions that are appropriate to the situation and will usually last only a limited time. These reactions are not regarded as depressive disorder, but are part of everyday life.

Depressive disorders are a group of illnesses characterised by excessive or long-term depressed mood and loss of interest in activities that used to be enjoyable. The symptoms can severely disrupt the person’s life.

Depressive disorders are common and around one in five people will experience depressive disorder at some time during their lives.

Depressive disorders are serious and distressing illnesses with real risks to the person’s life and well-being. Professional assessment and treatment is necessary. In severe instances, hospitalisation may be required initially. Fortunately, treatment of depression is usually very effective.

What are the main types of depressive disorder?

A number of different mental illnesses involve depression.

Major depressive disorder

This is the most commonly diagnosed depressive disorder. A person with major depressive disorder becomes very low spirited and loses their enjoyment of life. They lack concentration and energy and have changes in their appetite and sleep patterns. Feelings of guilt are also common. Their feelings of hopelessness and despair can lead to thoughts of suicide.

Major depressive disorder can come on without apparent cause, and can develop in people who have coped well with life, who are good at their work
and happy in their family and social relationships. It can also be triggered by a distressing event that the person is unable to deal with.

When symptoms of major depressive disorder are fewer and milder, but last longer (for more than two years), the illness is called dysthymic disorder.

**Adjustment disorder with depressed mood**

People with this illness are reacting to a distressing situation in their life, such as the failure of a close relationship or loss of a job, but to a greater degree than is usual.

The feelings of depression are very intense and often include anxiety, poor sleep and appetite changes. The time the symptoms last may vary from weeks to years. People with this type of depression often require treatment to help them find ways to cope with the event and overcome their symptoms.

**Post-natal depression**

The so-called ‘baby blues’ affect about half of all new mothers. They feel mildly depressed, anxious, tense or unwell, and may have trouble sleeping even though they are tired most of the time. This type of depression may last only hours or a few days, then disappear.

However, for about 10 percent of mothers this feeling of sadness develops into a serious disorder called post-natal depression. Mothers with this illness find it increasingly difficult to cope with the demands of everyday life.

They can experience anxiety, fear, despondency, sadness and extreme tiredness. Some mothers have panic attacks or become tense and irritable. There may be a change in appetite and sleep patterns.

A severe, but rare, form of post-natal depression is called puerperal psychosis. The woman is unable to cope with her everyday life and can be disturbed in her thinking and behaviour.

It is essential for mother and child that post-natal depression is treated, and very effective treatments are available.

**Bipolar mood disorder**

A person with bipolar mood disorder (previously called manic depression) experiences depressive episodes alternating with periods of mania involving elation, over-activity, irritability, rapid speech, and recklessness. In more serious instances, the person can also have delusions.

For more information, read the brochure *What is bipolar mood disorder?*
Co-occurring mental health problems

People with depression very often experience symptoms of anxiety. For more information on anxiety, read the brochure *What is an anxiety disorder?*

Harmful alcohol and other drug use often co-occurs with depression. This makes treatment more complex, and effectively managing alcohol and other drug use is important.

Risk of suicide is also heightened for people with depression.

What causes depressive disorders?

Often there are many interrelated factors associated with depression.

Genetic factors

It is well established that the tendency to develop depression runs in families. This is similar to a predisposition to other illnesses, such as diabetes and heart disease.

Biochemical factors

Depressive disorders are thought to be due, in part, to a chemical imbalance in the brain. Anti-depressant medication treats this imbalance.

Stress

Stress is associated with the development of depressive disorders, particularly personal tragedies or disasters.

Depressive disorders are more common at certain stages of life that involve major life transitions, such as childbirth, menopause and bereavement. Consequently, it is more common in young adults, women, older adults, and people with physical health problems.

Temperament

People with certain temperaments are more prone to depressive symptoms.

Depression commonly occurs in people who are highly anxious, sensitive, emotional, and react strongly to and are easily upset by events in their lives.

People who are perfectionists and self-critical, and who set high standards for themselves and others, are vulnerable to depression. Those who are very dependent on other people are also susceptible to depression if they are let down.

In contrast, people who are optimistic and who practice thinking positive thoughts tend to be protected from depression.
Alcohol and other drug use

Harmful alcohol and other drug use makes people highly susceptible to depression. This also contributes to a high risk of suicide for people with depressive disorders.

What treatment is available?

Depressive disorders can be very effectively treated.

People experiencing feelings of sadness that have persisted for a long time, or that are affecting their lives to a great extent, should contact their family doctor or community health centre.

Treatment will depend on each person’s symptoms, but will include one or more of the following.

- Psychological interventions, such as cognitive behavioural therapy (CBT), are aimed at changing patterns of thinking, behaviours and beliefs that are related to depression.
- Interpersonal therapies help people to understand the effect of interpersonal relationships on their emotions.
- Anti-depressant medications relieve depressed feelings, restore normal sleep patterns and appetite, and reduce anxiety. Unlike tranquillisers, anti-depressant medications are not addictive. They slowly return the balance of neurotransmitters in the brain, taking one to four weeks to achieve their positive effects.
- Specific medications help to manage mood swings, such as for bipolar mood disorder.
- Lifestyle changes, such as physical exercise and reducing harmful alcohol and other drug use, assist people to recover from depression.
- For some very severe forms of depression, electroconvulsive therapy (ECT), or shock treatment as it is sometimes misnamed, is a safe and effective treatment. It can be life saving for people at high risk of suicide or who, because of the severity of their illness have stopped eating or drinking, would die as a result.

The family and friends of people with a depressive disorder can often feel confused and distressed. Support and education, as well as better community understanding, are an important part of treatment.
Where to go for help

• Your general practitioner.
• Your community health centre.
• Your community mental health centre.

For information on services, check the Community Help and Welfare Services and 24-hour emergency numbers in your local telephone directory.

For immediate counselling assistance, contact Lifeline on 13 11 14. Lifeline can also supply you with contacts, further information and help.

More information is available at:

www.beyondblue.org.au
www.blackdoginstitute.org.au
www.crufad.com
www.depressionet.com.au
www.ranzcp.org
www.reachout.com.au
www.sane.org

About this brochure

This brochure is part of a series on mental illness funded by the Australian Government under the National Mental Health Strategy.

Other brochures in this series include:

• What is mental illness?
• What is an anxiety disorder?
• What is bipolar mood disorder?
• What is an eating disorder?
• What is a personality disorder?
• What is schizophrenia?

Free copies of all brochures are available from Mental Health and Workforce Division of the Australian Government Department of Health and Ageing:

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