

What Does Depression Look Like?

We use the word “depressed” all the time... but what exactly does that mean? Does it mean we feel “down” or “blue”? Does it mean we can’t get up out of bed because we can’t stand to face the day? Does it mean we feel like we would rather be dead than alive? Does it mean that we may be cranky and irritable for a period of time? Does it mean that we sleep all the time or cannot sleep at all? The answer, of course, is yes – to all of the above. Which, I’m sure, does not help in understanding what depression looks like at all!

The important thing to remember is that, like all disorders, depression can show itself in different ways. In addition, like all disorders, depression exists along a continuum. This means that some people may experience a “lighter” form of depression (clinically known as dysthymia), whereas others may experience very severe depression (clinically known as major depression).

To complicate things even further, depression is often mixed with other mood states, such as mania. When this is the case, it makes it difficult to determine what exactly is wrong with a person simply by observing their behavior, unless you have been trained to do so.

My purpose in writing this is to try to simplify the different types of depression and other mood disorders. Even more importantly, I hope to make it easier for you to be able to tell *by observing a person’s behavior* what might be going on with that person diagnostically.

Let’s begin with “Major Depression”:

Symptoms of Major Depression

If a person is experiencing a major depression (not mixed with anything else), the most ***obvious and important sign is the loss of interest or pleasure in almost all activities for at least two weeks or, with adolescents, you may see this displayed as irritability; in other words, with an adolescent, you may see them being irritable most of the time for at least two weeks***

- the person may say they feel:

- depressed
- sad
- hopeless
- discouraged
- down in the dumps

- **they may say that:**
 - they have no feelings (although you can clearly see the sadness in their face or they look as though they may cry)
 - are feeling *anxious* (it is important not to overlook anxiety as a sign of depression...)
- **they may talk about bodily complaints rather than sadness**
- **they may be irritable (this is especially true with teens and can be expressed more so than sadness; this is different from a “spoiled child” response pattern of irritability when frustrated)**
 - frequently angry
 - sudden outbursts
 - blaming others
 - exaggerated frustration over minor events
- **a person who is experiencing major depression will almost always loss interest in things they used to enjoy**
 - they may say they “don’t care anymore”
 - they may give up interest in hobbies
 - family or friends may notice that the person has less interest in things recently
 - there is sometimes a loss of interest in sexual desire

In addition, if a person is experiencing a “major depression”, they will begin to show (or if they have already been showing this, it will worsen), some of the following:

- ***changes* in appetite or weight**
 - loss or gain
- ***changes* in sleep patterns**
 - all of a sudden can’t get to sleep
 - all of a sudden they are sleeping a lot
 - all of a sudden they start waking up a lot in the night
 - all of a sudden they wake up early in the morning
- ***changes* in activity level**
 - all of a sudden the person lays around a lot
 - all of a sudden the person can hardly sit still
 - the person may do things like:
 - wring their hands
 - pick their skin

- rub their clothes
- the person may:
 - talk slowly
 - move slowly
 - pause before responding
 - speak very quietly
 - have decreased energy, tiredness or fatigue
 - the person may feel tired even without physical exertion
 - even the smallest tasks seem to take a lot of effort
- normal events can take a long time to do

- **feelings of worthlessness or guilt**
 - the person may be preoccupied with minor past failings
 - the worthlessness or guilt may be unrealistic or unfounded
 - the worthlessness or guilt may be of delusional proportions (the person may feel like they're responsible for world hunger)
 - the person may blame themselves for being sick

- **difficulty thinking, concentrating, or making decisions**
 - the person's memory may appear bad
 - the person may be easily distracted (may all of a sudden not be able to concentrate in school and have grades drop)

- **recurrent (frequent) thoughts of death**

- **recurrent (frequent) thoughts of suicidal ideation, plans, or attempts**

- **the person must also experience some serious problems in their social, school, occupational, or other important area of functioning (they may be able to continue to function, but it would be obvious that they were having trouble just "keeping on keeping on")**

Symptoms of Major Depression

If a person is experiencing a major depression (not mixed with anything else), the most ***obvious and important sign is the loss of interest or pleasure in almost all activities for at least two weeks or, with adolescents, you may see this displayed as irritability; in other words, with an adolescent, you may see them being irritable most of the time for at least two weeks***

- **the person may say they feel:**
 - depressed, sad, hopeless, discouraged, down in the dumps
 - they have no feelings (although you can clearly see the sadness in their face or they look as though they may cry)
 - are feeling *anxious* (it is important not to overlook anxiety as a sign of depression...)
- **they may talk about bodily complaints rather than sadness**
- **they may be irritable (this is especially true with teens and can be expressed more so than sadness; this is different from a “spoiled child” response pattern of irritability when frustrated)**
- **a person who is experiencing major depression will almost always loss interest in things they used to enjoy**

In addition, if a person is experiencing a “major depression”, they will begin to show (or if they have already been showing this, it will worsen), some of the following:

- ***changes* in appetite or weight**
- ***changes* in sleep patterns**
- ***changes* in activity level**
- **feelings of worthlessness or guilt**
- **difficulty thinking, concentrating, or making decisions**
- **recurrent (frequent) thoughts of death**
- **recurrent (frequent) thoughts of suicidal ideation, plans, or attempts**
- **the person must also experience some serious problems in their social, school, occupational, or other important area of functioning (they may be able to continue to function, but it would be obvious that they were having trouble just “keeping on keeping on”)**

Dysthymia Disorder

Dysthymia is different from Major Depression in a number of ways. It can be thought of somewhat like a “low grade fever of depression”, meaning that it’s like having some symptoms of depression all the time. Technically, the definition of dysthymia is *“a chronically depressed mood that occurs for most of the day more days than not for at least 2 years”*. **Remember, in children and adolescents, the mood may be irritable rather than depressed**, and dysthymia may be diagnosed after only one year in children and adolescents.

- **people may say they are “down in the dumps”**
- **they must also show two of following:**
 - **poor appetite or overeating**
 - **insomnia (not sleeping) or hypersomnia (sleeping a lot)**
 - **low energy or fatigue**
 - **low self-esteem**
 - **poor concentration or ability to make decisions**
 - **feelings of hopelessness**
 - **there may be persistent low interest in activities and a great deal of self-criticism, which seems like part of “who they are”**

There are a number of specific things that need to be taken into account before giving a person a diagnosis of dysthymia. For many of the residents of Three Springs, what seems like a dysthymic condition may be part of some other diagnosis and may relent when the other symptoms are treated. However, a resident may truly have dysthymia and it may not even be recognized as such until other issues have been addressed. It would not be an uncommon diagnosis for many residents. However, most often it would not require medication.

Mania and Hypomania and Bi-Polar Disorders

In order to keep things as simple as possible, we won't get concerned with the specific differences between mania and hypomania because for your purposes, it doesn't make a difference. Suffice it to say that they are very much the same thing except for the amount of time during which one is in that state of mind.

You will frequently see that a resident of Three Springs is diagnosed with Bi-Polar disorder. What this means is that the resident is experiencing fluctuating moods of depression and mania (or hypomania). The amount of time that occurs between a depressed mood and a manic mood varies from person to person. The thing that is important for you to be able to do is to recognize the symptoms of depression, of mania, and of "cycling" (going between the two mood states) in a person.

Mania and Hypomania

When a person is manic or hypomanic, they will:

- for a period of time, show a distinct period during which they are abnormally and persistently elevated, expansive or irritable
 - this means that the person is unusually euphoric, happy, cheerful, or high
 - their "elevated" mood may initially be "contagious" and others who don't know the person might find them enjoyable, but anyone who knows the person knows that this is not typical behavior
 - the "expansive" quality of the mood is shown by unending enthusiasm for interpersonal, sexual, or occupational interactions
 - the "irritable" quality may be predominant, especially when the person doesn't get his/her way
 - the person may show "lability" of mood, meaning they may alternate between being very happy and very irritable
- Three additional symptoms from the following list must also accompany the mood disturbance (however, if the mood is irritable, then at least four criteria need to be present):
 - **Inflated self-esteem or grandiosity**
 - this can range from uncritical self-confidence to marked grandiosity, and may reach delusional proportions
 - people may give advice about things they don't really know anything about
 - in spite of not having any particular expertise or talent, someone may start to write a book about something or try to compose music
 - a grandiose delusion would be something like this person thinking they have a special relationship with God or a rock star or political figure

- **Decreased need for sleep**
 - there is almost always a decreased need for sleep
 - the person may wake up hours earlier than usual
 - they may go for days without sleep and not feel tired

- **Pressure of speech**
 - the person usually talks loudly, rapidly, and is difficult to interrupt
 - they may talk nonstop, sometimes for hours on end, and don't think of whether or not someone else wishes to speak
 - their speech is sometimes characterized by joking, punning, and funny things that don't mean anything
 - they may become very theatrical, being very dramatic and singing
 - **if the person's mood is irritable, their speech may be marked by complaints, hostile comments, and angry tirades**

- **Flight of ideas**
 - the person's thoughts may "race"; sometimes it seems as if their thoughts come faster than they can speak
 - sometimes these people state that it is like watching two or three television programs at one time
 - sometimes the person will change topics many times during one conversation

- **Distractibility**
 - this means that the person can't pay attention without "external stimuli" interfering – things like background noise or a person's tie or the furniture in the room
 - the person has a hard time staying on track with a conversation

- **Increased involvement in goal-directed activities or psychomotor agitation**
 - this usually involves excessive planning of and participation in many activities
 - for example, a person may want to build a new dog house, start a new relationship, write new standards, and agree to be in charge of everything all at the same time
 - the person may be much more social than previously, making it a point to "buddy up" with people they didn't pay much attention to in the past and they will not care if they are annoying the other people

- **Excessive involvement in pleasurable activities with a high potential for painful consequences**
 - the person often engages in promiscuous sexual behavior or goes on spending sprees, even if they do not have the money to spend