

# Depression

By Paul Penner

## What about depression?

**D**id you know that it has been estimated that 10% of Americans are depressed at any given time? That would be about 3 million Canadians and about 30 million Americans. Lots of people are feeling less than 100%. Sometimes we don't even know we are depressed – and even more importantly, many often don't know what they can do about it.

Often when I go into a medical office I peruse through the literature. It's a curiosity thing. I like to see how conditions I am confronted with in *counselling, are treated by other disciplines. Depression is profiled in literature as a condition for which there is help. Rightly so! Many people who suffer from depression will be able to get help. An important aspect in getting that help though is to understand the underlying factors which sustain one's symptoms of depression. Since depression can have a biochemical source it is important to have an assessment, which can assist in determining the dynamics behind the symptoms being experienced. Whether there is a biochemical basis to the mood, or a psychological root, whether the stressors are reversible or not, makes a big difference to the intervention strategy.*

If stressors can be eliminated, why settle for only a symptom management approach? Different stressors require different interventions. And sometimes there are more than one stressor source contributing to depression. Each situation has to be evaluated on its own merit.

Sometimes people have asked me if victorious Christians should ever get depressed or if that is an indication of sin? What about Satan? Is medication always helpful? Is it sometimes harmful? Are there side effects? Stay tuned, I will be writing more about this in the next issue.

## Understanding depression

**P**eople have asked me if victorious Christians should ever get depressed. Is depression an indicator of sin? Is depression from Satan? Is medication always a helpful option? Is it sometimes harmful? Are there side effects? In the last PCC Communique I ended the article on depression with the above questions.

In limited space I will attempt to add some helpful insights about depression. There are four different stressor sources that must be assessed when seeking to understand depression: **intra-personal stressors** (*ie. psychological component*), **interpersonal stressors** (*ie primary relationship type of sociological factors*), **biochemical stressors** (*representing the medical/biophysical aspects*), and what I refer to as **geophysical stressors** (*which are secondary system and environmental factors*). These stressors sources are important because they fuel symptoms.

If we are going to really help anyone experiencing unwanted symptoms of depression we must be able to identify the sources sustaining them. Focusing on symptoms alone when options exist to correct underlying sources sustaining them is the difference between complete recovery and temporary relief – between coffee shop advice and somebody who is informed.

People often enough resign to temporary symptom relief because they don't understand how to alter the cause which sustains the effect. And would be well-wishers offer possible reasons why one might be depressed: maybe it's Satan? Or, it's all in your head; Or, its because of sin; or maybe you're not well; or maybe you need medication, or...!? Such guesses are like throwing darts to hit a dart board bull's eye while blindfolded. Sometimes they are right, sometimes, often, they are not.

It is good to consult a practitioner who is trained with a broad knowledge base that can assess the full spectrum of stressors operating on your life and not just offer symptom relief especially when problem correction is an option. So is there a place for medication? Yes, but not as the primary intervention strategy when problem correction of the cause is an option. Symptom management medication should become a primary method of intervention only when a condition is not reversible or when someone is at risk of destructive reaction to symptoms (ie. suicidal thoughts). Otherwise medication needs to be combined with psychotherapy along with lifestyle changes.

The key dynamics in non-medically sustained symptoms of depression are losses from which recovery has not occurred (ie transfer of dependence to another viable ways of meeting needs. Bio-chemical depression, which accounts for about 10% of depressions, is a bit more involved. Basically neurotransmitters such as serotonin have become depleted because demand has exceeded supply. This happens when levels of adrenalin (due to excessive negative emotional stressors) remain chronically elevated effecting the depletion of serotonin and other resources faster than the body is been able to produce them. **Un-recovered personal losses and / or unresolved personal threats fuelling emotional distress that deplete neurotransmitters are the predisposing elements which over time contribute to clinical depression.**

*While we could talk about other conditions such as post-adrenalin fatigue, thyroid malfunction, post-partum depression – they all have a common aspect to them – namely, depleted neurotransmitters or resources that replenish them. Elevated adrenalin, over time, depletes body resources such as serotonin. It is often at the point of serotonin depletion and/or post-adrenalin fatigue that the emotional shock absorbers are no longer sufficient and anti-depressants may be recommended by your doctor. And while anti-depressants may inhibit re-absorption of serotonin prolonging it's active value in the body – it doesn't actually add serotonin into the body. False dependency can be formed when this isn't understood. The lifestyle stressors sustaining elevated adrenalin levels in the body and down the road affecting the depletion of needed body chemicals still needs to be addressed through appropriate outlook and lifestyle changes. **To this end informed counsel and wise wellness choices plus the reversal of depleted resources are needed to restore the body and revive real hope for legitimate needs to be met. So take heart there is hope!***