

Published based on [How Depression Can Be Treated](#)

How Depression Can Be Treated

While it is perfectly normal to feel sad or down in response to a lost job, a disappointment or other difficult moment in your life, when feelings of sadness or being down last for several weeks and start to interfere with everyday life, it may be [depression](#). Depression is a real psychological disease or syndrome and depression has been estimated to affect millions of people worldwide. Depression symptoms often vary from person to person, but people who are feeling down for more than several weeks, may be clinically depressed.

Learning about the signs, symptoms and causes is a first step toward overcoming depression. Depression can be overwhelming and will ultimately interfere with daily life, interfering with work, study, sleeping, eating and the ability to enjoy activities. In addition to prolonged sadness, here are some of **the major symptoms of (clinical) depression**:

- Feelings of hopelessness/guilt
- Persistent headaches, digestive problems, aches or pains
- Trouble with concentration or difficulties with memory
- Changes in sleep: either insomnia or over-sleeping. The majority of patients with depression suffer from sleep difficulties
- Low or sad mood (lasting more than several weeks)
- Feelings of anger or irritable mood
- In some patients: Thoughts of suicide or suicide attempts
- Despair/ feelings of helplessness
- Changes in appetite: over-eating or not eating enough
- Loss of interest in once pleasurable activities
- Grief
- Fatigue / Lack of energy

Depression may be caused by a variety of factors, including environmental factors, malnutrition, genetic background, neurotransmitter malfunctioning, trauma and chronic stress. Depression is frequently treated by a combination of psychotherapy and the use of antidepressant drugs. Popular treatments of the past such as electroconvulsant shock therapy are rarely used anymore.

The theory behind depression focuses almost entirely on an imbalance of neurotransmitters in the brain. Neurotransmitters are the molecules that make it possible for nerve cells to relay information between them. The main neurotransmitters are the monoamines serotonin, dopamine and norepinephrin.

Most modern medications prescribed for depression work by increasing the availability of the monoamine neurotransmitters, norepinephrine and serotonin in the synapse (the small space between nerve cells). Some antidepressants may also increase the monoamine dopamine. This causes the monoamines to stay in the synapse longer, prolonging the signal transfer between nerve cells.

While the [monoamine theory of depression](#) has been the focus of many research studies, the theory has also been criticized. This is because some antidepressant medications work well in depressed patients despite the fact that they do not influence the monoamine pathway. In addition, studies that aimed to deplete monoamine neurotransmitters in test subjects (depressed patients and non-depressed controls) did not result in depression in healthy subjects and did not increase depression symptoms in depressed patients.

Antidepressant medications being prescribed today are considered a lot safer than their precursors (they have less dangerous side effects). In the past, depression was often treated with tricyclic compounds or with monoamine oxidase inhibitors (monoamine oxidases are enzymes that break down monoamines, such as norepinephrin and serotonin). Patients taking monoamine inhibitor drugs need to follow a strict diet low in tyramine and histamine in order to prevent a potential hypertensive crisis (which can be deadly). Fermented foods are high in histamine and tyramine.

Although antidepressant treatments being used today have fewer side effects than drugs used in the past, most people are still uncomfortable with side effects. One of the major side effects is that serotonin and norepinephrin

re-uptake inhibitors can increase suicidal thoughts in teenagers and young adults. In 2004, the FDA recommended that manufacturers of antidepressants include the so-called "black-box" warning about this risk.

Patients taking antidepressant drugs also worry about potential **sexual side effects**. This is a major issue with many antidepressant drugs (drugs such as nefazodone and bupropion have fewer sexual side-effects). While depressed patients usually have lower libido, they consider sexual side effects of antidepressants to be a hurdle in their therapy. Often just lowering the dose, taking the drug right before sleeping or switching to a different antidepressant may provide relief.

In addition to psychotherapy and antidepressant drugs, [natural antidepressant treatments](#) have gained popularity in recent years. Natural herbal treatments for depression often contain extracts of **St. John's Wort** (*Hypericum perforatum*). St. John's wort is used as an alternative treatment for depression and is considered to have fewer side effects than common antidepressant drugs. St. John's wort cannot be taken together with antidepressant drugs, since St. John's wort also raises serotonin levels. At present, it is still unclear how St. John's wort raises serotonin levels.

Depression is a real disease with psychological and physiological symptoms and can be treated successfully. If you think you may have depression, talk to someone who can help or to your doctor with whom you can discuss the variety of treatment options that are available. With the right treatment, you can overcome depression and gain control over your life.

You can also find this article published on [How Depression Can Be Treated](#), and on the tag pages [depression](#).