THE EMOTIONAL SEESAW

Everyone has moments of feeling low or blue. What is the difference between one of those moments and the kind of depression that requires professional intervention? As many as one in five will suffer from depression during their lifetime. This article describes depression and how to treat it.

Imagine your emotional state as a kind of seesaw. When you are on top, you feel great, the view is fantastic, and even if it’s scary you know you have a grip on things. When you drop down, the view is dramatically different, but you know that through your own efforts you can get back on top. Without a partner, however, you can push yourself up only so far. If the seesaw represents your mood shifts, your brain chemicals are your partner. When your brain chemicals are functioning properly, you feel fine or better. When certain chemicals drop in production (sometimes with no known cause; other times the result of a painful event, such as a significant loss), the mood seesaw takes you down. You can still push yourself up, but it takes more work. If your brain chemistry is altered significantly enough, you feel abandoned on the mood seesaw, without a partner to help you reach an emotional high.

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As our mood darkens, our behavior changes. We struggle to meet our professional and personal obligations, and we let more and more go undone. We procrastinate, get irritable, and can’t concentrate. We may feel fatigued all day, no matter how much sleep we are getting. Nothing is fun anymore. We may feel worthless and guilty. We may feel nothing but a sort of numbness. We may sit and stare at the documents in front of us without really comprehending what they mean, or we may play computer games instead of working. We may use mood-altering substances (such as alcohol, sleeping aids, or chocolate) or engage in mood-altering behaviors (such as looking at pornography, shopping, or gambling).

As your depression deepens, you may experience changes in your appetite (not hungry or always hungry) and your sleep patterns (can’t fall asleep or wake up in the middle of the night and can’t go back to sleep). You may think that life is meaningless and that “they” would be better off without you. You may decide that death is the only way out and fantasize about some sort of accident that takes you out of your misery. You may even begin to actively plan your death.

THERAPY AND ANTIDEPRESSANTS

The more of these symptoms you exhibit, the more likely that your depression requires professional intervention. Even though depression makes any new task seem impossible, it is vital that you reach out for help as soon as possible. Studies indicate that the longer the depression lasts, and the deeper the depressive mood, the more likely it is that future episodes of depression will happen. Research has shown that therapy or a combination of medication and therapy works best to treat depression.

You have many options in choosing a
Antidepressants usually must build up in your system to have a noticeable effect. Some people must take the medication for two, three, or even four weeks before noticing any real change. In fact, the people around you may notice the difference first. Taking your medication consistently is vital. Stopping the medication just because you are feeling better can cause a rebound into deeper and longer depression. It is crucial that you continue the medication until you and your doctor agree that your episode of depression is over.

If you feel depressed or are concerned about someone you think suffers from depression, call one of the OAAP attorney counselors at 503-226-1057 or 1-800-321-6227.

Depression is not a weakness – it is a treatable disease. Help yourself and others by reaching out for assistance.

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