PSYCHIATRY

Depression
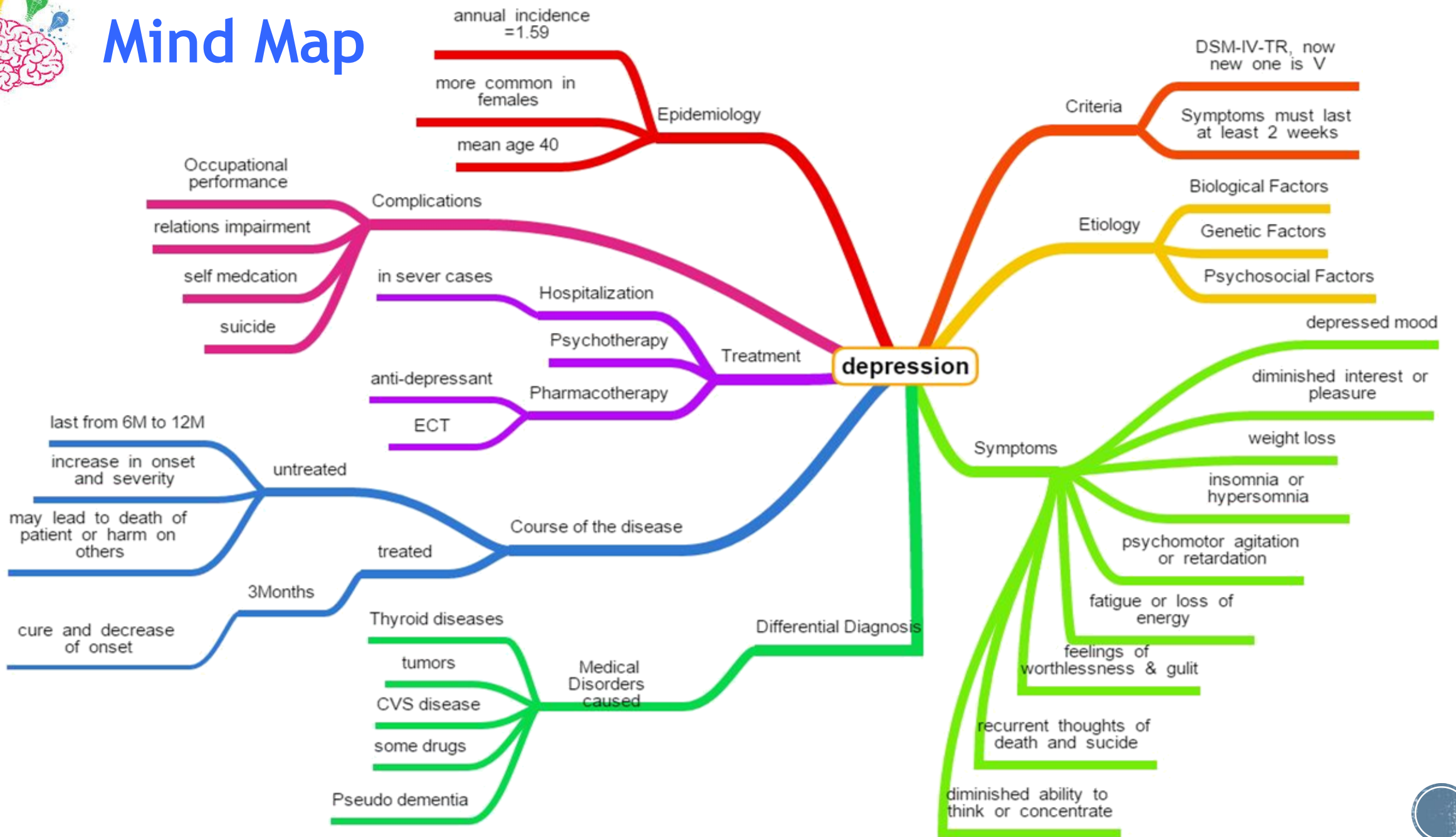
Color Index:
- Important
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Mind Map

depression

Epidemiology
- annual incidence =1.59
- more common in females
- mean age 40

Criteria
- DSM-IV-TR, now new one is V
- Symptoms must last at least 2 weeks

Etiology
- Biological Factors
- Genetic Factors
- Psychosocial Factors

Symptoms
- depressed mood
- diminished interest or pleasure
- weight loss
- insomnia or hypersomnia
- psychomotor agitation or retardation
- fatigue or loss of energy
- feelings of worthlessness & gulit
- recurrent thoughts of death and sucide
- diminished ability to think or concentrate

Complications
- Occupational performance
- relations impairment
- self medcation
- suicide

Treatment
- Hospitalization — in sever cases
- Psychotherapy
- Pharmacotherapy — anti-depressant
- ECT

Course of the disease
- untreated
  - last from 6M to 12M
  - increase in onset and severity
  - may lead to death of patient or harm on others
- treated — 3Months
  - cure and decrease of onset

Differential Diagnosis
- Medical Disorders caused
  - Thyroid diseases
  - tumors
  - CVS disease
  - some drugs
  - Pseudo dementia

Definitions :

- **Mood** is a pervasive and sustained feeling tone that is experienced internally and that influences a person's behavior and perception of the world.
- **Affect** is the external expression of mood "What people see in the patient".
- Healthy persons experience a wide range of moods and have an equally large repertoire of affective expressions; they feel in control of their moods and affects.
- **Normal mood**: Euthymia. "Eu = Normal, Thymia= Mood"
- Any departure of mood: Disturbance of mood "Dysthemia" and it can be: Elevated, or Depressed.
- **Depressed mood described as**: Down, blue, unhappy, or simply sad.

Criteria

- According to DSM-IV-TR "A book that has criteria for all psychiatric disorders", a major depressive disorder occurs without a history of a manic, mixed, or hypo manic episode.

- A major depressive episode must last **at least 2 weeks**, and typically a person with a diagnosis of a major depressive episode also experiences at least five symptoms from a list that includes changes in appetite and weight, changes in sleep and activity, lack of energy, feelings of guilt, problems thinking and making decisions, and recurring thoughts of death or suicide.

- 2 Most important criteria (when patient says its been more than 2 weeks) are: Losing interest and feeling alone

Depressive Features

Mood Changes

- Feeling Low (more severe than ordinary sadness)

- Lack of Enjoyment and inability to experience pleasure "Anhedonia"

- Irritability, frustration and tention

Cognitive Function & Thinking

Subjective poor attention, concentration and memory.

In elderly this may be mistaken as dementia *(pseudo dementia)*.

Depressive Cognitive Triad (Pessimistic Thoughts)

Past
- unjustifiable guilt feeling and self-blame.

Present
- patient sees the unhappy side of every event (discounts any success in life, no longer feels confident, sees himself as failure)

Future
- gloomy preoccupations; hopelessness, helplessness, death wishes (may progress to **suicidal ideation and attempt**).

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Depressive Features

Biological Features

Change in Sleep

Usually reduces but in some patients increased

- **Early morning (terminal) insomnia**; waking 2 - 3 hours before the usual time, this is usually associated with severe depression.

Change in *appetite*

(usually reduced but in some patients increased).

Fatigue or loss of energy

nearly every day

Low libido "sex drive" and/or impotence

Change in bowel habit

(usually constipation).

Significant Weight loss

when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month),

Note: In children consider failure to make expected weight gains.

Several *immunological* abnormalities

(e.g. low lymphocytes) increasing the risk to infection.

Appearance & Behavior

- **Facial appearance of sadness**: down cast gaze, tearful eyes and reduced rate of blinking.
- **Head is inclined forwards.**
- **Psychomotor retardation**

(in some patients agitation occurs):

- Lack of motivation and initiation.
- Slow movements/slow interactions.

- **Social isolation and withdrawal.**

- **Delay of tasks and decisions.**

Mood Disorders

Unipolar Mood Disorder

Bipolar Mood Disorder

Presence of major depressive episodes **only**	At least 2 years to be considered as sever depression.	Presence of manic episodes(euphoria/gran diosity/over-activity) +/- depressive episodes.	Comes with depression, and after given the drug he comes back hyperactive , running jokes, talkative. manic episodes: episodes of over activity.
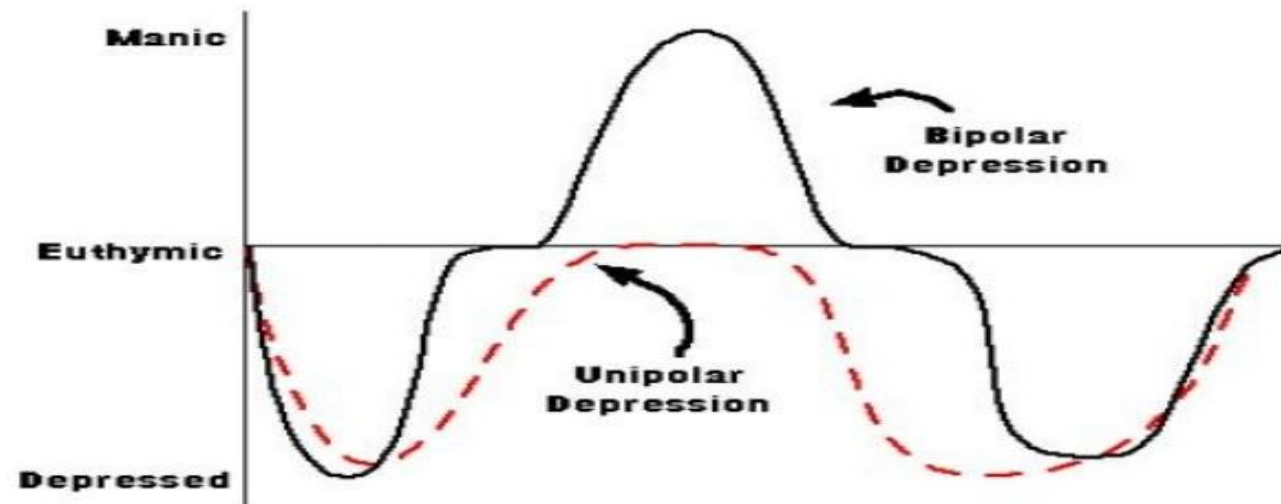
Etiology

- **Biological Factors**.
  - Metabolic: low thyroid
  - CVA
  - Medications "Hypertension and Rheumatoid Arthritis drugs, Oral Contraceptive*"
  - Autoimmune disease: SLE
  - Cancer
  - Genetic

- **Psychosocial Factors**

- **Social, financial and Academic**

- **Neurotransmitters:** low amount or low activity of "Serotonin (5HT)-Noradrenaline or Dopamine main cause"

Epidemiology

- lifetime prevalence almost **17 percent (15-25%)**.

- The annual incidence (number of new cases) of a major depressive episode is 1.59 percent (women, **1.89 percent; men, 1.10 percent**).
- Male: female = 1:2

- occurs most often in persons without close interpersonal relationships or in those who are divorced or separated.

- The mean age of onset is about 40 years, with 50 percent of all patients having an onset between the ages of 20 and 50.

- can also begin in childhood or in old age.

- Recent epidemiological data suggest that the incidence of major depressive disorder may be increasing among people younger than 20 years of age and This may be related to the increased use of alcohol and drugs of abuse in this age group.

Differential Diagnosis

Medical Disorders	Pseudo-dementia*	Bereavement	Other Mental Disorders

- Thyroid diseases*
- Adrenal diseases
- Parkinson's disease,
- Dementing illnesses
- Cerebrovascular diseases
- Tumors.

Schizophrenia
Bipolar Disorder
Etc..

Substance
Cardiac drugs, antihypertensive, sedatives, hypnotics, antipsychotics, antiepileptic, antiparkinsonian drugs, analgesics, antibacterial, and antineoplastics are all commonly associated with depressive *symptoms*.

*Most important thing to think about in female is Hyperthyroidism more than Anemia.

*Pseudodementia is a situation where a person who has depression also has cognitive impairment that looks like dementia.

Course

An untreated depressive episode lasts 6 to 13 months

Most treated episodes last about 3 months.

The withdrawal of antidepressants before 3 months has elapsed almost always results in the return of the symptoms.

As the course of the disorder progresses, patients tend to have more frequent episodes that last longer.

Over a 20-year period, the mean number of episodes is five or six

Most important diagnostic : history of patient and mental state - (family is less important than history and mental)

Management:

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1 Hospitalization (specially for people that tend to harm themselves or others)

2 Psychotherapy (cognitive behavioral therapy)

3 Pharmacotherapy (anti-depressant , ECT,)

Complication

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1 Occupational Performance
2 Social and personal relations impairment
3 Self Medication: Alcohol & Substance dependence
4 Risk of Suicide (4%)

The most effective therapy is to combine between psychological and pharmacological therapy

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✓ **Premenstrual disorder**: anxiety before menstrual.

✓ In psychotic disorders (Schizophrenia) dopamine disturbance is usually responsible .

✓ In neurotic disorders (Depression) Serotonin and Nor-Epinephrine are mostly related .

✓ When depression gets so sever it could progress to be a psychotic disorder.

✓ Thyroid diseases are so common as a differential diagnosis and especially hypothyroidism.

✓ The 2nd cause of actor shy is the Anemia.

✓ Pseudo demented patients don't have the power or the desire to think , while really demented patients can NOT think .

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Quiz yourself (MCQs)

1- A normal mood is called :

A-Euthymia   B- Euphoria   C- Dysthemia

2- Which one of the following is a major symptom of depression?

A-Fatigue   B- Weight loss.   C- Loss of interest.

3- The mean age of onset of depression is?

A- about 30 years.   B- about 40 years.   C- about 50 years.

4- What is the mean number of depressive episodes over a 20 year period?

A-3 to 4   B- 5 to 6   C- 8 to 9

4- B
3- B
2- C.
1- A.

Quiz yourself

(SAQ)

- A major depressive episode must last ?

At least 2 weeks.

- Name 3 of the differential diagnosis of depression?

1. Thyroid diseases
2. Adrenal diseases
3. Parkinson's disease

- Treatment of Depression:

• Hospitalization
• Psychotherapy
• Pharmacotherapy (anti-depressant , ECT)

2- To diagnose a patient with depression he must experience at least five symptoms name them ?

1. depressed mood
2. markedly diminished interest or pleasure
3. significant weight loss
4. insomnia or hypersomnia
5. psychomotor agitation or retardation

- What are the complications of depression

•Occupational performance
•Social and personal relations impairment
•Self medication :alcohol and substance dependence.
•Risk of suicide.(4%)

Quiz yourself
(Case)

Ms. Amal is a 27-year-old single woman works as a teacher. She has a 5-week history of low mood, chest tightness, poor appetite, disturbed sleep, excessive guilt feelings, and loss of interest in her social activities.

▪ **What is the difference between usual sadness and depression?**

Healthy people have a wide continuum range of normal mood changes: .

[usual sadness < < < - - -   ------------------------------------> > > usual happiness **].**

Patients with depressive disorders have :

- abnormal low mood / lack of pleasure/ physical features
- Impaired social, and occupational functioning

Good Luck

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