Depression is a medical illness with many symptoms, including physical ones. Sadness is only a small part of depression. Some people with depression may not feel sadness at all, but be more irritable, or just lose interest in things they usually like to do. Depression interferes with your feeling and functioning, persistent depressive disorder (a chronic, low-grade depression that you get better or worse over time), and psychotic depression (the most severe, with delusions or hallucinations). Some people may also be at risk for depression in the winter (“seasonal affective disorder”), and some women report depression in the week or two prior to their menstrual period (“premenstrual dysphoric disorder”). You can learn about these and other types of depression at http://www.nimh.nih.gov/about/index.shtml.

Q: What is depression?
A: Depression is a medical illness with many symptoms, including physical ones. Sadness is only a small part of depression. Some people with depression may not feel sadness at all, but be more irritable, or just lose interest in things they usually like to do. Depression interferes with your daily life and normal function. Don’t ignore or try to hide the symptoms. It is not a character flaw, and you can’t will it away.

Q: Are there different types of depression?
A: Yes. The most common depressive disorders include major depressive disorder (the most common and most clearly defined from a person’s emotional and functioning standpoint), persistent depressive disorder (a chronic, low-grade depression that you get better or worse over time), and psychotic depression (the most severe, with delusions or hallucinations). Some people may also be at risk for depression in the winter (“seasonal affective disorder”), and some women report depression in the week or two prior to their menstrual period (“premenstrual dysphoric disorder”). You can learn about these and other types of depression at http://www.nimh.nih.gov/health/topics/depression/index.shtml.

Q: What are the signs and symptoms of depression?
A: If you have been experiencing any of the following signs and symptoms nearly every day for at least 2 weeks, you may have major (clinical) depression:

Persistent sad, anxious, or “empty” mood
Feelings of hopelessness
Feelings of guilt, worthlessness, helplessness
Loss of interest or pleasure in hobbies and activities
Decreased energy, fatigue, being “slowed down”
Difficulty concentrating, remembering, making decisions
Appetite and/or unwanted weight changes

Q: Where can I learn more about depression and other mental health issues?
A: The National Institute of Mental Health (NIMH) website (http://www.nimh.nih.gov) provides information about various mental health disorders and mental health issues. On the website, you can also learn about the latest mental health research and news. The website is mobile-friendly. This means you can access the NIMH website anywhere, anytime, and on any device—from desktop computers to tablets and mobile phones. You can also follow NIMH on Twitter (@NIMHgov), Facebook, Google+, and LinkedIn.

NIMH sometimes hosts live Twitter chats and other social media events on various mental health issues. For more information about past and upcoming events, visit the NIMH website (http://www.nimh.nih.gov).

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Difficulty concentrating, remembering, making decisions

Q: What should I do if someone I know is considering suicide?
A: If you know someone who is considering suicide, do not leave him or her alone. Try to get his or her friend or loved one to seek more immediate help from his or her doctor, campus security, the student health service, or the nearest hospital emergency room, to call 911, or to call 1-800-273-TALK (8255). You can also call 988 as soon as possible by calling the Lifeline at 1-800-273-TALK (8255). If you know someone who is considering suicide, do not leave him or her alone.

Q: What are the signs of depression in college students?
A: As a college student, you might be leaving home for the first time, learning to live independently, taking tough classes, meeting new people, and getting a lot less sleep. Small or large setbacks can seem like the end of the world, but these feelings usually pass with a little time. But if you have been feeling sad, hopeless, or irritable for at least 2 weeks, you might have depression. You’re not alone. Depression is the most common health problem for college students. You should know:

¢ Depression is a medical illness.
¢ Depression can be treated.
¢ Most colleges offer free or low-cost mental health services to students.

Q: Feeling moody, sad, or grouchy? Who doesn’t once in a while?

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Q: Answers to college students’ frequently asked questions about depression
WHAT ARE “CO-OCCURRING” DISORDERS?

A: Depression can occur at the same time as other health problems, such as anxiety or a substance disorder. If you also suffer from other medical conditions, such as diabetes or thyroid imbalance. Certain medications—such as over-the-counter (OTC) medicines, alcohol—may cause side effects that contribute to depression, although some women are very sensitive to hormonal changes. Most birth control pills are not associated with mood problems, but you may need to talk to your doctor about their specific side effects.

IF I THINK I MAY HAVE DEPRESSION, WHERE CAN I GET HELP?

A: If you have symptoms of depression that are getting in the way of your ability to live your daily life or are impairing your ability to get better with care and treatment. Don’t wait for depression to go away on its own. Cognitive behavioral therapy (CBT), also called psychotherapy, personalized for your situation, or a combination of talk therapy and medication. Early treatment is best.

WHAT IS TALK THERAPY?

A: A therapist, such as a psychiatrist, a psychologist, a social worker, or counselor, can help you understand and manage your moods and feelings. You can talk out your emotions to someone who understands and supports you. You can also learn strategies to stop thinking in a negative way that looks to the positive in your life. This helps you build confidence and feel better about yourself as you begin to work with your therapist to find solutions to problems that may have seemed insurmountable. Early treatment for depression helps you feel less depressed and maybe even hopeful. Research has shown that certain types of talk therapy or psychotherapy can help you recover from depression, including:

- Cognitive behavioral therapy, or CBT, which focuses on thoughts, behaviors, and feelings related to depression
- Interpersonal psychotherapy, or IPT, which focuses on working on relationships
- Dialectical behavior therapy, or DBT, which is especially useful when depression is associated with an anxiety or eating disorder
- Attachment-based therapy, or ABT

All therapies can be adapted to each person’s needs, for example, if depression is associated with an anxiety or eating disorder. Your college counseling center may offer individual therapy and group therapy. Many also offer workshops and outreach programs to support you. Read more about talk therapies at http://www.nimh.nih.gov/health/topics/psychotherapies/index.shtml.

WHAT MEDICATIONS TREAT DEPRESSION?

A: If your doctor thinks you need medication to help your depression, he or she may prescribe an antidepressant. There are a number of antidepressants on the market, and each has different advantages and disadvantages. It is important to see your doctor regularly and tell him or her about any side effects and how you are feeling, especially if you start feeling worse or have thoughts of hurting yourself. Although the doctor will attempt to “match” the best medication for your depression, sometimes it takes a little “trial and error” to find the one that works best for you and your family member has not found a medication that is effective in treating your condition. For example, a particular medication in the past, that can be a good predictor of success again. Always follow the directions of the doctor or health care provider when taking medication. You will need to take one or more regular doses of an antidepressant every day, and it may not take full effect for a few weeks. To avoid having depression return, most people continue taking medication for some months after they are feeling better. If your depression is long-lasting or comes back repeatedly, you may need to take antidepressants longer.

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WHAT ELSE CAN I DO?

A: Before seeing a doctor and a counselor, you can also help your depression by being gentle with yourself and good to yourself. Don’t expect to get better overnight. Try to have a good sleep habit and avoid all night study sessions.

- Daily exercise, spending time outside in nature and in the sun, and eating healthy foods can also help you feel better.

- Get enough sleep. Try to have a good sleep habit and avoid all night study sessions.
- Your counselor may teach you how to be aware of your feelings and teach you relaxation techniques. Use these when you start feeling down or upset. Some strategies to try are deep breathing and meditation.
- Your counselor can help you understand and manage your moods and feelings. You can talk out your emotions to someone who understands and supports you. You can also learn strategies to stop thinking in a negative way that looks to the positive in your life. This helps you build confidence and feel better about yourself as you begin to work with your therapist to find solutions to problems that may have seemed insurmountable. Early treatment for depression helps you feel less depressed and maybe even hopeful. Research has shown that certain types of talk therapy or psychotherapy can help you recover from depression.

WHAT SHOULD I DO IF I AM CONSIDERING SUICIDE?

A: If you are in crisis and need help, call this toll-free number, available 24 hours a day, 7 days a week: 1-800-SUICIDE (784-2433). You will reach the National Suicide Prevention Lifeline, a service available to anyone. You may call for your own information or to call for a friend or family member. You can also visit the Lifeline’s website at http://www.suicideprevention.org.

- Try to get out with friends and try fun things that help you express yourself. As you recover from depression, you may find that even if you don’t feel like going out with friends, if you push yourself to do so, you’ll be able to enjoy yourself more than you thought.

- Remember that, by treating your depression, you are helping yourself succeed in college and after graduation.

- Try not to talk about wanting to die or to kill oneself.

- Avoid using drugs and at least minimize, if not totally avoid, alcohol.

- Try to spend time with supportive family members or friends, and take advantage of campus resources, such as student support groups. Talking with your friends, family, or other students who listen and care about you, gives you support.

- Talking about feeling trapped or in unbearable pain.

- Talking about feeling hopeless or having no reason to live.

- Giving away prized possessions.

- Withdrawing or feeling isolated.

- Displaying extreme mood swings.

- These include:

- Antidepressant medicine before finding the one that improves your symptoms without causing side effects that are difficult to live with.

- Certain side effects than others. Tell your doctor if you are often “sensitive” to medication. Starting a new antidepressant medicine before finding the one that improves your symptoms without causing side effects will likely help you feel better. You may need to try more than one antidepressant. If your doctor finds that you do not have another health problem, he or she can discuss treatment options or refer you to a mental health professional, such as a psychiatrist, counselor, or psychologist. A mental health professional can give you a thorough evaluation and also treat your depression.

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