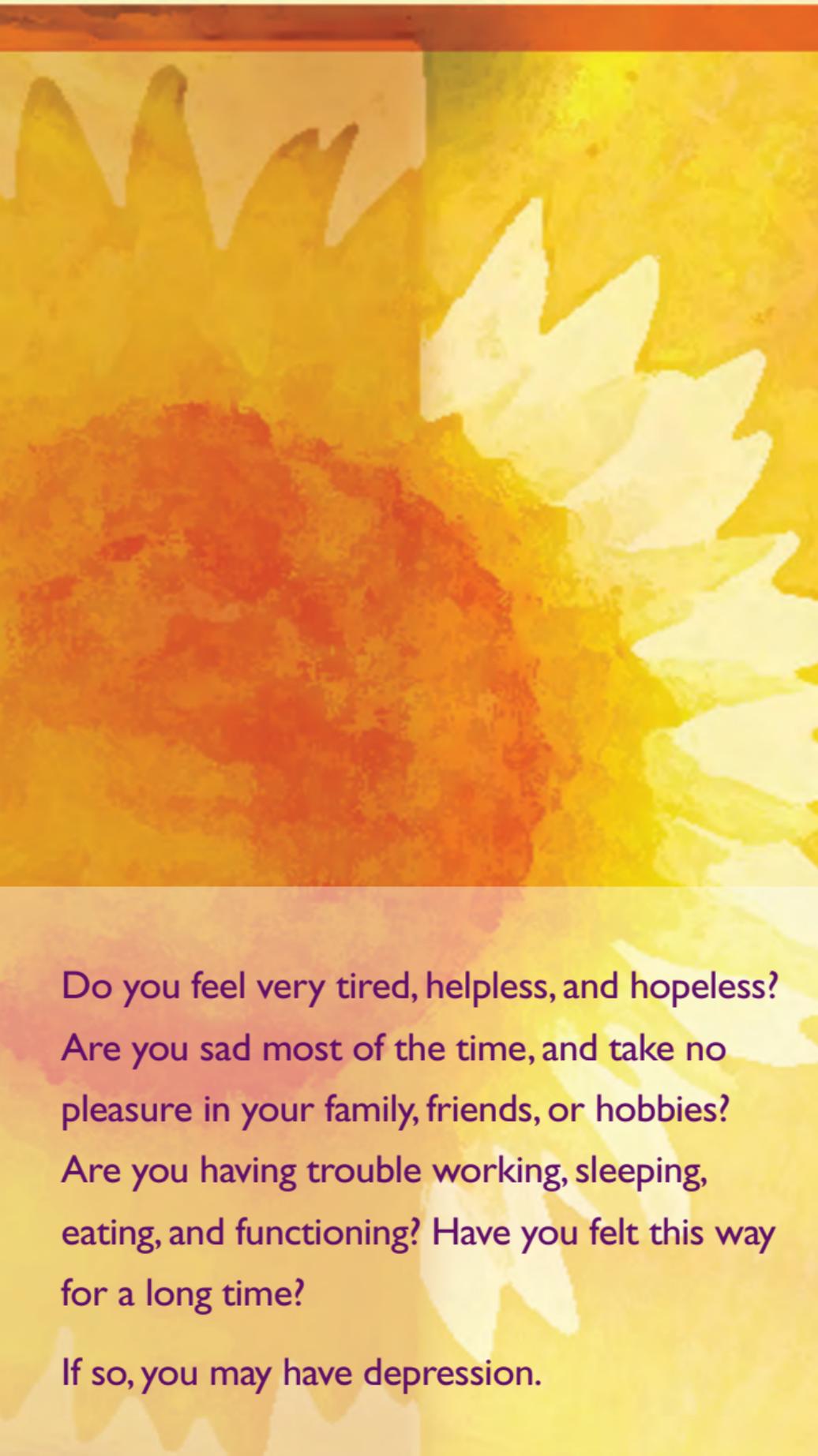


DEPRESSION IN WOMEN

A watercolor illustration of a sunflower. The center is a textured orange-red circle, surrounded by yellow and white petals. The background is a soft, warm yellow. The entire image is framed by a solid orange border at the top and bottom.

Do you feel very tired, helpless, and hopeless?
Are you sad most of the time, and take no
pleasure in your family, friends, or hobbies?
Are you having trouble working, sleeping,
eating, and functioning? Have you felt this way
for a long time?

If so, you may have depression.

Depression in Women

What is depression?

Everyone sometimes feels sad, but these feelings usually pass after a few days. When a woman has depression, she has trouble with her daily life for weeks at a time. More women than men get depression. It is a serious illness, and most women who have it need treatment to get better.

What are the different forms of depression?

The most common types of depression are:

- **Major depression**—severe symptoms that interfere with a woman’s ability to work, sleep, study, eat, and enjoy life. An episode of major depression may occur only once in a person’s lifetime. But more often, a person can have several episodes.
- **Dysthymic disorder or dysthymia**—depressive symptoms that last a long time (2 years or longer), but less severe than those of major depression.
- **Minor depression**—similar to major depression and dysthymia, but symptoms are less severe and may not last as long.

What are the signs and symptoms of depression?

Different people have different symptoms. Some symptoms of depression include:

- Feeling sad or “empty”
- Feeling hopeless, irritable, anxious, or guilty
- Loss of interest in favorite activities
- Feeling very tired
- Not being able to concentrate or remember details
- Not being able to sleep, or sleeping too much
- Overeating, or not wanting to eat at all
- Thoughts of suicide, suicide attempts
- Aches or pains, headaches, cramps, or digestive problems

What causes depression in women?

Several factors may contribute to depression in women.

Genes—women with a family history of depression may be more likely to develop it than those whose families do not have the illness.

Brain chemistry and hormones—people with depression have different brain chemistry than those of people without the illness. Also, the hormones that control emotions and mood can affect brain chemistry.

During certain times of a woman's life, her hormones may be changing, which may affect her brain chemistry. For example, after having a baby (postpartum period), hormones and physical changes may be overwhelming. Some women experience **postpartum depression**, a serious form of depression that needs treatment. Other times of hormonal change, such as transition into menopause, may increase a woman's risk for depression.

Stress—loss of a loved one, a difficult relationship, or any stressful situation may trigger depression in some women.

How is depression treated?

The first step to getting the right treatment is to visit a doctor or mental health professional. He or she can do an exam or lab tests to rule out other conditions that may have the same symptoms as depression. He or she can also tell if certain medications you are taking may be affecting your mood.

The doctor should get a complete history of symptoms, including when they started, how long they have lasted, and how bad they are. He or she should also know whether they have occurred before, and if so, how they were treated. He or she should also ask if there is a history of depression in your family.

Medication

Medications called antidepressants can work well to treat depression. They can take several weeks to work. Antidepressants can have side effects including:

- Headache.
- Nausea, feeling sick to your stomach.

- Difficulty sleeping and nervousness.
- Agitation or restlessness.
- Sexual problems.

Most side effects lessen over time. **Talk to your doctor about any side effects you may have.**

It's important to know that although antidepressants can be safe and effective for many people, they may present serious risks to some, especially children, teens, and young adults. A “black box”—the most serious type of warning that a prescription drug can have—has been added to the labels of antidepressant medications. These labels warn people that antidepressants may cause some people, especially those who become agitated when they first start taking the medication and before it begins to work, to have suicidal thoughts or make suicide attempts. Anyone taking antidepressants should be monitored closely, especially when they first start taking them. For most people, though, the risks of untreated depression far outweigh those of antidepressant medications when they are used under a doctor's careful supervision.

If you are pregnant . . .

Before taking an antidepressant during pregnancy, talk to your doctor about the risks and benefits to you and your baby. There may be a very small chance that taking the medication during certain times of your pregnancy may affect your growing baby. But not taking your medication also may be risky to you and your baby. Experts generally agree that each woman's individual situation should determine whether she can safely take an antidepressant while pregnant.

Therapy

Several types of therapy can help treat depression. Therapy helps by teaching new ways of thinking and behaving, and changing habits that may be contributing to the depression. Therapy can also help women understand and work through difficult relationships that may be causing their depression or making it worse.

How can I help a loved one who is depressed?

If you know someone who has depression, first help her see a doctor or mental health professional.

- Offer her support, understanding, patience, and encouragement.
- Talk to her, and listen carefully.
- Never ignore comments about suicide, and report them to her therapist or doctor.
- Invite her out for walks, outings, and other activities. If she says no, keep trying, but don't push her to take on too much too soon.
- Remind her that with time and treatment, the depression will lift.

How can I help myself if I am depressed?

As you continue treatment, gradually you will start to feel better. Remember that if you are taking an antidepressant, it may take several weeks for it to start working. Try to do things that you used to enjoy before you had depression.

Go easy on yourself. Other things that may help include:

- Breaking up large tasks into small ones, and doing what you can as you can. Try not to do too many things at once.
- Spending time with other people and talking to a friend or relative about your feelings.
- Do not make important decisions until you feel better. Discuss decisions with others who know you well.

Where can I go for help?

If you are unsure where to go for help, ask your family doctor. You can also check the phone book for mental health professionals. Hospital doctors can help in an emergency.

What if I or someone I know is in crisis?

Women are more likely than men to attempt suicide. If you or someone you know is in crisis, get help quickly.

- Call your doctor.
- Call 911 for emergency services.
- Go to the nearest hospital emergency room.
- Call the toll-free, 24-hour hotline of the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255); TTY: 1-800-799-4TTY (4889)

NIMH

National Institute
of Mental Health

Contact us to find out more about Depression in Women.

National Institute of Mental Health
Science Writing, Press & Dissemination Branch
6001 Executive Boulevard
Room 8184, MSC 9663
Bethesda, MD 20892-9663
Phone: 301-443-4513 or
1-866-615-NIMH (6464) toll-free
TTY: 301-443-8431 or
1-866-415-8051 toll-free
E-mail: nimhinfo@nih.gov
Web site: www.nimh.nih.gov



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health
NIH Publication No. TR 10-4779