

## **Depression and Spinal Cord Injury: What the Consumer Needs to Know**

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- **What is Depression?**

Depression is a psychological condition involving major changes in mood, outlook, ambition, thinking ability, activity level and bodily processes (such as sleep, energy, and appetite). Depression usually develops over a period of weeks or months. The person may not even realize that he or she has become depressed. While about 11% of the U.S. non-disabled population is moderately or severely depressed at any given time, research shows that about 30% - 40% of people with long-term spinal cord injury (SCI) have a depressive condition. Depression, a serious health problem, is different than grief. Grief is the normal response to loss and involves changes in mood, activity and bodily processes but is not as extensive as depression.

- **What are the Effects of Depression?**

Depression affects the person's health, interpersonal relations, work, and the ability to enjoy life. People with SCI who are depressed do not look after themselves well; they may not drink enough water, look after their skin, manage their diet or see their doctors. They may appear moody or irritable to others, not go out with friends, and lose interest in romance. Work or other activities suffer because the person loses interest, can't problem-solve well or is hard to get along with. Life becomes less enjoyable because the person loses some of the ability to find pleasure, success or meaning in life. Often, substance abuse develops to help cope with painful feelings. If depression is severe, thoughts of suicide often occur.

- **What Causes Depression?**

No one is exactly sure, but a combination of life stress and physical changes in the brain seem most likely. Some depression is inherited, but only in a small percentage of cases. People with SCI can become discouraged and depressed as they age if they lose the ability to perform valued activities or if they find it hard to cope with these changes. Depression is not the result of being "weak", "immature", or "inadequate". Depression is a health condition. Depression is not related to the level of injury. Persons with both paraplegia and tetraplegia develop depression in nearly equal numbers.

- **Is Depression Normal?**

No, depression is not normal, even in the face of a spinal cord injury. Becoming discouraged, grief-stricken or sad is normal, but depression represents a condition that has gone beyond these normal reactions and indicates that the person has a new health problem.

- **What Can Be Done About It?**

Fortunately, most depression is readily treated. Depending upon its severity, most people, when properly assisted, will experience significant improvement within a few weeks and complete improvement within 6 to 12 months. Treatment usually involves medicines and/or psychotherapy. Psychotherapy of a practical, problem-solving variety has proven best. Modern medicines are safe and effective for people with SCI when properly selected and monitored. Improvements in the symptoms of depression quickly lead to improvement in other areas, including personal relations, motivation, health and quality of life.

- **How Do I Know if I'm Becoming Depressed?**

Often, depression is hard to recognize. Depression can express itself in more than a dozen ways and no two people will necessarily have the same kind of experiences of symptoms. Surprisingly, you don't even have to be sad to be depressed! Because depression develops slowly, people just kind of slip into it.

One way to help determine if you need a formal evaluation is to take the Depression Questionnaire shown below. Scores totaling 0 to 5 indicate normal responses to everyday life. Scores from 6 to 10 indicate a moderate degree of depression that can affect health, functioning and outlook. Scores higher than 10 indicate a possible major depressive problem that severely affects functioning and health.

**Depression Questionnaire:**

1.	My daily life is not interesting	T or F
2.	It is hard for me to get started on my daily chores and activities	T or F
3.	I have been more unhappy than usual for at least a month	T or F
4.	I have been sleeping poorly for at least the last month	T or F
5.	I gain little pleasure from anything	T or F
6.	I feel listless, tired, or fatigued a lot of the time	T or F
7.	I have felt sad, down in the dumps, or blue much of the time during the last month	T or F
8.	My memory or thinking is not as good as usual	T or F
9.	I have been more easily irritated or frustrated lately	T or F
10.	I feel worse in the morning than in the afternoon	T or F
11.	I have cried or felt like crying more than twice during the last month	T or F
12.	I am definitely slowed down compared to my usual way of feeling	T or F
13.	The things that used to make me happy don't do so anymore	T or F
14.	My appetite or digestion of food is worse than usual	T or F
15.	I frequently feel like I don't care about anything anymore	T or F
16.	Life is really not worth living most of the time	T or F
17.	My outlook is more gloomy than usual	T or F
18.	I have stopped several of my usual activities	T or F
19.	I cry or feel saddened more easily than a few months ago	T or F
20.	I feel pretty hopeless about improving my life	T or F
21.	I seem to have lost the ability to have any fun	T or F
22.	I have regrets about the past that I think about often	T or F
	Total Number of True Answers:	_____

**WHAT TO DO NEXT.** If you score above 6, and definitely if you score above 10, you should make an appointment with your primary care provider, a psychologist or psychiatrist and discuss the problem. They can also make arrangements for tests to make sure you're not suffering from something else (like an under-active thyroid or an infection). After that, treatment can be started and you can begin feeling better soon.