



HELPING HANDS



Depression

(Excerpts from medilineplus.gov)

Depression is a serious medical illness. It's more than just a feeling of being sad or "blue" for a few days. If you are one of the more than 19 million teens and adults in the United States who have depression, the feelings do not go away. They persist and interfere with your everyday life. Symptoms can include:

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



Depression is a disorder of the brain. There are a variety of causes, including genetic, biological, environmental, and psychological factors. Depression can happen at any age, but it often begins in <u>teens</u> and young adults. It is much more common in women. Women can also get <u>postpartum depression</u> after the birth of a baby. Some people get <u>seasonal affective disorder</u> in the winter. Depression is one part of <u>bipolar disorder</u>.

There are effective treatments for depression, including antidepressants, talk therapy, or both.

What are the different types of depression?

Two common forms of depression are:

- **Major depression**, which includes symptoms of depression most of the time for at least 2 weeks that typically interfere with one's ability to work, sleep, study, and eat.
- **Persistent depressive disorder** (dysthymia), which often includes less severe symptoms of depression that last much longer, typically for at least 2 years.

Other forms of depression include:

- <u>Perinatal depression</u>, which occurs when a woman experiences major depression during pregnancy or after delivery (postpartum depression).
- <u>Seasonal affective disorder</u>, which comes and goes with the seasons, typically starting in late fall and early winter and going away during spring and summer.
- **Depression with symptoms of <u>psychosis</u>**, which is a severe form of depression where a person experiences psychosis symptoms, such as delusions (disturbing, false fixed beliefs) or hallucinations (hearing or seeing things that others do not see or hear).

Individuals diagnosed with <u>bipolar disorder</u> (formerly called manic depression or manic-depressive illness) also experience depression.

7 Things to Know About Depression and Complementary Health Approaches

(Excerpts from medilineplus.gov)

Many people with depression turn to complementary health approaches in addition to or in place of conventional treatment. Research suggests that some approaches may be modestly helpful in reducing depression symptoms. For other approaches, benefits are uncertain or there are safety concerns.

Here are 8 things you should know about complementary health approaches for depression:

- 1. Depression can be a serious illness. Don't use a complementary health approach to replace conventional care or to postpone seeing a health care provider about symptoms of depression.
- 2. Some evidence reduce depression symptoms.
- 3. **Music therapy** may provide depression.
- 4. Studies in adults, adolescents, be helpful in reducing depressive
- 5. It's uncertain whether <u>omega-3</u> symptoms of depression.



suggests acupuncture may modestly

short-term benefits for people with

and children have suggested that <u>voga</u> may symptoms.

fatty acid supplements are helpful for

- 6. Current scientific evidence does not support the use of other dietary supplements, including <u>S-adenosyl-</u> <u>L-methionine (SAMe)</u> or **inositol**, for depression.
- 7. Take charge of your health—talk with your health care providers about any complementary health approaches you use. Together, you can make shared, well-informed decisions.

The heart and soul of the District 141 Employee Assistance Program is the local lodge EAP peer coordinator. These dedicated men and

women personal time to members and are experiencing EAP peer make clinical evaluations, trained to make of your



volunteer their assist other union their families who personal difficulties. volunteers do not diagnoses or clinical however, they are a basic assessment situation and refer

you to an appropriate resource for a more detailed evaluation. EAP peer volunteers will follow up to ensure you have been able to access services that address the difficulty you were experiencing.

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Contact your Local Lodge Executive Board to enroll in EAP courses

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EAP III September 10-15

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