

Free coping with depression research paper example

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Coping with depression connected to rheumatoid arthritis

What is depression?

Depression is essentially feeling 'down'. It is a severe mood state that may affect the general state of mind. This usually comes about as a result of encountering a stressful condition or failing to meet one's expectations in life as expected of them by the society or just at an individual level. Chronic lifestyle illnesses have been largely associated with such cases of anxiety and depression and so patients with rheumatic arthritis have been faced with the same condition. The nature of the disease incapacitates the patients and makes them fully dependant on others. This can be very depressing more so to individuals who were bread winners in their families but now have no capacity to support their families as they used to.

How is depression related to rheumatoid arthritis?

There have been many occasions where arthritis overlaps with depression.

This could worsen the pain and suffering. In this paper, I am going to analyze the connection that exists between RA and depression. I will also explore on treatment and management of RA and depression. Both arthritis and arthritis linked depression is prevalent with the elderly and women

Depression linked to rheumatic arthritis.

What causes the depression with people living with rheumatoid arthritis?

The research spearheaded by CDC found that people living with arthritis have high chances of being depressed. The extreme side is that most of those found anxious or depressed are not diagnosed and this fact may be worsening lives of RA persons. There were overlaps between anxiety and depression- 50% of those who were found to be anxious were depressed. 31% were found to be anxious and 18% were depressed. This shows that RA may cause depression or anxiety that may worsen the situation if mental well being of RA patients were to be ignored. (Arthritis Care & Research page 1361).

Rheumatic arthritis patients suffer from depression because of anxiety and demoralization that arise from inability to deliver at work. Inability to undertake co-curricular activities that they used to like and participate in tends to escalate depression and pain.

As medical expenses go up, the quality of life goes down- this is because RA treatment is expensive and engaging. The patient knows that the pain will only worsen and in time they will not be able to move since there is no

definite cure of arthritis. Patients in other occasions loose friends because of the prevailing medical condition and this is equally a source of depression. Diet will change and RA will force the patient to forego some kinds of food that the patient might like. Physical pain is severe and nothing is promising, immobilization is possible and working is becoming impossible. With all this psychological torture, depression is the result. Patients lose hope. Pain itself is depressing and the effect of depression is more pain. Arthritis cannot be efficiently handled if depression is not sufficiently managed. It is twice likely for RA patients to suffer from depression as the non-RA population (Rheum 2003) Coping with depression will reduce the pain in the joints and allow the patient to lead a better life.

How to manage the depression

Proper medications can be administered to RA patients under guidance of medical practitioners to manage the pain and reduce damage to bodily tissues. Antidepressants can also be used to manage the stress, anxiety and depression that comes with the chronic disease infection.

The following table shows the side effects of such drugs and their prices including project cost on managing a possible side effect.

Pain goes hand in hand with depression and the management of RA should consider treatment of depression. Depression intensifies pain and makes life worthless and difficult. Patients with RA ought to receive adequate social support from both their families and the society as a whole in order to be in a position to cope up with the condition and lead more fulfilling lives. Without this support and palliative care, the patients may develop other severe

medical conditions or even die of depression.

As the research continues into the finding of cure, much attention should be focused into patients social and psychological well being. Female are generally emotionally weak (compared to men) and are more prone to RA than men. Women therefore need close attention and more support from the medical practitioners, families and friends.

Evidence to prove theory

Patients are often recommended for therapeutic sessions to ease them with depression. Coping with depression is a hard thing to do. Some treatment plans include use of drugs and cognitive therapy. There are circumstances that drugs are not preferred because of their side effects. If the patient is active, physical activity may be intertwined with other programs including bodily exercises and massages as directed by the personal healthcare doctor.

Signs of depression may include sadness, lonely and depressed. Depressing is a reaction of lose or affected self esteem. If not treated they may hinder one's normal life. They may last months or years in extreme situation.

Conclusion

Despite the difficulty involved, coping with depression associated with arthritis should be the focus of both the patients and their keens. Patients will lead an easier and happier life. Depression treatment should be seen as part of RA management. Anxiety may lead to depression. Both conditions are manageable and curable. The problem with these secondary conditions is they are not diagnosed. The close relationship between anxiety and

depression should be considered as significant finding that should be considered on managing arthritis. Anxiety should not be left to develop depression. Sensitization of patients with anxiety and depression may help encourage them to be diagnosed of arthritis.

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