Disorder paper: depression

Psychology, Psychotherapy



In some points in our life, we feel a very deep sadness; feel lethargic and unable to deal with the everyday demands of our existence. However, after a few days of wallowing in sadness, self-pity and negative thoughts, human nature dictates that we recover from this episode and go back to our lives. But the truth is, some people do not recover and becomes enslaved with his/her sadness, uncertainty, depressive thoughts and feelings of uselessness and diminished zest for life that the person is said to be suffering fromdepression.

Depression is a psychological disorder wherein the person's depressed state is not in proportion to the event that caused the depressive feelings and when it continues past the point of which he/she is expected to recover. Depression is often caused by thestressof major life events like losing someone you love, failing in school or in one's work, death, or terminal illnesses. Depression is characterized by four symptoms, this include emotional, cognitive, motivational and physical symptoms (Wood, Wood & Boyd, 2006).

The most common emotional symptom when a person is depressed is the generalized feeling of sadness and dejection. The individual feels unhappy, hopeless and loses interest in life and previous daily activities. The cognitive symptoms are composed of negative thoughts wherein they have low selfesteem, feelings of inadequacy and engage in self-blame when they think of their predicaments and failures.

Motivationis very low during depression, the depressed person tend to be passive and difficulty in interacting with others or in participating in activities

that require human contact and exchange of ideas. The physical symptoms of depression include the difficulty in sleeping, changes in appetite either an increase or decrease from the normal eating behavior, lethargy, low energy and complains of body aches.

There is still help for depressed individuals, treatments like psychotherapy and drugs have helped people break away from their depression. Antidepressant drugs help to elevate the mood of depressed individuals. These drugs energize rather than tranquilize, apparently by increasing the availability of two neurotransmitters called norepinephrine and serotonin that are deficient in some cases of depression (Wood, Wood & Boyd, 2006). Antidepressant drugs act in different ways to increase the levels of serotonin and norepinephrine.

Some drugs block certain enzymes from destroying the two neurotransmitters; others prevent the neurotransmitters from returning to its nerve terminals of origin. However, these drugs are more effective in treating depression caused by biological factors, and like any synthetic drug, there are serious side effects. The most common side effects include dry mouth, blurred vision, constipation and urinary retention, others experience severe drop in blood pressure, disruption in cardiac rhythm and rate and may be fatal when taken in excessive doses.

A number of new antidepressants called serotonin reuptake inhibitors prolong the serotonin level in the body and have proved effective in treating depression with minimal side effects. Psychotherapy is another treatment method, wherein the depressed individual seeks help from a qualified and licensed therapist. The therapist establishes a helping relationship with the

depressed client and may use a number of therapeutic approaches like psychoanalysis, behavior-modification, cognitive behavioral therapies and humanistic therapies (Wood, Wood & Boyd, 2006).

The psychotherapeutic technique employed by the therapist would depend on his/her counseling orientation and the needs of the client. However, one that has gained prominence is cognitive behavioral therapy. This method use behavioral modification techniques and at the same time help people take control of their disturbing emotional reactions by teaching them more effective ways in interpreting and thinking about their experiences.

Reference

Wood, S., Wood, E. & Boyd, D. (2006). Mastering the World ofPsychology2nd ed. Boston:

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