

Major depression disorder

[Health & Medicine](#), [Nursing](#)



Major Depressive Disorder Major depressive disorder represents an extreme form of mental disorder in which patient experiences severe and frequent episodes of sadness and low self-esteem. For nursing management, there are various symptoms that can be used for identification of MDD. Research indicates that there are various risk factors that can aggravate the chances of MDD's onset. There are several treatment methods that can be used separately or in the combination according to the severity and cause of depression. It is important to note that nursing management, psychologists and clinical specialists, advanced practice nurses can also play an important role in the treatment of patients facing MDD. In addition to that, community resources can also be used to reduce risks of MDD by having diagnosis, counseling and medication provided at the early stage. Major Depressive Disorder 1. Introduction Major depressive disorder is a mental disorder comprising the episodes of sadness and low self-esteem. There are various symptoms of depression that can be diagnosed clinically. Where its symptoms can be categorized as normal changes in mood, the severity and frequency of these changes can act as a criteria for being diagnosed as a patient of clinical depression. There are also various modes of treatments available such as medication, clinical and community interventions involving psychological treatments etc. It is important to note that MDD is one of the most common types of mental disorders, and most of the individuals suffer from depression at some point during their lives. According to Molina et al. (2013), women are more likely to suffer from MDD as compared to men. In addition to that, women are more likely to divulge into self-criticism and severe episodes of guilt, sadness, and sleep disorders. Major depressive

disorder can have a disabling impact on the patient's life and can affect quality of life and continuation of normal functions, i. e. eating, sleeping, studying etc.

2. Symptoms of Depression

Some of the common symptoms include: 1) Fatigue 2) Low self-esteem and guilt on a frequent or regular basis 3) Inability to make decision or concentrate 4) Sleeping disorders 5) Anhedonia or a loss of interest in regular activities or enjoyable activities 6) Significant weight variations (loss or gain) 7) Thoughts of death or suicide 8) Low sex drive (Depression Care Plan Guidelines, 2004). There are various risk factors that can further aggravate the severity of this disorder. Such risk factors include a loss of social support and relationships, financial or occupational problems, past history of depression, substance abuse and alcoholism, comorbidity, psychomotor agitation, side effects of medication etc (Schultz & Videbeck, 2009).

3. Causes of Major Depressive Disorder

Some of the possible causes may involve biological differences. Research has indicated that due to changes in physical structure of brain, individuals tend to suffer from depression. In addition to that, hormonal dysfunction and imbalance are some of common problems that patients of MDD may face. Such imbalance can be triggered by multiple factors including lifestyle choices and health issues. Depression is also more common in people who have reported family history of MDD. Therefore, other than personal circumstances, hereditary characters can also play some role in the onset of depression. Extreme events such as death of loved ones, highly stressful circumstances, financial issues etc, can also trigger MDD. Lastly, childhood trauma and issues can also cause depression. Major life changes, psychical and mental abuse, and personal conflicts are also some of the most common

causes behind major depressive episodes. 4. Treatment of MDD There are various treatment mechanisms that are used by specialists for treating this mental disorder. However, some of the common treatments include antidepressants, psychotherapy, electroconvulsive therapy, residential treatment programs, computerized cognitive behavior therapy, exercise therapy etc.; choosing one of these treatments or using their combination depends on the severity and nature of the condition. 5. Nursing Management of MDD Patients Nursing diagnosis and management is an important phase while treating a patient suffering from MDD. When symptoms identified can act as criteria for diagnosis, nursing management can include multiple techniques. Furthermore, psychological therapy is expected to address issues underlying this disorder. Nursing management begins with a clinical diagnosis involving “ ineffective coping, impaired social interactions, self-care deficit, chronic low self-esteem, social isolation, and other risks of MDD” (Schultz & Videbeck, 2009, p. 186). Necessary nursing interventions include providing a safe environment for the patient. In addition to that, assessing risks for suicides, observing time with a client, and looking for peculiar behavioral changes during psychological treatment can also help. There are various sources of psychological treatment available which may also include social treatment involving family and group therapy as well. All these therapies are intended to identify causes behind the on-set of MDD and to allowing a client to learn problem solving and stress management along with building self-confidence. Together with clinical specialists and psychologists, advance practice nurses can also play a vital role in the assessment and treatment of this disorder. Such nurses can employ psychoeducation while

dealing with patients of MDD. Other than psychoeducation, “ nurses can guide patients in a self-help form of treatment. Using bibliotherapy, a form of treatment where patients are provided a manual to work on nearly autonomously, nurses can give the support and direction that the patient may need to maintain focus” (Valdivia & Rossy, 2004). However, in order to equip nurses to play their role while treating MDD, general psychological and pharmacological information should be provided to them. Due to being a liaison between different departments of healthcare, primary care and advanced nurses are in a better position of intervening and ensuring that patients receive an optimal level of the coordinated service. In addition to having a personal care plan, patients of MDD can also access community resources for treating MDD. Such care plans include contacting representative of public health community. Usually, local healthcare settings also have alliances with social services that provide support for such patients. Furthermore, social groups and interventions can also help such patients. It is important that parties that are in touch with such patients, i. e. caregivers for elder patients, teachers and parents for children, play their role in using community resources available for MDD (Cash, 2004). Some of the community resources include adult community nursing services, children and family care services, rehabilitation agencies, psychotherapy services, palliative care services, continuing care and specialists’ services. References

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