Temporary feelings of sadness and grief are a normal byproduct of chronic illness. But, when negative emotions linger and drift into hopelessness and despair, it may be time for medical intervention.

By Trudie Mitschang

THE DIAGNOSIS OF a chronic illness can alter a person’s life in more ways than one. The illness itself can lead to physical limitations, changes in activity levels and sleep habits, and even loss of employment and income. There are doctor appointments to schedule, medications to manage and, often, a barrage of emotions to navigate. With such an onslaught of physical and mental challenges, it’s common to experience feelings of sadness, grief or even anger. But, when feelings of intense sadness or hopelessness linger, it could be a sign of depression.

Statistics show that people living with chronic illness are much more likely to also experience symptoms of depression, and the risk is even higher for those who already have a history of depression. According to the American Psychological Association, depression is one of the most common complications
of chronic illness. It is estimated up to one-third of individuals with a serious medical condition experience symptoms of depression. In fact, the rate of depression among individuals who have suffered from a heart attack is between 40 percent and 65 percent.¹

Unfortunately, because depressive symptoms can mimic the symptoms of many chronic illnesses, chronically ill patients dealing with depression are frequently misdiagnosed.²

Here are some common warning signs of depression:

- Feelings of hopelessness and despair
- Changes in sleep patterns (insomnia or sleeping too much)
- Social isolation and withdrawal
- Weight loss or gain
- Loss of interest in hobbies and activities
- Frequent, unexplained crying
- Suicidal thoughts

While any chronic condition can trigger depression, the risk increases in proportion to the severity of the illness. And, when an illness leads to significant disruption in a patient’s life or daily routine, the odds increase even more. Treatment options for depression in chronically ill patients are the same as those for the general population and include psychotherapy, medication, lifestyle changes or any combination of these, depending on the patient and the severity of symptoms. For some, alternative therapies such as meditation, acupuncture or dietary supplements can effectively relieve milder symptoms. Seeing a physician for an accurate diagnosis of depression is always the first step to finding an effective treatment plan.

Talking It Out: How Behavioral Therapy Can Help

Because depression that is triggered by a life event like a chronic illness diagnosis is more likely to be linked to negative thought patterns and emotions (as opposed to a chemical imbalance), behavioral therapy is often an effective treatment choice.

Psychological therapy (also known as talking therapy) can help individuals battling depression by teaching them to change negative thought patterns and giving them specific coping skills. This type of intervention may also have long-term benefits that linger after therapy sessions have concluded, since a therapist can help patients identify thoughts, behaviors and triggers that could lead to a recurrence of depressive symptoms.

There are several types of effective psychological treatments for depression, as well as different delivery options. Some people prefer to meet one-on-one with a mental health professional, for example, while others find they get more out of a group therapy environment. “A behavioral medicine therapist will focus on how the chronic illness fits into the person’s life story, and where it may be causing problems. It all depends on what the person wants to work on in therapy,” says Tiffany Taft, PhD, co-founder of Oak Park Behavioral Medicine in Evanston, Ill. “Some people are newly diagnosed and are just trying to wrap their brains around the whole thing, so we can help with that through education and just giving the person a safe place to talk about their illness. Some people are anxious about their symptoms, so we help treat this anxiety by evaluating what’s triggering it and teaching relaxation techniques. Or, a person may be depressed and feeling isolated, so we help them cope and increase their social interactions.”⁴

Statistics Show that People Living with Chronic Illness Are Much More Likely to Also Experience Symptoms of Depression.

According to a report by the Institute of Medicine,⁴ mental health treatment goals for people with a chronic illness include:

- Learning to cope with the intense, sometimes debilitating, emotions related to their illness
- Changing behaviors to minimize the impact of their disease and maximize treatment protocol
- Managing disruptions their illness may cause to their work, school and family life

Types of Talk Therapy

There are several types of therapies that focus on changing negative thought patterns, and each uses specific intervention techniques. The most common therapies include cognitive behavior therapy (CBT), interpersonal therapy (IPT), mindfulness-based cognitive therapy (MBCT) and dialectic behavior therapy (DBT).

CBT is a structured psychological treatment that focuses on how the way people think (cognition) and act (behavior) affects how they feel. CBT is considered one of the most effective treatments for depression and has been found to be useful for a wide range of ages, including children, teens, adults and seniors.⁴ CBT
involves working with a licensed mental health professional to identify thought and behavior patterns that are either triggering depression symptoms or blocking the recovery process. “The basic idea of CBT is how we think affects how we feel emotionally and physically, and that affects how we behave,” says Dr. Taft. “I like CBT because it empowers people. We ultimately only have control over ourselves and how we think and react to what life brings us. So one of the first things we have clients do is start paying attention to their self-talk, especially as it relates to their illness.”

IPT is a structured psychological therapy that focuses on problems in personal relationships and the skills needed to deal with them. It is based on the idea that relationship problems can have a significant effect on someone experiencing depression, and can even contribute to the cause. In the case of a chronically ill patient, the illness can cause significant rifts in marriages, friendships and work relationships, leading to feelings of isolation and depression. IPT helps individuals recognize negative patterns in relationships and offers communication techniques and coping skills to improve relationship dynamics.

**WHEN TALK THERAPY IS NOT ENOUGH, PATIENTS MAY BE PRESCRIBED MEDICATION TO TREAT DEPRESSION.**

MBCT involves an intervention called mindfulness meditation. This technique teaches patients to focus their thinking on the present moment while paying attention to feelings, whether pleasant or unpleasant, without trying to resist or change anything. Initially, this approach focuses on physical sensations (like breathing in and out), but eventually it moves on to feelings and thought patterns. MBCT is thought to be effective in preventing depression from returning because it encourages patients to notice feelings of sadness and negative thinking patterns early on, before they become a habit.

One study noted that MBCT was especially effective when it came to treating individuals who had been unsuccessful with other interventions, including behavioral therapy and medication. According to the study authors, “The results of this preliminary audit suggest that MBCT is an acceptable treatment for patients who have only had a partial response to antidepressant medication and/or standard individual CBT. Further, for many patients, it appears to be effective in significantly reducing levels of depression, even in those who start with a more severe pattern, including suicidal depression.”

DBT is a psychological treatment that combines CBT with two additional techniques:
- Dialectics, which relies on discussion or dialog to explore and resolve issues
- Mindfulness, which encourages individuals to become more aware of and present in the moment, so that concerns about the future or rumination about the past do not interfere with their ability to enjoy life

DBT is particularly effective for patients who tend to view life and circumstances as polarized (right or wrong). The technique was originally developed as a treatment for patients suffering from borderline personality disorder, but in recent years, it has been proven effective for treating patients with a variety of symptoms and behaviors associated with mood disorders, including depression. Patients who decide to pursue DBT as a treatment option participate in both individual and group sessions during therapy.

**The Medication Debate**

When talk therapy is not enough, patients may be prescribed medication to treat depression. These medications, also known as psychotropic drugs, can be highly effective but are known to come with a variety of risks and side effects. For patients already dealing with a chronic illness and a potentially lengthy list of existing prescriptions and medications, adding an additional pharmacological intervention should only be considered under the close supervision of a medical professional.

Psychotropic drugs, also known as antidepressants, typically work by changing or balancing the amount of important chemicals in the brain called neurotransmitters. Some mental health issues show improvement when neurotransmitters such as dopamine, serotonin and norepinephrine are increased or decreased. Psychotropic drugs are usually prescribed by a psychiatrist, a psychiatric nurse practitioner or a primary care physician (as opposed to a behavioral therapist). In some states, clinical psychologists may be able to prescribe antidepressants.

For situational depression, such as the type triggered by a diagnosis of chronic illness, psychotropic drugs in combination with psychotherapy may be recommended, with the medication serving as a supplement to rather than a replacement for therapy.
The most commonly prescribed psychotropic drugs include:¹⁰
• Duloxetine (Cymbalta)
• Trazodone (Desyrel)
• Venlafaxine (Effexor)
• Fluoxetine (Prozac)
• Sertraline (Zoloft)
• Escitalopram (Lexapro)

As with all medicines, the use of antidepressants can lead to side effects. Some, like jitteriness, strange dreams, dry mouth or constipation, may go away on their own. Others, like sexual dysfunction, may linger. It’s important to note that side effects from antidepressants vary from patient to patient and can sometimes be alleviated by simply switching medications. Anyone embarking on a treatment plan using prescription antidepressants should be closely monitored by a physician who can keep tabs on unwanted side effects and make dosage adjustments as needed.

How Lifestyle Changes Can Help

Patients diagnosed with chronic illness have typically experienced unwanted lifestyle changes such as loss of mobility, digestive problems that lead to dietary restrictions, and poor sleep quality. These changes alone can trigger circumstantial depression. While advice to “get out more” or “eat healthier” can sound trite in the face of serious depression, the fact remains that in milder cases, lifestyle adjustments have proven extremely beneficial.

Eating to beat the blues. Individuals suffering from mild depression can benefit from avoiding foods high in refined sugar and saturated fats. Instead, they should incorporate healthy foods containing omega-3 and omega-6 fatty acids, including those found in fish, nuts, fresh fruits and vegetables and olive oil.

Amino acids are also a healthy dietary aid when it comes to banishing depression. Neurotransmitters, the messengers in the brain, are made of amino acids and play an important role in mental health. Foods rich in amino acids include animal proteins; legumes, nuts and seeds; dairy products; and whole grains.

The role of exercise in mental health. Physical activity increases your body’s production of natural antidepressants. According to the Mayo Clinic, exercising for just 30 minutes a day three to five days a week can help alleviate depression without the need for medication. Regular exercise eases depression in a number of ways, including:
• Releasing feel-good brain chemicals that may ease depression (neurotransmitters, endorphins and endocannabinoids)
• Reducing immune system chemicals that can worsen depression
• Increasing body temperature, which may have calming effects

Addressing Depression as a Part of the Healthcare Plan

For the chronically ill, successful treatment of depression is an important component of the overall healthcare plan. Addressing mental health issues leads to improved symptom management and quality of life, and in many cases, higher degrees of compliance when it comes to other methods of care. According to the National Institutes of Health, more than 80 percent of depressed people can successfully be treated using talk therapy, antidepressant medication or both.⁹

FOR THE CRONICALLY ILL, SUCCESSFUL TREATMENT OF DEPRESSION IS AN IMPORTANT COMPONENT OF THE OVERALL HEALTHCARE PLAN.

When considering treatment options for depression, especially if it was triggered or exacerbated by a chronic illness diagnosis, doctors are advised to first do a thorough review of the treatment plan for the chronic disease itself. By taking an inventory of current medications, addressing patient compliance issues and even meeting with caregivers and family members to address emotional support concerns, mental health improvements may be attained without the need for specific depression-related intervention.

TRUDIE MITSCHANG is a contributing writer for IG Living magazine.

References