Diabetes & Depression Double Trouble



How do I know if I am depressed?

Ask yourself two questions:

1. Have I lost interest in thehings I usually like to do and has this lasted more than two weeks?

2. Have I felt down, depressed, sad and blue more days than not over the last two weeks?

If your answer to these two questions is yes, then seeking further evaluation is important. For example, talk with family or friends and ask them if you have seemed depressed. Look at the list on the right and see how many symptoms you may have.

Talk with your doctor or diabetes care and education specialist about taking a simple test to evaluate your level of depression.

Diabetes and depression seem to hang out with each other far too often. Sometimes diabetes seems to lead the way and sometimes depression leads. One makes the other worse and vice versa.

When these two are together it is difficult to find the energy to do anything. The more unmanageable your diabetes, the less likely you are to take steps to change your mood. You might not do the things you would normally do to stay healthy, like exercise, healthy eating, seeing friends and generally just being active. You may be more likely to watch TV, eat sweets, sleep too much or not enough, and distance yourself from others. This cycle is very painful and requires strength and persistence to find your way out.

Healthcare professionals who work with people who have diabetes know that they are far more likely to become depressed. We are not referring to just diabetes distress, but to depression; a mental health problem of greater depth and seriousness. Depression has symptoms that last a minimum of two weeks and can go on for months. The symptoms (see chart below) are serious and complicate diabetes management, so management of your diabetes often declines which in turn worsens the depression.

Symptoms of Depression

You must have 5 or more of these most of the time over at least a two-week period to diagnose a major depression. Even if you have less than 5, you should still speak to your healthcare professional.

- Fatigue.
- Feelings of worthlessness, guilt, excessive sadness.
- Problems getting to sleep or sleeping too much.
- Weight loss or weight gain.
- Difficulty concentrating or making decisions
- Loss of interest in usual activities
- Thoughts of suicide
- Feeling restless or slowed down

Is it bad to have these feelings?

We often have shame about how we feel or guilt that we are not reacting in the "right" way. The truth is, there is no right or wrong feeling in reaction to diabetes.

Feelings can give us motivation to do things, or help us connect with others.

It is important to have the right resources in dealing with these feelings and behaviors so that they are not expressed in unhealthy ways.

How do I know it's not just my diabetes?

You don't! But if you had an evaluation for depression and it indicates you have some depression then don't delay treatment because it can compromise diabetes care.

Here is the dilemma; you must treat both at the same time. You are probably thinking "but I can hardly get out of bed, much less treat both of these i llnesses." Since each causes the other to become worse, it is critical to treat both. It can be a long battle, but neither can get better unless both are improving. The good news is that as one improves the other is likely to improve.

How is depression treated?

Depression is very treatable and you have choices about how you want to treat it. Some of this depends on what is available for you and some on your preferences.

Talk therapy has proven to be quite effective in treating depression. A treatment known as cognitive behavioral therapy (CBT) is very effective as well as other forms of psychotherapy. Support groups can also be helpful. The American Diabetes Association's Community (iabetes.org/community) feature lists a variety of local support options as does JDRF's typeonenation.org for those with type one diabetes.

