

## Depression

**Depression is probably the most familiar mental health issue. Churchill suffered with his 'Black Dog' and William Styron with his 'Darkness'. In America recent research indicates that 1 in 10 of the population is suffering from more or less serious depression at any one time. It is the most common presenting problem mentioned by new patients coming to A.P.E.L.**

**Not wanting to get up in the morning:** sick feeling in the stomach; tense muscles; feelings like – 'what is the point? nothing feels any good, no-one cares, no-one understands, I never do anything right, no-one will want me.' Feelings of humiliation and failure make 'mistakes' roll around the mind in a persecuting way

Depressed people usually have low levels of serotonin and norepinephrine. Doctors often prescribe Prozac which has become a household name. This seems to benefit some people but studies suggest that only a third achieve a full remission of their symptoms and a third experience no improvement.

**The triggers** which have been identified are well known: losing a parent at an early age; moving house; other bereavements or the breakdown of important relationships leading to feelings of abandonment or rejection. But what of those people who do not associate their depression with these sort of events?

**At the core is a fragile sense of self – a deep well of inner hopelessness which brims over periodically when a vulnerable person's stocks of well-being are depleted.**

If there is a sort of 'relative' lodged somewhere in your mind muttering: 'you're selfish; just get on with it; you are pathetic; your sister is much better or prettier than you; you always make a mess of things;' it leaves a longing to be loved but with no hope of being loved, which ultimately results in low ambition and low achievement.

**Babies who don't get the attention they need** and don't feel protected from distress are forced to become aware of feelings of helplessness and powerlessness too soon. If this happens before they have developed a capacity to regulate their distress or to act in their own interests, they may resort to not feeling, playing dead emotionally, withdrawing into a helpless state. This state of affairs can become a stuck part of the personality. Allan Schore (a famous neuroscientist) has discovered that entrenched feelings of hopelessness come about as the result of not being able to put things right, with no way of redeeming the self and recovering others' good opinion or love.

**With a therapist alongside –**

When the patient has a sense that their therapist is attending to their feelings with great care and thoughtfulness and is not responding in an irritable or judgmental way – there can be a glimmer of hope that, together, it might be possible to find a different place where helplessness doesn't have to dominate the mind. An enduring experience of a therapist who can manage the patient's feelings, however

angry or painful, can enable the patient to internalise that experience and respond to their own feelings in a careful, thoughtful, sensitive way instead of reacting with criticism of their own feelings and self.

At the beginning of therapy depressed patients often feel beyond help which is why they may have put off asking for help for a long time. They may feel they are hopeless cases. In time this can change with the help of a robust relationship with their therapist which survives the negative feelings.