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Other Bumps in the Road

DEPRESSION

By Mary Greiner

Everyone has moments when they feel low or blue. What is the difference between one of those moments and the kind of depression that requires professional intervention? Since as many as one in five people will suffer depression during their lifetime, you may want to learn more about what depression is and how to treat it.

Imagine your emotional state as a kind of seesaw. When you are on top, you feel great, the view is fantastic, and even if it's scary, you know you have a grip on things. When you drop down, the view is dramatically different, but you know that through your own efforts you can get back on top. Without a partner, however, you can push yourself up only so far. If the seesaw represents your mood shifts, your brain chemicals are your partner. When your brain chemicals are functioning properly, you feel fine or better. When certain chemicals drop in production (sometimes with no known cause, and other times the result of a painful event, such as a significant loss), the mood seesaw takes you down. You can still push yourself, but it takes more work. If the brain chemistry is altered significantly enough, however, then you feel abandoned on the mood seesaw, without a partner to help you reach an emotional high.

As our mood darkens, our behavior changes. We struggle to meet our professional and personal obligations, and let more and more go undone. We procrastinate, get irritable, can't concentrate, and may feel fatigued all day, no matter how much sleep we are getting. Nothing is fun anymore. We may feel worthless and guilty. We may feel nothing but a sort of numbness. We may sit and stare at the documents in front of us without really comprehending what they mean, or play computer games instead of working. We may use mood altering substances (such as alcohol, sleeping aids, or chocolate) or engage in mood altering behaviors (such as looking at pornography, shopping, or gambling).

As your depression deepens, you may experience

changes in your appetite (not hungry or always hungry) and your sleep patterns (can't fall asleep or wake up in the middle of the night and can't go back to sleep). You may think that life is meaningless, and that "they" would be better off without you. You may decide that death is the only way out, and fantasize about some sort of accident that takes you out of your misery. Or, you may begin to actively plan your death.

Therapy and Antidepressants

The more of these symptoms you exhibit, the more likely it is that your depression requires professional intervention. Even though depression makes any new task seem impossible, it is vital that you reach out for help as soon as possible. Studies indicate that the longer the depression lasts, and the deeper the depressive mood may be, the more likely it is that future episodes of depression will happen. Research has shown that therapy or a combination of medication and therapy works best to lift depression.

There are many options when it comes to choosing a therapist. Whereas all lawyers follow the same educational path and are licensed by the same authority in their state, therapists can choose many educational options and can be licensed by different agencies. Psychiatrists, psychologists, and social workers are the most common types of therapists. You will probably want to get a referral from your doctor, a family member, colleague, or friend. However you go about choosing your mental health professional, the most important variable is whether you feel comfortable with that person and believe you can trust that person. Based on many studies, the therapeutic relationship has been found to be the key to healing, and therapy may be all you need to get better.

If therapy alone is not enough to resolve your depression, and you and your therapist agree that you are a candidate for antidepressants, you may need to see another doctor for the prescription unless your therapist is licensed to prescribe medication. When it comes to choosing the right doctor to prescribe antidepressants, many people go first to their internist, family doctor, or OB/GYN. Some of these specialists have read the literature and know how to treat depression. Others have not and may know as much

about your depression as the legal software salesperson knows about trying your lawsuit. Your therapist or internist may also refer you to a psychiatrist-a specialist in brain chemistry-who will know the most about treatment and what you can expect as your depression responds to the medication.

There are many antidepressants to choose from. You may be one of the lucky ones who is able to regain emotional balance with the first drug you try. Others must try several different drugs in order to find one that works or that has the fewest side effects. Some people with milder forms of depression respond well to the herb St. John's Wort. Because the manufacture of this herb is currently unregulated, you should seek the advice of a doctor, pharmacist, or herbalist for the best brand and correct dosage for you

Antidepressants usually must build up in one's system to have a noticeable effect. Some people must take the drug for two, three, or even four weeks before noticing any real change. The people around you may, in fact, notice the change first. Taking your medication with consistency is vital. Stopping the medication just because you are feeling better can cause a rebound into deeper and longer depressions. It is crucial that you continue the medication until you and your doctor agree your episode of depression is past.

If you believe you may have depression, please do seek help. Depression is not a weakness, nor must you recover from it alone. Your depression is not affecting only you, it affects everyone who depends on you-your family, friends, colleagues, and clients. Give yourself a break and get the treatment you deserve.

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