

Depression places social stigma on patients, costs \$83 billion annually

As Margery Ivester joined some fellow parishioners of St. Paul, Ellicott City, in a recent gardening project at the church, she noticed that she felt more vibrant and content than she had since being diagnosed with depression some 13 years ago.

“It was a peaceful energy that has been missing since I was first prescribed medication to treat my depression,” said Ms. Ivester, 46, of Ellicott City. “I wasn’t exhausted. I wasn’t gloomy. I didn’t feel low. Having my hands in the dirt and smelling that sweet spring air made me feel alive, but calm at the same time. I think the community camaraderie reinforced that feeling.”

For more than a decade, she has been prescribed a menagerie of medications to regulate her bi-polar disorder – a combination of clinical depression and mania – mixed with psychotherapy and physical exercise, plus a few extended stays in the hospital.

But still, the twice-divorced mother of four hasn’t found that magic solution to transform her back to the happy state she enjoyed in her early 30s, and admits her condition is often debilitating, causing her sometimes to be manically disorganized, and so depressed she has trouble getting out of bed.

It’s a condition that plagues millions of Americans and costs an estimated \$83 billion annually in treatment, lost productivity, lost income and lost lives, said Dr. Elias K. Shaya, chief of psychiatry at Good Samaritan Hospital in Northwood.

“There is no question that some people may not benefit from medication, and some people need a combination of things to recover,” said Dr. Shaya, 50, a parishioner of Cathedral of Mary Our Queen, Homeland. “Like every other disease, in some cases, we need several elements of intervention.”

In many cases, patients have suffered from depression for a long period of time before seeking treatment and once they have been prescribed medication, the remedy may lift the severe aspects of the disease, but the patient is so conditioned

to functioning in a depressed state, they continue that mode in their daily living, he said.

Because depression has such a negative social stigma attached to it, the symptoms often cause patients problems with family, friends and coworkers who don't understand it's a physical disease of the body and brain and not a matter of the person being lazy or weak of mind, Dr. Shaya said.

"The name mental illness and how we deal with it, stigmatizes them, and motivates them to stop taking their medication, against the recommendation of their doctor," he said. "Also, once the medication starts making them feel better, they often mislead themselves into thinking they are well, but it was the medication that was making them well. Then they cycle."

Though the medical community has seen successful treatments through antidepressant medication, psychotherapy, shock treatments and phototherapy - light treatments - Dr. Shaya said he has also seen remarkable results from physical exercise.

"The difference there is when using medications; we're introducing something that is foreign to the body and trying to readjust the chemicals of the brain and in psychotherapy, we're in a sense coaching," he said. "But with exercise, it's been found in multiple studies, to be a very effective treatment.

"It appears to naturally introduce to the brain the chemical changes that are required to normalize the brain function," Dr. Shaya said. "So it reverses the chemical disruption from this illness that we call depression."