

Medicines To Treat Depression

Depression

Clinical depression is a serious medical problem (condition) and is more than just feeling “down” or “blue” for a few days.

There is no single cause for depression. It likely results from a combination of sources, including genetics and life experiences. Depression can run in the family or be caused by life events such as a death, changing jobs, giving birth, moving or an illness.

Symptoms of Depression

How severe and how long depression symptoms last will vary among people. Symptoms can include:

- feeling sad, irritable or “empty”
- feeling guilty or worthless
- loss of energy or interest in hobbies
- problems with concentration, memory and decision-making
- problems with sleep (too little or too much)
- changes in appetite and weight
- feeling hopeless and having thoughts of suicide
- having unexplained physical symptoms.

How Your Brain Responds to Depression

Chemical messengers (neurotransmitters) in your brain carry messages (nerve impulses) from one nerve to another. Three such messengers are serotonin, norepinephrine and dopamine. They are responsible for your moods (how you feel).

During depression, your brain releases fewer neurotransmitters than usual. This affects how messages get carried to certain areas of the brain.

Any of the following can increase your risk for depression:

- death of a loved one
- divorce
- job change
- giving birth
- moving
- perceived stress of any kind
- major illness such as diabetes, cancer, heart disease, or Alzheimer’s or Parkinson’s disease
- drug or alcohol abuse
- prescription medicine (side effect)
- family history of depression
- changes in hormones.

When Medicines May Be Prescribed

Medicines can be helpful in treating depression by boosting neurotransmitters in the brain. There are many different types of antidepressant medicines, depending on which of the messengers are affected. Examples of medicines that increase serotonin include:

- fluoxetine (Prozac®)
- escitalopram (Lexapro®)
- citalopram (Celexa®)
- sertraline (Zoloft®)
- paroxetine (Paxil®).

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Examples of medicines that increase serotonin and norepinephrine include:

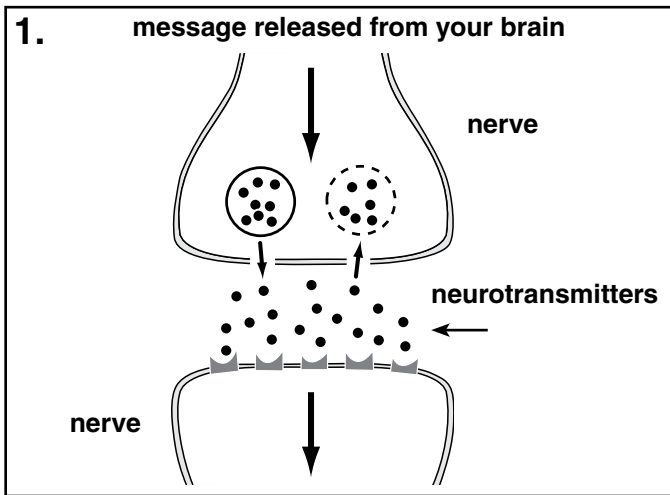
- venlafaxine (Effexor XR®)
- duloxetine (Cymbalta®).

Bupropion (Wellbutrin XL®) is an example of a medicine that may increase norepinephrine and dopamine.

Important: Your medicines may take several weeks to start working (“lag time”). Make sure to keep taking your medicine, even if you do not notice an improvement in your symptoms right away.

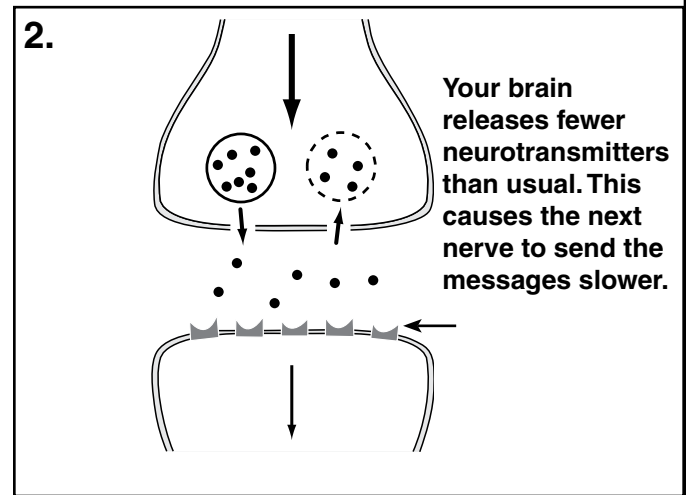
How Antidepressant Medicines Work

How normal nerves pass on messages



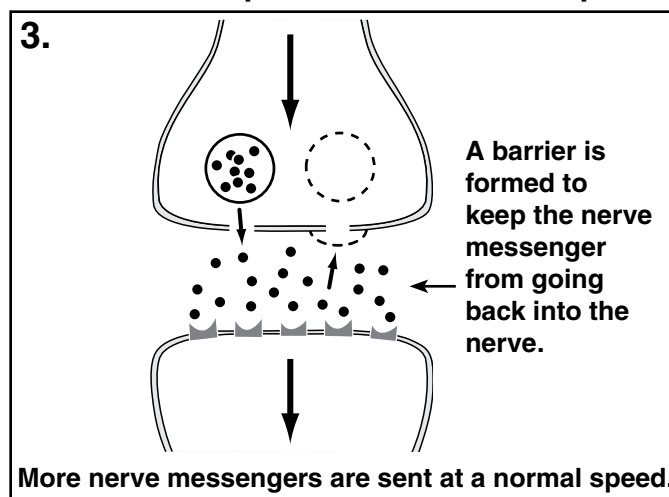
Neurotransmitters are chemicals that send brain messages from one nerve to another. They are stored in nerve endings. When there is a balance of neurotransmitters, the nerve is able to send a normal message to the next nerve.

How nerves react to depression



During depression, your brain releases fewer neurotransmitters than usual. This means the nerves send messages slower than they normally would. Neurotransmitters affected are serotonin, norepinephrine or dopamine.

How antidepressant medicine helps



Medicine to treat depression works by keeping the neurotransmitters from being reabsorbed into the nerve endings. As a result, levels of serotonin, norepinephrine or dopamine are increased to a normal level. The nerves are able to pass messages on at normal speed.

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