

From Blues to Blue Skies **Jude LaClaire, Ph.D**

The glitter and tinsel of the holidays has lost its shine. The gifts are in use, returned or 'saved' for some time in the future. The days are shorter and the nights are longer. The ink is barely dry on the New Year's resolutions you made again this year. The bills are stacking up on your desk and the bank account is looking slim. This is the time of year when depression may rear its ugly head. You have the blues and it's not music to your ears.

The World Health Organization (WHO) tells us that depression is currently the fourth most debilitating cause of suffering and disability worldwide (behind heart disease, cancer and traffic accidents). They predict that by the year 2020, depression will be the second most debilitating human condition.

The National Institute of Mental Health estimated, in 1995, that the cost of depression is \$54 billion annually. This results from days taken off of work, poor job performance, the cost of psychotherapeutic care and suicide. The emotional cost for those who suffer from depression is the grief, pain and despair of a 'joyless' life and potentials never realized. The physical cost can be acute and chronic illness and self-destructive habits. Socially, a person is often isolated, having relationship problems such as family conflict, poor parenting and divorce.

Did you know that the 1997 combined sales of Prozac, Zoloft and Paxil topped \$5.5 billion? Many mental health professionals and the advertising blitz by drug companies are primarily responsible for convincing the American public that depression is caused by a hereditary chemical imbalance and that they will have this condition for the remainder of their lives. Their only treatment is to take anti-depressants. This is an inaccurate and unproven view of depression!

What do you think are the causes of depression? Would you say, *a*) genetics, *b*) a biochemical imbalance, *c*) cognitive distortions, *d*) a lack of environmental and social rewards, *e*) social inequities, *f*) cultural/familial influences? The answer is "yes" to all of the above choices. Clearly a positive way to help people suffering from depression is to have a knowledgeable professional educate them about the disorder and facilitate the learning of skills needed to overcome causes *c, d, e* & *f* listed above. If behaviors caused by biochemistry and genes are still present, overwhelming a person to the point that normal, healthy functioning is impossible, then the person should be helped by a professional who is experienced and knowledgeable about psychotropic drugs.

The research shows that people who just take medications for depression are 80% more likely to relapse within three years. People who participated in good cognitive, behavioral and interpersonal psychotherapy were much less likely to relapse. People who combined psychotropic drugs and appropriate psychotherapy typically did better than either method of treatment by itself. Why do you think this happens? A summary of research findings indicates that genetic predisposition accounts for about 30% of the 'cause' of depression. There is no depression gene to be found. In many cases, that means that 70% of the causation is to be found in the environment or learned behavior. This makes Major Depressive Disorder a very treatable illness.

It is important to note that research does not take into account the very large factor of individual differences. The 'average' numbers or statistics do not take into consideration people at more extreme ends of the continuum. It is always important to remember that your situation is unique to you. There may be other contributing factors affecting your depression. Some physical

illnesses, chronic pain and certain drugs can cause depression. Bi-Polar Disorder is much more heavily influenced by genetics. (About 70% genetically related and 30% environmental causes) This is why consultation with knowledgeable and experienced health professionals is absolutely necessary to assist you in assessing your situation and the treatment best for you.

The good news is that you can be in charge of your own education about depression and choose a team of health professionals to assist you in your recovery. Michael Yapko, Ph.D., in his book, *Breaking the Patterns of Depression*, outlines some extremely important and useful approaches in overcoming depression. One of the tools or skills to be learned is to 'reframe' situations in ways that are 'hopeful' rather than 'catastrophic' It's really the old idea of the optimist and the pessimist. One sees life as a 'bed of roses' while the other one sees it as a 'crown of thorns.'

A recent, wonderful example of an individual using creative, positive reframing was in the Kansas City Star article.(Kansas City Star, December 2, 2001) A young, married, mother of two sons was diagnosed with breast cancer. She prayed to God for help when she learned of the diagnosis. She got the answer, 'Conehead.' She was puzzled and confused by this. The only conehead she had heard of was a family of characters on Saturday Night Live. She bought herself a 'conehead', plopped the rounded, rubber flesh-colored cone on her head and laughed her way through her next treatment.

She says, "I started a one-woman attitude adjustment crusade. Humor was my weapon of choice. I fought fearlessly against pessimistic self talk, and I killed all the depressing thoughts in my mind." She has been able, through surgeries, radiation and chemotherapy to be pronounced 'cancer free.' She is continuing to use her sense of humor, wear funny costumes and create more positive attitudes. She is currently working on a book entitled, *You Don't Have to Be Serious to Have a Serious Illness*. This is an example of how changing ones perception of a problem can help to heal it.

Try this exercise and see what happens. One time each day when you have a pessimistic, despairing, hopeless or negative thought, re-frame the thought in a way that can help you feel more hopeful, optimistic and positive. It could involve a sense of humor, a different way of looking at the problem, a different perspective or different language.

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