

DEPRESSION & BRAIN INJURY

A number of factors influence a person's level of depression following a brain injury.

It is important to consider each of the following factors:

- Life situation
- Level of traumatic stress experienced
- Person's perception of their life situation
- Personality and emotional well-being before the injury
- Nature of the person's brain injury
- Stage of recovery.

Depression is a common outcome following a brain injury. The survivor may be confronted with not returning to work, cognitive deficits that will never completely disappear, loss of friends, fatigue and difficulty with managing anger and frustration. On top of this they may have lost the strategies used in the past to combat depression and these will need to be relearned.

SIGNS AND SYMPTOMS

The common signs and symptoms of depression include changes in:

- Mood e.g. extreme sadness, despair, flat emotional reactions and irritability
- Changes in thinking patterns e.g. a sense of hopelessness, pessimistic beliefs
- Behavioral changes e.g. reduced attention to physical appearance, withdrawal
- Physical symptoms e.g. sleep disturbance, appetite changes, tiredness.

Some of the changes described are common symptoms following a brain injury, which means it can be difficult to recognize the development of depression. People's experience of depression usually occurs on a continuum ranging from very mild to very severe. The most important consideration is therefore the severity of the person's depression and how long it lasts. Many people are able to self-manage their depression using strategies. Other people require psychological support or other forms of treatment from professionals.

PERSONAL STRATEGIES FOR COPING WITH DEPRESSION

The following strategies have been suggested by people with brain injury and may be useful.

- Taking a nap
- Watching television
- Socializing
- Mental stimulation
- Self-Talk or thought challenging
- Listening to music
- Working on a personal project
- Walking or other exercise
- Scheduling activities and making short term plans

Self-Talk

Self-Talk is a useful technique for modifying inaccurate and upsetting thoughts. It requires the practiced art of replacing upsetting thoughts with constructive explanations. For example instead of thinking, "I'm useless and I never get anything right," the person can replace their thoughts with a constructive explanation such as, "My memory let me down, I will make better use of my diary in future." A variation of Self-Talk is to prepare a rethink card. Rethink cards contain helpful coping statements for particular situations. The card can be carried around and

read when the person notices unhelpful thoughts in certain situations e.g. a coping statement for being stared at while riding public transport: "People may stare at me because they are naturally curious about why I walk with a limp - that is part of human nature".

TREATMENT APPROACHES FOR DEPRESSION

It is common for some people to experience depression after a traumatic event and require additional treatment to the strategies suggested. Treatment options include the following:

Psychological therapy

This form of treatment is usually most effective with mild to moderate or moderate to severe forms of depression. In general, people with very severe forms of depression will require other interventions e.g. hospitalization or medication. After a person's state of mind has improved they may be more likely to benefit from psychological support to further reduce symptoms and provide ongoing management.

Antidepressant medication

Medication is often used in association with psychological therapy for the person with depression who does not respond to psychological therapy. Medication may help to relieve depression by adjusting the chemical levels in the brain. Depression is often caused by an excess or a deficiency of particular chemicals in the brain. Such chemicals are created naturally within our bodies and affect our moods, thinking, behavior, sleep, energy levels, appetite, concentration and other daily functions. In cases of depression, a doctor may suggest medication to address any chemical deficiency that may exist.

The choice of medication depends upon a range of considerations such as:

- Side effects
- The person's previous response to medication
- Interaction with other medication being taken
- Safety in overdose.

Most antidepressants take about two weeks before a person will notice any change in mental and physical state. Medication needs to be trialed for at least 4-6 weeks and should generally be taken for approximately 6-12 months even if the person feels better after a few months. People are advised to see a general practitioner or psychiatrist to discuss issues relating to medication.

Suicide

Given the many difficulties faced by someone who has survived a brain injury, it can be quite common to feel suicidal at times. It is crucial to look for support or see a doctor during this period as the right support will normally allow the person to get through these deep depressive episodes.

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