

Depression Self-Test

If you suspect that you might suffer from depression, complete the following self-test. Keep in mind: depression is a treatable condition.

Over the past two weeks, how often have you been bothered by any of the following issues?

Check one answer per question.

	Not at all	Several Days	More than half the days	Nearly every day
1. Little interest in doing things you usually enjoy				
2. Feeling down, depressed, or hopeless				
3. Trouble falling/staying asleep, or sleeping too much				
4. Feeling tired or having little energy				
5. Poor appetite or overeating				
6. Feeling bad about yourself – perhaps that you are a failure or have let yourself or your family down				
7. Trouble concentrating on things such as reading the newspaper or watching television				
8. Moving or speaking so slowly that other people notice, or the opposite – being so fidgety or restless that you move around more than usual				
9. Thoughts that you would be better off dead, or desires to hurt yourself in some way				

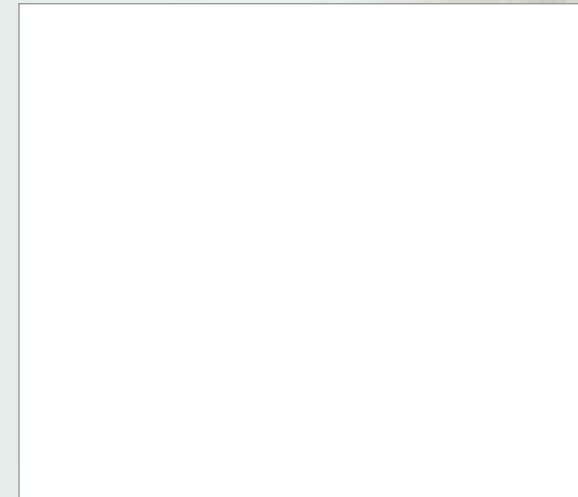
10. If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all _____
 Somewhat difficult _____
 Very difficult _____
 Extremely difficult _____

If you checked one or more of the shaded boxes it might be worthwhile to discuss your answers with your healthcare provider.

Take Charge of Your Health

If you are struggling with depression or other mood disorders, ask your healthcare provider about all of your treatment options. This could be your first step toward a happier and healthier tomorrow.



Depression

What is the connection between depression and your nervous system?



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Recognizing Signs of Depression

Everyone gets sad or down at one time or another. But for many people, depressed feelings persist for weeks, months, and sometimes years. Like diabetes or heart disease, depression is a serious medical condition that can grow progressively worse if left untreated. Long-term depression interferes with how well we succeed in the world and how we relate to our colleagues and loved ones. Long-term depression darkens our thoughts, drains our energy, and drags at our work life and special relationships.

Depression affects approximately one out of every ten adults in the U.S. Fortunately, depression is highly treatable. The approach depends on the type of depression. Healthcare professionals recognize four categories of depressive disorders.

Major Depression

- This is the most severe form of depressive disorder. A greater number of symptoms are present and they are more acute than in other categories.

Reactive Depression

- This is mild-to-moderate depression that results from traumatic events, such as a divorce or job loss.

Dysthymic Disorder

- This is a chronic, low-level depression that continues for years. Individuals with dysthymia may experience major depression when a life crisis occurs.

Depression (not otherwise specified)

- This category is used by healthcare professionals when the symptoms do not match other categories.

Facts about Depression

Depression that lasts more than several weeks begins to affect every aspect of life. The most common symptoms of long-term depression include loss of interest or pleasure, feelings of overwhelming sadness or fear, changes in appetite (weight gain or loss), disturbed sleep patterns (insomnia or sleeping more than normal), changes in levels of activity (restlessness or significantly slower movement), fatigue (both mental and physical), lowered self-esteem, and thoughts about death or suicide. Depression can affect children, teens, and adults.

- Depression is highly treatable, yet only about one-fifth of the more than 18 million American adults suffering from a depressive disorder are currently under the care of a physician or a psychologist.*

- Studies indicate that 54 percent of the American population believes depression is a personal weakness, and 41 percent of depressed women are too embarrassed to seek help.*
- Depression may develop from a complex set of risk factors, including genetic makeup, brain chemistry, personality, and life events.
- Depression is commonly misdiagnosed and under-treated.
- Depression can mimic physical illnesses and cause fatigue, muscle tension, sweating, nausea, cold hands, difficulty swallowing, jumpiness, gastrointestinal discomfort or diarrhea, and other physical symptoms.

* Data adapted from the National Institute of Mental Health

Depression is a cloud hanging over millions of people.

Depressive Disorders & Neurotransmitter Levels

Depressive disorders are among the most common neurotransmitter-related conditions. Others include anxiety disorders, compulsive behaviors, insomnia, and migraines.



Neurotransmitters are chemicals that relay signals between nerve cells, called "neurons". They are present throughout the body and are required for proper brain and body functions. Serious health problems, including depression and anxiety, can occur when neurotransmitter levels are too high or too low.

Every neurotransmitter behaves differently. Some neurotransmitters are inhibitory and tend to calm, while others are excitatory and stimulate the brain. Healthcare professionals conclude that specific neurotransmitter imbalances are more likely to underlie certain conditions. Deficiencies involving the central nervous system's neurotransmitters — serotonin and norepinephrine — appear to be involved in the development of depressive disorders. Disruptions in other neurotransmitters, like GABA and glycine, have been more closely linked to anxiety disorders.

Environmental and biological factors — including stress, poor diet, neurotoxins, or genetics — can cause imbalances in the levels of neurotransmitter chemicals in the brain. These imbalances can trigger or exacerbate depressive symptoms.

Improving Treatment

Most of the drug-based methods used to treat depression include chemicals that either imitate a neurotransmitter or redistribute existing neurotransmitters. Many affect serotonin, and some affect other neurotransmitters like GABA, norepinephrine, or dopamine. It is generally believed that drugs supporting serotonin signaling will be beneficial when depression results from a lack of serotonin and that GABA supporting drugs will be effective when a person's symptoms are caused by a lack of GABA. While the idea of matching a drug to a chemical imbalance is generally supported, the vast majority of healthcare providers prescribe psychological drugs based only on a patient's symptoms and few try to match a drug to a biochemical imbalance. This may explain why some drugs are ineffective for some patients.

Neurotransmitter function can also be supported with nutrient-based programs. Neurotransmitters are made from various components of food in a normal, healthy diet. Increasing the amounts of these dietary constituents can help maintain normal neurotransmitter levels.

While no program can guarantee success for everyone, it is worthwhile to effectively match a drug-based and/or nutrient-based program to the specific needs of the individual.

