Everyone will feel sadness, loneliness, or grief at one time or another, for example at the death of a loved one. This is a natural part of life, and the pain will often pass on its own. It’s only when feelings such as dejection, lack of pleasure and interest, difficulty concentrating, and guilt persist and considerably affect how we function in everyday life that it’s matter of depression.

The discomfort connected to depression can vary from individual to individual. It is common to experience physical symptoms such as tiredness, muscle pain, and lack of sleep. The most typical feature of depression is that it affects our way of thinking. About 20 percent of the population will experience a depression requiring treatment at some time during their life.

What is depression?

Depression is a psychological disorder that affects our moods, feelings, and behaviour. Depression affects us on various levels:

**Feelings** are characterized by emptiness, sadness, despair, and dejection. Some people experience being more irritable. Hopelessness, indifference, and a loss of interest in activities in areas where one was previously very active are quite common. Symptoms of uneasiness, restlessness, and anxiety are also a part of the picture.

**Behaviours** characteristic to depression are a lack of initiative, a lack of endurance, social withdrawal, and passivity. Even the simplest tasks can seem insurmountable, and one can find it difficult to get out of bed in the morning. Outwardly, a person may appear sulky and expressionless.

**Thoughts** characteristic to depression, such as having a negative image of one’s self, one’s future, or of the world in general are common. Thoughts are often focused on episodes that have occurred in the past or things that one worries might happen in the future. Thoughts regarding one’s own guilt and worthlessness are often central here. Difficulties in concentrating are common. Some people have thoughts of taking their own life.

**Bodily reactions** like a lack of energy, sleeping disorders, and disruption of appetite are frequent. Other central symptoms are nausea, dizziness, and other kinds of pain. Many lose their desire for sex.

A depression will manifest as a combination of the symptoms described above, with variations in scope and intensity. Some people experience one isolated depressive episode, while it may recur for others. Depression can surface at the same time as other psychological disorders.

Depression is also central to bipolar disorder (manic-depressive disorder). This is distinguished by great swings in mood energy, and activity level. Alongside depressive episodes, are periods with significantly high spirits. Such manic episodes are often characterized by a strong sensation of success and exaggerated belief in one’s own abilities. One often becomes highly active and has a reduced need for sleep. People close to the patient will often experience these behaviours and thoughts as uncritical. Serious depression and mania may
sometimes include symptoms of a psychosis as well, such as hallucinations and delusions. Hereditary factors play a role in bipolar disorders, but external pressures are often decisive as to whether the condition ever manifests.

Do you recognize these symptoms?

- Are you sleepy or tired, without any special reason?
- Do you have problems concentrating and making decisions?
- Do you lack initiative and interest in things you were interested in before?
- Do you often feel sad or dejected?
- Have you experienced an increase or reduction in appetite?
- Do you have problems sleeping, difficulty getting to sleep at night, or waking up early and not being able to fall asleep again?
- Do you think about death or taking your own life?

Help is out there

Besides your family and/or friends, there are many resources you can contact if you need help or are uncertain as to whether you should receive treatment. These include:

- Family doctor/emergency health services
- Local health centre/school nurse services
- Psychiatric nurse/psychiatric health services (as contacted through the switchboard operator in your home municipality)

Depression affects the way we think. You can get a grasp on these sinking, churning thoughts and try to turn them around. A doctor or other professional can give you advice on how you can achieve this.

Lifestyle choices are important where depression is concerned. Exercise and good physical condition are shown to help counteract depression. Consumption of alcohol, even in moderate amounts, can provoke and intensify depression, and its use is not recommended. Consumption of other intoxicating substances can give similarly negative reactions.

Information and guidance are important. To be able to offer treatment adapted to individual needs, it is important to thoroughly assess these symptoms and find out how they affect each particular patient. As a rule, it is sufficient to treat mild to moderate depression with conversational therapy. During conversational therapy, the therapist and patient can shed light on experiences, events and feelings that affect difficult areas in the patient’s life, and which may well be connected to the depression in some way. Conversational therapy that emphasizes changing negative thoughts and assists the patient in becoming active again seems the most effective for most people.

Medication is readily used to treat serious to moderate depressions that persist over time or continue to recur. It is important to remember that such medicines do not give the patient a feeling of euphoria or happiness, but rather contribute to reducing the symptoms of depression. In some cases, serious depressions are accompanied by the danger
of suicide, and therefore treatment is especially important. In cases of serious depression, a general practitioner will often refer the individual to a specialist as well.

To prevent relapses after a depressive episode, cognitive behavioural therapy is recommended in addition to medication. You may then in future be able to recognize the beginning of a depression and stop it from developing further by using the tools you learned during therapy.

Treatment of depression will usually consist of a combination of different measures. Regardless of the type and intensity of treatment, the common elements are:

• Thorough information regarding depression, starting with your own particular circumstances
• Conversational therapy, with a focus towards changing negative thought patterns and help in becoming active
• Problem-solving conversations that focus on your actual situation in life
• Evaluating medical treatment
• Physical activity

Family and close relatives may be asked to participate in some areas of treatment, if necessary.

How long can a depression last?
Usually, a depression will last from a few weeks to a few months. Serious depressions often lead to long periods of illness, but correct treatment can shorten this time significantly.

Will these depressive episodes always return?
More than half of all people who suffer from depression will experience a recurrence. Treatment can also be preventive in these cases.

When should one seek help from a doctor?
If you are experiencing problems at home, work, or with your studies that have lasted a long time and still seem irresolvable, you should seek a doctor’s help. If you have suicidal thoughts, you should seek help immediately.

How great is the danger of suicide during a depression?
Most people who experience depression do not attempt suicide. However, among those who do take their own life, a great many have likely suffered from depression. If you wonder whether one of your friends or loved ones is having suicidal thoughts, you must ask them directly. If the answer is yes, you should consider accompanying them to the doctor.
Where to seek help

Emergency – call 113
Doctor/Casualty
Support phone: 810 30 030

Useful information

www.psykisk.no
www.psykiskhelse.no
www.mentalhelse.no
www.psykopp.no
www.nyinorge.no
www.nakmi.no

Broshures on mental health

Anxiety
IS-1465
Depression
IS-1466
Obsessive Compulsive Disorders
IS-1469
Eating disorders
IS-1470

Psychosis
IS-1471
AD/HD
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Legal protection
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Mental health care in Norway
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BUP
• Children, IS-1301
• Young people, IS-1302
• Adults, IS-1303

Brochures can be downloaded at www.psykisk.no under Information Material.

This brochure can be found in ‘bokmål’ and ‘nynorsk’, the two official languages of Norway, English, Arabic, Farsi, French, Kurdish/Sorani, Polish, Punjabi, Russian, Lappish, Serbian/Croatian, Somali, Spanish, Turkish, Urdu, and Vietnamese.