

# TMS TRENDS

JULY 2018

A publication of the TMS Institute of Pennsylvania – Advanced Neuropsychiatric Solutions

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## MYTHS ABOUT DEPRESSION

Some people you know may believe certain myths circulating around about mood disorders. These are exaggerated, distorted or false statements often based on fear, misinformation and lack of education about depression or bipolar disorder, not on fact. There is nothing true about these myths. The problem is that if believed, these myths can cause a person to feel more troubled and outcast. It's important to question any statements like these that you might hear. Some examples of these myths include:

**Mood disorders are contagious and I could catch it.** This is so not true! Mood disorders are a biologically based illness of the mind and body with an inherited basis. They're not transmitted in the air or body fluids or by just hanging out with someone who is depressed. You can't "catch it" by being close to or intimate with someone else. The current theory of depression is that it's related to an interaction between your genes and your environment. Genes are inherited components of our DNA that we get from our parents – they direct the body and brain on how to function. Environment includes the people, thoughts, and events that occur around us, both inside and outside of us, and could be positive or negative. Environmental factors could be an internal or external event like stress (a job loss or divorce/break-up for example), a physical illness, the birth of a child, move to a new home, or a traumatic experience. Stress or illness changes the action of certain genes in our brains. And when that happens during a vulnerable period, the genes and our brains do not work as well, resulting in depression. So, you need both a gene that predisposes you to depression and a stressor occurring in your environment in order to get the illness.

**Depression is a woman's illness; men don't get it.** False. Men certainly do experience depression. We don't usually hear about it in men as much because they are less likely to discuss or disclose their emotional life and issues. They are also more afraid of the stigma that

still exists around mental illness, being socially raised to appear strong on the outside and not exhibit any signs of weakness or vulnerability. Up until now, research studies have shown that depression is much more common in women. However, one research study at the University of Michigan (Martin, 2013) demonstrated that that conclusion may be wrong because men exhibit somewhat different symptoms (irritability, agitation, drinking, substance abuse, gambling, reckless behavior, workaholism) and therefore we may not be identifying all of the instances of depression in men. Men get it – we just may not know exactly how many. This is a problem if it prevents men from recognizing their illness and seeking professional help.

**I'm doomed to get depression because my parents had it.** This is not necessarily true. Some people may follow a pattern similar to their biologic parents, and others do not – it's not a guarantee. As I described above, it takes more than just having a gene that predisposes you to depression in order to experience the illness. You also need to have something in your environment, a stressful or negative event that occurs at a vulnerable period in your life. And if you know you are predisposed to depression and follow the basics of mental health (regular sleep, healthy diet, daily physical exercise, have a routine and structure, avoid isolation, keep up with social contacts), that can go far in tempering the kind of episode you may have.

**Antidepressants are the only treatment I need.** Not necessarily true. Some people do well with medication alone, particularly those who have a mild depression and good social support without other complicating life issues. Many studies have shown that the best outcomes for mood disorders like depression and bipolar disorder result from a combination of medication and talk therapy, also called psychotherapy.