

Co-Occurring Disorders & Depression

Co-occurrence of Depression with Medical, Psychiatric and Substance Abuse Disorders

Clinical depression is a common and serious medical illness that can be effectively treated. The risk of clinical depression is often higher in individuals with serious medical illnesses, such as heart disease, stroke, cancer and diabetes. However, the warning signs are frequently discounted by patients and family members, who mistakenly assume feeling depressed is normal for people struggling with serious health conditions. In addition, the symptoms of depression are frequently masked by these other medical illnesses, resulting in treatment that addresses the symptoms but not the underlying depression. It is a myth that depression is a “normal” emotional response to another illness; it’s extremely important to simultaneously treat both medical illnesses.

Impact of Depression in Primary Care Settings

- Nearly 74% of Americans who seek help for depression will go to a primary care physician rather than a mental health professional.
- The rate of depression among those with medical illnesses in primary care settings is estimated at 5-10%. Among those hospitalized, the rate is estimated at 10-14%.
- The more severe the medical condition, the more likely that patient will experience depression
- People with depression experience greater distress, an increase in impaired functioning and less ability to follow medical regimens, thus hindering the treatment of any other medical conditions.
- Unfortunately, the diagnosis of depression is missed 50% of the time in primary care settings.

Why Depression and Medical Illnesses Often Occur Together

- Medical disorders may contribute biologically to depression.
- Medically ill people may become clinically depressed as a psychological reaction to the prognosis, the pain and/or incapacity caused by the illness or its treatment.
- Though occurring together, depression and a general medical disorder may be unrelated.

Prevalence of Depression Co-occurring with Other Medical Illnesses

HEART DISEASE AND DEPRESSION

- Depression occurs in 40 to 65 percent of patients who have experienced a heart attack.
- After a heart attack, patients with clinical depression have a three to four times greater chance of death within the next six months.

STROKE AND DEPRESSION

- Depression occurs in 10 to 27 percent of stroke survivors and usually lasts about one year.
- An additional 15-40 percent of stroke survivors experience some symptoms of depression within two months after the stroke.

CANCER AND DEPRESSION

- One in four people with cancer also suffer from clinical depression.



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- Depression is sometimes mistaken as a side effect of corticosteroids or chemotherapy, both treatments for cancer.
- Depressive symptoms can be mistakenly attributed to the cancer itself, which can also cause appetite and weight loss, insomnia and loss of energy.

DIABETES AND DEPRESSION

- People with adult onset diabetes have a 25 percent chance of having depression.
- Depression also affects as many as 70 percent of patients with diabetic complications.

EATING DISORDERS AND DEPRESSION

- Research shows a strong relationship between depression and eating disorders (anorexia and bulimia nervosa) in women.

ALCOHOL/DRUGS AND DEPRESSION

- Research shows that one in three depressed people also suffer from some form of substance abuse or dependence.

Importance of Treatment

- People who get treatment for co-occurring depression often experience an improvement in their overall medical condition, better compliance with general medical care and a better quality of life.
- More than 80 percent of people with depression can be treated successfully with medication, psychotherapy or a combination of both.

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