

# Health Talk

## Depression in Men

By Dr. Niru Prasad

Depression in Men By Niru Prasad Our life is full of good times and bad times, happiness and sorrow. If we are feeling “down” or “under the weather” for more than a few weeks, or are having difficulty functioning in our daily lives, we might be experiencing a serious illness called clinical depression. The good news is that clinical depression (which is a chemical imbalance in the body) is highly treatable if the diagnosis is made early enough. According to the National Institute of Mental Health, about six million American men suffer from depression every year, however men are far less likely than women to seek help not only for mental health problems but also for depression in particular. Researchers, clinicians, and psychologists are investigating the fact that traditional signs of depression (sadness, worthlessness, excessive guilt) may not represent many men’s experiences of a depressive period. It is possible that men may instead experience their depression in terms of increased fatigue, irritability, anger, hostility and abusive behavior, sleeplessness, and lack of interest in work. Untreated depression in males can result in personal, family, and financial problems. According to NIMH, the suicide rate is higher in depressed men than in women of all ages. Signs of depression in males include Feeling depressed, irritable, or exhibiting angry behavior every day. Losing interest in pleasurable activities. Acting reckless, engaging in violent behaviors, talking about separation or divorce. Eating disorders. Abusing Alcohol or drugs. While depression also hits women of all ages, they usually cry, talk more, and confide in others about their problems. In contrast, men keep their feelings to themselves. In fact, it is estimated that one million more men suffer from depression, however, instead of recognizing this fact they indulge in alcohol or drugs, gambling, etc. Or they might become workaholics to hide their feelings.

Depression in males has been linked to poverty, loss of job or spouse, or even medical conditions such as diabetes, heart disease, etc. New trends in treatment modalities of clinical depression For decades, scientists believed the main cause of depression was due to low levels of neurotransmitting serotonin and norepihephine in the brain. Hence, certain medications like Zoloft and Prozac, which are the most commonly prescribed antidepressants, help to boost the serotonin level in the brain as neurotransmitters, hence elevating the mood. Newer research, however, focuses on nerve cells because hyperactive stress responses, brought on by genetic predisposition, prolonged exposure to stress. A single traumatic event can cause permanent damage to the nerve cells leading to serious consequences. These discoveries have opened up broad new possibilities for treatments. Scientists are developing medications that block the production of excess stress chemicals aiming to reduce damage to otherwise healthy nerve cells. They are also looking at hormonal therapy for treatment of major and minor depression. Canadian scientists have had success with deep brain stimulation – a procedure where thin electrodes are implanted in mood regulating part of the brain. Researchers at NIMH are experimenting with the intravenous injection of “ketamine,” an animal tranquilizer, for quick and longlasting treatment of depression in human beings. However, due to hallucinogenic effect of the drug, these are only experimental. The most effective remedy for treatment of depression is still a combination of psychotherapy, psychological help, and medication. General treatment for depression in males of all ages

1. Remain active: exercise, do yoga, meditate.
2. Eat a well-balanced diet.
3. Avoid alcohol and drugs.
4. Do not bottle up your emotions; share your feelings with others.
5. Relax.
6. Get periodic health check-

ups with your physician. 7. Share your sad feelings with family and friends. 8. Ask for psychological help and seek counseling if symptoms persist. Lastly, remember the fact that it is your responsibility to be at the top of your game. Taking care of yourself physically, mentally, and emotionally will definitely help you lead a happy life without depression.

Summer 2007 The Think Club 15 Continued from Page 16 Ray the Ancient Runner without disrupting the makeshift domestic tranquility. He was left to his wit and craftiness to squeeze in the training he desired and needed and weekend races were entirely excluded. He ultimately violated the truce, committed the unforgivable, was attacked and dragged into open warfare. When Ray would appear in his running gear his wife would immediately leave the house and instruct Ray to "watch the baby." In this manner Ray was contained and unable to run.

He ultimately had a brilliant idea and plan that would allow him to watch the baby, get in a good 10 mile workout, without alerting his wife that he was indulging in the forbidden activity. Unfortunately for

Ray this was the year before baby joggers. If so simple and effective a device had been available Ray's marriage and a considerable portion of Ray's scalp would have been spared. His plan was sheer genius and the product of his brilliant mind. Ray would appear in running attire and loudly announce his desire for a "quick 10 mile workout." His wife would react predictably by grabbing the car keys, informing Ray that he was to care for the baby, and leave the house to complete some unnamed mission. Ray knew at this point he had a one-two hour window during which his wife would be gone and he was left to his own devices. With his wife safely over the horizon he would spring into action.

He would open the nursery window, pull the crib over to the window, and position his stopwatch next to the sleeping child. His brainstorm would then work thusly: Ray had a reliable one-mile loop around the neighborhood. He could run the measured mile, stick his head in the open nursery room window, check his lap time and the condition of the baby in one quick easy motion. He could then run the second lap of his ten lap workout assured that the baby was asleep and safe. The scheme worked perfectly. His wife was happy, the baby was happy and Ray was happy. Ray had a quick 10-mile workout, the baby had a nice nap with lots of fresh

air provided by the open nursery window and when Ray's wife arrived home she was pleased that Ray had done his domestic duty. All this was accomplished in one hour. The running group was very pleased with Ray and the arrangement. It was the subject of much discussion during our lunchtime runs. One day however as they say, "the best laid plans of mice and men....," this arrangement came apart and poor Ray suffered horribly. Ray appeared one Monday at noon for the group run with a terrible laceration on his head. His head looked a little lopsided with the hair shaved in one hemisphere, the scalp discolored by bruising and antisepsis, and a nasty looking laceration that had been closed with innumerable stitches. Our group run started in silence as Ray began his tale of running, intrigue, miscalculation, disaster and assassination. He had arisen on Saturday, donned his running garb and announced his plan to run a quick 10-mile workout. His wife left the house immediately. Ray then opened the window, positioned the sleeping infant and stopwatch next to the window and started his workout. The first mile went well. Ray stuck his head in the window, the baby was sleeping soundly and he had completed the first mile at a respectable six minutes. The second mile ended the same, head in the window, check the baby, check the watch, everything fine, fast and according to plan. Thus ended mile four, mile five, mile six and mile seven. Disaster struck, literally, at the end of mile eight. Ray rounded the last corner and approached the house hoping to be holding th

