

Depression: A Case Study

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Case Report

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Abstract

Depression is a mood disorder characterized by sadness, hopelessness, lack of pleasure, lack of motivation and loss of interest in activities. It is a common illness but a serious one. Sometimes symptoms are severe and affect person's life to such extent that patient commit or attempt to suicide. Depression can affect people at any age such as adults, teenagers and children. It is difficult to elucidate its pathophysiology but life events, anger, physical conditions, poor diet, use of street drugs and alcohol, environmental factors, genetics and chemical changes in brain may cause depression. Goal of treatment is to eliminate symptoms, motivate patient and improve patient's quality of life. Pharmacotherapy and psychotherapy both are given to treat depression along with lifestyle modifications.

Keywords: Depression; Symptoms; Pharmacotherapy; Psychotherapy

Introduction

Depression is a recurrent disorder and more prevalent in females than males [1]. There is hand-in hand relationship between depression and insomnia [2]. There are various forms of depression such as major depressive disorder, premenstrual dysphoric disorder, persistent depressive disorder, psychotic depression, bipolar disorder, seasonal affective disorder and postpartum depression. Symptoms of major depressive disorder include sadness, difficulty in concentration, anxiety, loss of sleep, trouble in making decisions and suicidal thoughts or actions [3]. Pathophysiology of depression may include various theories. Genetic factors, stress hormones and cytokines, deficiency of monoamines, decrease GABA activity, impaired circadian rhythm and dysfunction of glutamate neurotransmitter are basis of these theories [4]. Depression can be diagnosed on basis of International Statistical Classification of Diseases and Health Related Problems (ICD-10 depression criteria) and Diagnostic and Statistical Manual of Mental Disorders

fourth Edition Classification System (DSM- IV system). According to ICD-10 criteria, key symptoms may include low mood or persistent sadness, loss of pleasure or interest and low energy or fatigue. Associated symptoms are self blame or guilt, increased or poor appetite, slowing of movements or agitation, poor concentration, disturbed sleep, low self confidence and suicidal acts or thoughts [5]. DSM- IV system include symptoms of fatigue, diminished ability to concentrate, weight changes, depressed mood, insomnia, loss of interest, feeling of worthlessness, agitation and recurrent thoughts of death. For diagnosis of major depression, out of ten at least four symptoms of ICD-10 classification system and out of nine at least five symptoms of DSM- IV system are required [6].

There are various ways to treat depression that includes psychotherapy, lifestyle modifications, social support and pharmacotherapy. Lifestyle modifications include nutritional changes and exercise while psychological treatment comprises of Interpersonal therapy (IPT), Cognitive behavior therapy (CBT) and

supportive psychotherapy [7,8]. Medications use to treat depression are called as antidepressants which includes Selective serotonin reuptake inhibitors such as citalopram, escitalopram, fluoxetine, Paroxetine etc, Serotonin nor adrenaline reuptake inhibitors such as desvenlafaxine, venlafaxine duloxetine etc, Tricyclic antidepressants such as amitriptyline, nortriptyline, clomipramine, imipramine etc, Monoamine oxidase inhibitor such as phenelzine, selegiline etc [8,9].

Case Presentation

A 44 years old female visited a psychiatric clinic with symptoms of depression. She stated that she had daily weeping spells, anxiety, restlessness, fatigue and low mood. She reported that her sleeping was disturbed because it took her several hours to fall asleep. She was experiencing these symptoms from last three months.

Past Medical History

Patient was suffering from Hypertension from last 2 years and Hypercholesterolemia from last 1 year.

Past Medication History

She was using Inderal (Propranolol) 40mg from last 2 years and Lipiget (Atorvastatin) 10mg from last 1 year.

General Examination

Weight: 95 Kg
Height: 5 foot 6 inches
BMI: 33.7 Kg/m²
Temperature: 98 °F
Physical activity: daily work routine home

Diagnosis of Depression

Three key symptoms (low mood, loss of interest, low energy) of depression were present from last three months.

Medication Therapy

Brand	Generic	Strength	Frequency
Paraxyl	Paroxetine	20mg	HS
Risp	Risperidone	1mg	HS
Qutyl	Qutiapine	25mg	HS

Table 1: Generic variables of Medication Therapy.

Psychotherapy

Psychotherapy was not given to patient.

Pharmacotherapy Assessment

Patient was not compliant with the therapy.
Less physical activity.
Lack of motivation.

Interventions

Suggest psychiatrist to change drug therapy.
Psychotherapy should be given to patient.
Council patient to stick to drug regimen to show good compliance.

Care Plan

Proper diet: choose smart carbohydrates, take protein-rich and selenium rich foods.
Exercise and walk to reduce body weight.

Outcomes

Patient was evaluated on follow up on basis of presence or absence of symptoms and patient compliance. Patient compliance was better due to change in drug therapy and initiation of psychotherapy sessions.

Discussion

Patient had three key symptoms (loss of energy, low mood, loss of interest) according to diagnostic criteria [6]. In this case patient was suffering from fatigue, restlessness, weeping spells, decreased sleep, numbness and lack of concentration [10]. Patient was treated with medications but no psychotherapy was given. Patient was given risperidone and Qutiapine that are antipsychotic drugs due to which interactions occur for example increased dopaminergic effects were seen. Patient was not compliant with medications because of side effects. Patient had no motivation to cure and less physical activity. Suggest psychiatrist to alter drug therapy e.g. prescribe Tricyclic antidepressant (dosulepin) or anti-anxiety drug (alprazolam) or drug from other class. Psychotherapy should be given to patient for example cognitive behavior therapy (CBT) and interpersonal therapy. Patient should be encouraged to try relaxation techniques and breathing exercises. Talk with family members and friends and explain how they can be helpful [11]. Regular exercise can reduce symptoms of depression. Dietary modifications are also necessary so choose food rich in magnesium and zinc content, protein-rich foods, selenium rich foods and increase dietary intake of vitamin D, vitamin E and vitamin B6. Psychotherapy should be given to patient so that patient value herself and get involved and make contribution to

local community activities. Suggest patient to do something creative or learn a new skill [12].

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