

# Depression vs. Sadness – Understanding the Difference

When is sadness, gloom or "feeling down" normal and when is it a more serious problem? Clinical depression differs from normal sadness or "the blues" in both the severity of symptoms and in how long it lasts. Normal sadness usually does not affect all areas of a person's life and goes away in a few hours or days. Sometimes a shopping trip or being with friends will cause sadness to disappear. Clinical depression lasts for much longer periods of time and has more symptoms. The rule of thumb is that if sadness lasts for **longer than two weeks**, it is probably clinical depression. This type of depression often interferes with everyday functioning. Clinical depression is a serious disorder and needs to be evaluated by a professional.

## *Types of Depression or Mood Disorders*

Situational depression - occurs when the depression is a reaction to some event or circumstance in a person's life. This form of depression is usually associated with some loss such as loss of job, divorce, death, breakup of a relationship, or children leaving home.

Biological depression - is caused by a chemical imbalance in the neurochemistry of the brain and is not associated with events occurring in a person's life.

Dysthymic Disorder - is a long term, sometimes serious, sometimes low grade, form of depression. It often appears like a "depressed personality." Often people with this disorder report feeling depressed most of their life, starting in childhood or teenage years. The symptoms may not interfere with daily functioning, but the person just doesn't feel well.

Cyclothymic Disorder - a mood disorder characterized by more than normal moodiness and changes of affect. Often appears as an extremely moody person with mood shifts from serious depression to overly energetic and almost manic behavior. However, the mood shifts are not enough to cause the individual to be unable to function.

Bipolar Disorder - used to be called Manic-Depressive Disorder. This is caused by a chemical imbalance in the brain and usually is characterized by periods of extremely low depression and feeling "at the bottom" which cycles into periods of boundless energy, grandiose planning, elated moods and being "on top of the world." The mood shifts are so extreme as to cause the person to be unable to function, cope or make good judgment decisions. The moods can cycle from one phase to another quite rapidly or very slowly, lasting for weeks or months. Bipolar disorder almost always requires medication as part of treatment.

Seasonal Affective Disorder - a kind of depression that results from changes in the body chemistry due to reduced periods of sunlight, and therefore more common during winter months and in northern areas.

Post-partum Depression - may occur after the birth of a child and is often called the "baby blues."

'Masked' Depressions - these are forms of depression that do not appear as depression on the surface, but have behaviors present that serve to treat, cover, or "mask" an underlying depression. This is sometimes true of some forms of drinking, drug use, sexual acting out, some risk-taking behaviors, and other forms of self-destructive behavior.

### ***Evaluation and Treatment***

Often, a clinical evaluation with a counselor or psychiatrist is important to determine if depression exists, what type and what treatment options match the individual. Your EAP is a good starting point for that evaluation. Also, your EAP's website contains a self-assessment for depression that can give you a preliminary impression as to whether depression is a concern for you.

***To access your EAP simply call Employee Resource Center, Inc. at 1-800-222-8590.***

***To access the self-assessment, go to the ERC-EAP website at [www.erc-eap.com](http://www.erc-eap.com) and click on the "Self-Help Resources" side-bar.***