



CONTENTS

- | | | | |
|---|--|----|--------------------------------|
| 2 | News from DAS | 7 | About the MOOD Project |
| 3 | Older People and Depression -
the Doctor's View | 8 | Fitness, Ageing and Depression |
| 4 | Personal Stories | 10 | Money and Depression |
| | | 12 | Dear Doctor |



National Depression Week 2009
Depression in the later years



News from DAS

National Depression Week 17-23 June 2009

Welcome to the National Depression Week edition of the DAS newsletter. This year we are looking at Depression in the later years. Read Derek, Nell and Victor's stories of how they have coped with Depression and some difficult life events.

We hope that National Depression Week will attract media attention so keep an eye out for us on the radio and television and in the papers. Visit our website www.dascot.org/lateryears to keep up to date with what is happening. If you're not on the web contact us on **0845 123 23 20*** (or **0131 467 3050**) or write to 11 Alva Street, Edinburgh EH2 4PH and we'll let you know the latest news.

You should have received a copy of our survey looking at public attitudes into Depression and ageing in our last newsletter. We had a great response so many thanks to everyone who filled it in. The results are posted on our website or get in touch with us and we'll be happy to send you a paper copy.

Also for National Depression Week, our factsheet on Older People and Depression has been updated and redesigned as an A5 booklet. You can download it from our website or contact us and we can send you a copy. Single copies are free but there is a small charge for multiple copies.

Great news for DAS!

We are delighted to announce that we have received generous funding from the Scottish Government to continue *Look OK...Feel Crap?* to reach out to young adults with depression and low mood. The funding will be used to expand on work already achieved by developing the website, www.lookokfeelcrap.org, into a major national online resource to provide information and support to young adults across the country. We will also be launching the campaign in the Highlands and Islands, and we will be working with local partners to offer dedicated self-help courses for young adults who have Depression. The campaign continues to be funded by the Barcapel Foundation, along with support from Highland Council.

DAS Self-Help Support Groups Update

Groups Currently Running

1. Dundee (Monday evenings)
2. Edinburgh (Tuesday evenings)
3. Edinburgh (Wednesday evenings)
4. Glasgow (Maryhill, Monday evenings)
5. Glasgow (City Centre, Tuesday evenings)
6. Inverness (Wednesday evenings)

For all enquiries, please contact the office on **0845 123 23 20** or e-mail groups@dascot.org. You can also find more information about our groups at www.dascot.org/services/groups.

Search the Web and Help Us Support People with Depression

Everyclick is a great new search engine. It works just like other major search engines, but it also generates cash for the charity of your choice, including Depression Alliance Scotland. They have already raised hundreds of thousands of pounds for a wide range of charities. Why not use it to help DAS? Visit www.everyclick.com/depressionalliancescotland.



The DAS Information Line 0845 123 23 20* or 0131 467 3050

Support and information on Depression for individuals, their families and friends, and professionals. Open 10am to 2pm weekdays, closed Wednesday.

* Calls to 0845 numbers made from BT residential lines will cost no more than 4p per minute with a call set-up fee of 8p per call. Mobile and other providers' charges may vary



Depression and Older People – the Doctor's View

The UK has an ageing population with 9.7 million people currently over the age of 65. This number will rise to around 12.5 million by 2020. Age 65 is the point at which you retire from work, access your pension and enter the realms of 'geriatric' care, although some geriatric medical services will be restricted to those over 75. Similarly changes in the social care system take place at 65. So, in general those in our society who have reached or exceeded 65 are rightly or wrongly described as 'older people'.

**“ Depression in old age
can be just as
successfully treated as
Depression in younger
age groups ”**

Depression is not an inevitable feature of ageing, but it is common. Depression affects one in seven older people to a degree that their day to day functioning is severely disrupted. One in four older people are affected by some form of Depression which equates to 2.4 million people.

The public and many professionals fail to recognise this rising tide of disability, largely due to lack of knowledge. Older people are more often isolated from friends and family, they have less disposable income and often more than one medical problem. Solitude, bereavement, poverty and pain are major risk factors for Depression in old age. Increased drowsiness, over eating and agitation are also common. Thus the diagnosis is frequently missed. Suicide in old age accounts for almost 25% of completed suicides, yet little attention is given to this group when examining the national policies.

Depression in old age can be just as successfully treated as Depression in younger age groups. However this age group has long been denied access to psychological therapies. Often when older people are given antidepressants, they are of inadequate dose and for inadequate periods of time.

The best form of intervention is prevention. As people approach retirement, there is a significant amount of readjustment required. Loss of earnings, loss of status, loss of role and the prospect of age related illnesses can all cause a change in mood. Planning for retirement is an essential part of preparing for old age. Keeping busy with a range of activities to stimulate both mental and physical health and a positive approach can help. Making older people feel valued and included will help increase their self-esteem.

Where medication is required, doctors should ensure the dose is adequate and prescribed for a minimum of six months. They should also ensure any physical issues are addressed e.g. pain control, thyroid function and diabetes, as all can lead to low mood. Care must be taken when prescribing antidepressants as some can interact with other medications.

Self-help groups and supportive psychotherapy can help. Basic education about the illness is valuable not just for patients but for front line staff working with vulnerable groups such as those in hospital or care homes, where levels of Depression are much higher than in the general population.

**“ Depression in older
people has long been
under recognised,
under diagnosed and
under treated ”**

Depression in older people has for too long been under recognised, under diagnosed and under treated. The risk factors are different to those we see in younger people, the symptoms are often 'masked' and the consequences too often just attributed to age.

**by Dr Gillian McLean
Consultant Old Age Psychiatrist**



My Story – Nell McFadden MBE



I will be 82 years young this year. I have been widowed twice, brought up a family of four and now have seven great-grand children and like many of my generation, worked most of my days until my 60th birthday.

I decided I owed it to myself to retire the day I became 60. I had intended to have a year off and then take up voluntary work of some kind. But it never worked out like that for me.

I retired at the end of March and during that summer I had a great time and although I was living on less money, I coped. I went swimming, on bus runs, walking and joined an exercise class but by the end of the summer the bus runs stopped, the swimming pool closed and I didn't realise how that would affect me.

As the autumn and winter approached, I began to feel that something was wrong but I didn't know what. As the winter came on, I started to take panic attacks and wouldn't go out or answer the phone. I just began to go down that long black tunnel of Depression. I didn't realise for some time that this creeping thing was Depression. Only anyone who has ever been there can really know how it feels to lose control and how negative we can become. My

favourite expression at that time was 'I can't cope' – I, who had always been the rock for my family, was now the one who needed help. I would never like to go through that terrible time again.

At the beginning of the next year, I went to my doctor and cried in his surgery asking for his help. He said, 'I can tell you what to do but only you can do it.' He advised me to go out into the community and get involved to the best of my ability.

I went home in despair, how could I go out and get involved when I didn't want to go out at all and couldn't cope with life? I won't say what I called my doctor when I went home. How dare he tell me to get involved in my state but as I sat and thought about it, I realised there was no one to really help me, so I must try to do something. I started by working in the Oxfam shop two mornings a week and no one except those who have been there will ever know the effort I had to make just to go out and be involved.

That summer, an article in our local Telegraph newspaper said a Conference was being held in the hope of getting an Elderly Forum Group set up. Suddenly I thought, 'maybe this is something I can get involved in.' I went along and liked what I heard and put my name down to go on a Committee. I was voted on as Vice Chair and thought it would be all right to just be there, but after three meetings the Chairman left and I was thrown in at the deep end. I was told very bluntly that if I didn't take the Chair the Forum was finished. I will never know how I got through that meeting because I was still having panic attacks and problems coping with life, but I managed it somehow.

Little did I know that taking the Chair that day could change my life for the better forever!

20 years ago people talked about Depression as if you had committed a crime. There were no support groups to my knowledge and the stigma and ignorance surrounding it was unbelievable. Now it is in the open, there are many support groups and it is high on the agenda of the Scottish Government. It is an illness which can attack all ages, but when you are older it is hard to accept that the person who has coped for all their years can have



Depression. I used to get angry with myself and feel guilty because of my age, but it is no disgrace, it can affect all ages.

In my case, even although I was not pleased with my doctor, I eventually took his advice and became involved in the community. I have lived a rich, full life by being involved. I have an MBE and four other awards for my work with older people. I sit on 12 Committees – do public speaking – go wherever I need to go to represent older people. I have spoken all over the country and in Ireland and Rotterdam, Holland for Unilever.

Two years ago I had to have two major surgical operations; one was an emergency to save my life. I count myself as being one of the lucky ones, I not only survived, but survived to fight another day for a better quality of life for not only the elderly but for everyone, and because I had been so involved before my operations I still had all these groups and others to come back to. As I say I have been given another chance, and I have made so many lovely friends over the last 21 years.

In my case it was my retirement which triggered my Depression, all that lovely spare time became my nightmare, but many other things can be responsible, such as bereavement, illness, moving house and even things like family problems can be a cause.

If you feel down, don't be afraid to admit it, it is no shame on you. Although there is still not enough help out there and mental illness still has stigma attached to it, there are many people trying to change attitudes and perceptions. One of my groups has been going for about 10 years; it is the Mental Health and Wellbeing in Older People and is Scotland wide.

Because I have been down that long dark tunnel of Depression I can put myself in the shoes of someone else with Depression and although it takes you down, there is a light at the end of the tunnel, even if you don't think it. Someday, everyone with Depression (or Mental Health problems as they call it) will hopefully, like me, not only see the light at the end of the tunnel but will come out of it and live a full and happy life.

Depression – A Journey by Derek Braid

It is almost 20 years ago, as I was approaching 40, that I was first diagnosed with Depression. I had no idea what was happening to me, but I started to get various symptoms, including physical pain in my chest. I had been promoted at work and I was finding it very difficult to cope with my new job. Apart from the usual ups and downs when growing up, I had always been healthy and happy with my lot. I had a very supportive wife and was the proud father of three children.

After visits to my doctor and various tests proved I was physically in good shape, my doctor diagnosed Depression, and the mystery illness was solved. She prescribed antidepressants and, although I soon felt better, she told me that I had to stay on them for at least six months, which I reluctantly did.

Soon I was settled in my new job, although I was never totally comfortable about being a manager, but it was my career so I kept my head down and worked hard. After a few years, I had forgotten

about Depression, and therefore when the symptoms of low mood and low self confidence came on gradually, I did not recognise the signs, and suffered another period of Depression. Through a confidential arrangement which my employer had in place, I arranged some counselling and that helped. I visited my doctor but this time antidepressants were slower to assist. Once again, I was not happy being on medication, and after a couple of months, whenever I felt better, I stopped the medication. I managed to avoid being off work, although it was difficult at times.

Suffering from Depression had really given me a jolt, but after getting through a period of Depression, I appreciated life and good health even more, and I believe it made me a better person. Money, career and possessions became less important and my family took priority. I became involved in a variety of voluntary organisations, including my local church, and I looked at life differently.

Continued on page 6



Depression – A Journey by Derek Braid

Continued from page 5



I was now in my late 40s, and although I had agreed with my wife that I would not let Depression creep up on me again, it did. Perhaps it was a combination of pressure of work, involvement in other organisations, and another mid-life crisis. Whatever it was, it hit me harder than before, and I was off work for a couple of months. My doctor prescribed antidepressants, but it was a longer process. Every morning I woke up, and could barely get out of bed to face the day. Fortunately, by the end of the day, I usually felt better, and gradually the improvement in my mood came earlier each day, until one day, I remember sitting down about 11am, and I felt the Depression lift – oh what relief.

This time, I was determined not to let Depression catch me out again. I was given a sideways move when I returned to work, with less pressure and responsibility. I spoke to my doctor and we agreed that I should stay on antidepressants at a reduced dose, for the longer term. The opportunity for early retirement came along when I reached 50, and I grabbed it with both hands. Now, I could really do what I wanted to do, which was to turn my hobby of photography into a business, while still remaining involved in a variety of voluntary organisations. Life was good, and I was very grateful. We now had a grandson, and although the thought of having a grandchild made me feel old, I remained young at

heart and returned to my sport of dinghy racing. Then life, which I had tried not to take for granted, hit me a cruel blow, when our youngest son Keith was diagnosed with a brain tumour, and subsequently died less than 2 years later, at the age of 23 after an incredibly brave fight. I remember when we got the diagnosis, I was worried that I would not cope, and that I would fall into a deep depression, just when I needed to be strong, to help our son. I saw my doctor and we agreed that I would increase my dosage of antidepressants as required. By this time, I understood my Depression, and I felt I had it under control, and I only marginally increased my medication, but I knew it was there if I needed more.

Also, it may seem strange, but soon after my son was diagnosed with cancer, we got a dog. This was my other support during Keith's illness. I needed to remain strong, and having the dog got me away from the house at regular intervals every day, for fresh air and exercise. That is what helped to sustain me through this very dark time.

It's almost a year since Keith died, and I think about him every day, but at the age of 57, I am Depression-free, with the help of antidepressants, a very supportive wife and a friendly, lively dog.



Showcasing MOOD

MOOD (Mental Health Options for Older People with Depression) has been providing weekly groups since 1999 to people aged 55+ living in West Lothian. Traditionally, 65 has been the age when people are described as being old but in practice we see people in their late eighties who are not old, while there are some people in their fifties who could be considered to be elderly.

Our group has had over four hundred referrals over the past nine years and we are currently operating eleven groups with a weekly attendance of around seventy people. Most of our referrals come from the Community Psychiatric Nursing Service, Consultant Psychiatrists, Psychologists and Social Workers. A large percentage of our clients have experienced multiple losses including poor mobility, financial, bereavement, job, role and relocation. These losses often result in loneliness, isolation, poor self esteem, lack of confidence and thoughts of suicide. Older people sometimes find it difficult to re-establish helpful relationships and require a helping hand to integrate back into the community.

MOOD assesses older people and establishes the kind of activities and groups that will help the client to rediscover helpful relationships. MOOD plays a part alongside professionals in offering additional or alternative supports to those provided by the health services. Over the nine and a half years we have existed we have witnessed many people recover from Depression and being able to enjoy living again.

Groups including self help, embroidery/craft, music, local history, photography, bowling, walking and board games contribute to bringing people together to focus on a particular interest but more importantly to meet others and develop helpful relationships.

In addition to meeting new friends and having something to look forward to each week we find that physical activity and fresh air are paramount in



promoting emotional and physical well being. Groups are light hearted (laughter is good medicine) and support from within the groups is in evidence every time we meet. At MOOD we have also engaged local schools in joining some of our groups and we have found that intergenerational work has benefits in breaking down barriers, dispelling myths about old age and young people and reducing stigma.

We believe that having Depression and being old is not the end of the road and that life can still be fulfilling with a little help from regular contact with peers.

The Mood Project can be contacted by phone on **01501 749 974**, write to Answer House, Reveston Lane, Whitburn, West Lothian EH47 8HJ or visit www.moodproject.org.



Fitness, Ageing, & Depression by Victor Gilbert



I experienced my first debilitating Depression 44 years ago when I was a 27-year-old lecturer at a College of FE in Hemel Hempstead. I made an appointment to be seen by a GP and, although ashamed of the state I was in, managed to tell him what was going on with me. When he mentioned a medication, I asked if I could also see a Psychiatrist. I shall never forget his answer: 'The trouble with you is that you've been watching too many TV programmes lately!' He saw me out with a prescription for amphetamines – a drug, he explained, that would soon make me feel better!

From that inauspicious beginning, I've been battling my whole life with Depression, and for the last 20 years with Bipolar Disorder, which used to be known as Manic Depression. Until I was prescribed Lithium seven years ago, no medication had worked for me, so I tried anything and everything to recover. Searching for a 'cure' took me into psychotherapy, group therapy, resigning my post as a Principal, leaving my wife and family, and living in spiritual communities in India, Europe, and Australia.

I have learnt a number of lessons over these 44 years most of them resulting from looking at myself, and taking responsibility for who and what I am. A really important one was to stop blaming others for what is happening to me.

What lessons are important when we are looking at Depression in the later years?

I think it is important to acknowledge that the condition we are in when we are old results, in the vast majority of cases, from how we have been living our lives. I spend a great deal of time on a rowing machine in three gyms where a lot of old people exercise. The bad news is self-evident – a lifetime of neglect or abuse exerts severe limitations on our well-being and health as old people. The good news is that recent research from Uppsala University shows that men starting at 50, who exercise three hours a week at sport or heavy gardening, lived 2.3 years longer than sedentary men.

Co-incidentally I was 50 when I discovered that jogging helped me to deal with Depression. I'd have to push myself to go out (overcoming the 'it's not worth bothering' state of mind present with Depression); but it wouldn't be long before I'd begin to feel better; and I'd finish the run generally feeling good mentally as well as physically. Later in the day the Depression would again descend on me, but the memory of feeling good somehow activated me to go out next day – in spite of all the negative discouragements present in my mind. In the past there would have come a time when the balance tipped towards debilitating Depression, down I would go and again end up in the misery of severe Depression. In that state, where even getting out of bed takes tremendous effort, going jogging was out of the question. However it soon became clear that regular exercise, when I was up to it, produced longer and longer gaps between the severe depressive episodes. Cathy Ross, cardiac nurse at the British Heart Foundation said, 'Being active at any age helps control your weight, reduce blood pressure and cholesterol and will provide long term benefits for your heart health and general health.'

An important discovery for me was to realise that fitness is an essential ingredient for my mental, as well as my physical health. I have not found that it solves anything in itself, what it does do is create a secure foundation on which I am able to deal with problems as they arise. If I am more present and alert; if I have more energy; if I have developed a



habit of not giving up, then whether it is Depression, an emotional or psychological problem, a physical illness, or even a financial problem then my fitness helps me to deal with it effectively, and not collapse under it. This is particularly important in Depression for inertia is at its very core and giving up is a common reaction to difficulties.

Problems with my hip and knee joints now deny me the exhilarating experience of jogging in nature. However, these problems have taught me the importance of stretching in an exercise programme to develop flexibility, and hence mobility. These are important at any age but particularly so when we are old.

Where there is the will, a way appears, so a few years ago I discovered working out on an indoor rowing machine not only did not impact on my

joints, but was enjoyable too. At 71, I'm found most days in a gym training for rowing competitions. The wonder of Scotland is that it costs me nothing to get there on the buses. The wonder of Midlothian is that it costs me nothing to use their Leisure Centres, and I get free entry into all classes before 4.30pm. Twice a week I attend Pilates classes taught by an excellent and enthusiastic teacher. Once a week I go for a Power Plate vibration workout to improve strength and flexibility. In the better weather I'm seen rowing on the water.

I continue to see myself as a depressive, but I've discovered that taking effective medication, living a healthy mental and physical lifestyle, and importantly staying fit, means Depression no longer runs me, or sits like a 'black dog' on my life.

Join Us!

This newsletter is **free** to individuals and voluntary organisations. If you are not on our mailing list, and would like to be, fill out the form below and send it to **11 Alva St, Edinburgh EH2 4PH** or fill in the form at **www.dascot.org/support/supporters/**. If you feel you would like to make a donation to help us cover our costs, please enclose it with your form (cheques made payable to Depression Alliance Scotland) or donate securely online at **dascot.workwithus.org**.

----- ✂ ----- ✂ ----- ✂ ----- ✂ ----- ✂ -----

I would like to join the DAS mailing list

Name _____

Address _____

Postcode _____

Email Address _____

Please sign me up for the email bulletin

I enclose a donation of:

£5 £10 £20 £50 Other Amount _____

Please send me a standing order form to set up a regular donation

Data Protection – all personal details are held in the strictest confidence

Contribute to the Newsletter!

We love getting contributions and feedback from readers! If you would like to contribute an article, piece of creative writing or artwork, review a book on depression, or have your question answered by the doctor, we would love to hear from you. Please contact Trish on **0845 123 23 20*** or email **newsletter@dascot.org**.



Money and Depression



It may be funny in a rich man's world according to Abba, but for a lot of us money definitely is not a laughing matter just now. The credit crunch has meant many people have lost their jobs or had their hours or wages cut and are struggling to pay the bills. There is evidence emerging that this has led to an increase in the number of people affected by Depression, anxiety and stress. The recession is not just affecting those of working age; here at DAS we have also had contact from older people who are depressed and struggling to cope financially because of reduced pensions and decreases in the value of their savings.

The links between Depression and money

Money problems can cause Depression, anxiety or stress. Research by the Scottish Association for Mental Health (SAMH) has found that people affected by the credit crunch are eight times more likely to report symptoms of Depression and five times more likely to be anxious. Over half of the people who responded to our poll on

www.lookokfeelcrap.org, said they felt their mood was directly affected by the credit crunch or that all the bad news was making them feel worse.

Depression can be bad for your bank balance. Many people who are depressed may not be able to work or may have to take time off sick, meaning there isn't as much money coming in. In addition, people with Depression can find it hard to deal with those difficult bills, speak to bank call centres and do all the tasks necessary to manage your finances. This may be due to lack of motivation common in Depression or feeling overwhelmed.

Coping with financial problems

We are not money experts but here are some tips that people have found useful. For professional advice, contact one of the organisations at the end of the article.



- Ignoring money problems will not make them go away – they will probably get worse. It can be very stressful to get official letters, particularly if they are bringing bad news or asking for money but don't let them build up unanswered. If you don't feel you can tackle them yourself, is there a friend, family member or health care worker who could help you open them? A mental health advocate may also be able to help you deal with companies and banks; contact the Scottish Independent Advocacy Alliance (SIAA) to find out about advocacy organisations in your area (details below).
- If you are in serious debt, the best way to get out of it is to face it and get help to resolve it.

Like Depression, debt is beatable with help and support. Taking the first step can be hard but it is well worth it. You could start by contacting a money advice service like National Debtline Scotland, Scottish Debtline or Citizens Advice (details at the end of this article). Their advice is free, unlike the debt consolidation companies who advertise on the television, in magazines and newspapers.

- Check your entitlement to benefits. Are you claiming everything you are entitled to? Speak to a welfare rights advisor at one of the organisations listed below.

Help and Support

Citizens Advice

Citizens Advice offers advice and information on a variety of matters including benefits, debt and the NHS. Call Citizens Advice Direct on **0844 848 9600** for advice or visit your local Citizens Advice Bureau. Details will be in the phone book on the Citizens Advice Scotland website www.cas.org.uk.

Scottish Debtline

The Scottish Debtline is part of the Consumer Credit Counselling Service, providing support to people with money problems. Freephone **0800 138 3328** (open from 8am to 8pm Monday to Friday.) or write to Consumer Credit Counselling Service Wade House Merrion Centre Leeds LS2 8NG. Visit their website www.scottishdebtline.co.uk.

National Debtline Scotland

This is a charity providing expert support to people in debt. Freephone: **0808 808 4000** (Monday to Friday 9am to 9pm Saturday 9.30am to 1pm) calls free from landlines and some mobiles, write to icorn House, 51-53 Hagley Road, Edgbaston, Birmingham B16 8TP.

www.nationaldebtline.co.uk/scotland.

Benefits Enquiry Line

The Benefits Enquiry Line provides information and advice on sickness and disability payments. The government runs it but they don't take personal details of callers. Tel: **0800 882 200** Textphone: **0800 243 355**.

Scottish Association for Mental Health (SAMH) Information Service

SAMH provides information on welfare benefits. Telephone **0141 568 7000** (open 2pm – 4.30pm daily), email info@samh.org.uk, write to SAMH, Cumbrae House, 15 Carlton Court, Glasgow, G5 9JP or visit their website which has information about benefits available www.samh.org.uk. You can also download the report about how the credit crunch is affecting people's mental health from their website.

Scottish Independent Advocacy Alliance (SIAA)

SIAA can give you contact details for advocacy organisations in your area.

69a George Street, Edinburgh EH2 2JG

0131 260 5380

www.siaa.org.uk.

Moneysavingexpert.com

Free information about getting out of debt and saving money from TV money expert, Martin Lewis.

www.moneysavingexpert.com.

Depression Alliance Scotland

We can't advise you on money problems but if you want to talk to us about how you feel about it all, contact us on **0845 123 23 20**, email info@dascot.org or visit www.dascot.org. We're open 10am-2pm on Monday, Tuesday, Thursday and Friday.



Dear Doctor



Dear Doctor

I am on Citalopram; I know they affect my sex life. Is it possible they 'remove' my feelings I have for my partner? Life doesn't make a great deal of sense just now and I'm not sure that I still love him. Is there any proof?

A DAS Supporter

Dear DAS Supporter

Thank you for your letter which expresses feelings that many sufferers of Depression will relate to.

Antidepressants can certainly affect your sex life. They may reduce interest in sex and also make it more difficult to reach an orgasm. It can be difficult to weigh up the pros and cons of continuing treatment in this situation but I would certainly advise against stopping your treatment without discussing the problem with your doctor. Sometimes things can be improved by a change of medication or it may be possible to try reducing the dose. Certainly, some antidepressants are less likely to affect your sex life than others.

The tricky thing is that Depression itself can affect your sex life and it may be difficult to tease out whether it is the illness or the treatment that is causing your problems. Sadly, Depression can affect all aspects of your being: your thoughts, your behaviour and your feelings. Typically your feelings become negative regarding all important aspects of your life. The American psychiatrist, Aaron Beck, described a 'triad' of negative cognitions, or thoughts: 'I'm worthless', 'the world's meaningless' and 'the future's hopeless'. So your thoughts that 'life doesn't make a great deal of sense just now and I'm not sure that I still love him' are commonly expressed by those affected by Depression. When you are Depressed it is hard, perhaps impossible, to feel loving or lovable.

So I would strongly encourage you not to make any judgement about your relationship at the present time. It may be helpful to try to share the difficulties you are having with your partner and it would certainly be wise to discuss them with your doctor. Whether it is the illness or the medication that is the problem it should be very possible to do something about it.

I hope that you are successful.

Yours sincerely,
Gerry McPartlin

About Us

Depression Alliance Scotland (DAS) is the only national Scottish charity dedicated to improving the diagnosis and treatment of Depression, challenging the stigma associated with the illness and offering information and support to those affected by, and working with, Depression.

Support Us

We only receive partial funding from the Scottish Government for our work. Each supporter giving regularly at the rate of £5 per month – that is just 16p per day – helps us keep our vital services going, and just as importantly, plan for the future. Together, with a shared voice we can make a real and lasting difference for people affected by Depression. Please contact us for a standing order mandate or make a donation online at www.dascot.org/donate.html.

Contact Us

11 Alva Street
Edinburgh
EH2 4PH

Information and Support

T: 0845 123 23 20* or 0131 467 3050
E: info@dascot.org

Administration

T: 0131 226 1803
E: admin@dascot.org
F: 0131 226 7854

Web www.dascot.org and www.lookokfeelcrap.org

* Calls to 0845 numbers made from BT residential lines will cost no more than 4p per minute with a call set-up fee of 8p per call. Mobile and other providers' charges may vary.

Funders

DAS would like to thank all of its funders, whose financial support is greatly appreciated. DAS receives financial support from the Scottish Government Department of Health, Barcapel Foundation, Charitable Trust Funding, NHS Lothian, supporter subscriptions and donations from individuals.

Depression Alliance Scotland is a company limited by guarantee.

Registered Office at above address.

Registered Company No. 255656.

Registered Charity No. SC 034740

Editor

Kirsten Thomlinson

Sub Editor

Trish Crawford

Contributors to this issue

Trish Crawford, Ruth Lang, Gerry McPartlin, Derek Braid, Neil McFadden, Victor Gilbert, Dr Gillian McLean and DAS supporters

Design and Production

Deirdre Rusling

Supported and Printed by



Views expressed in this newsletter are those of the authors and not necessarily those of DAS

Depression Alliance Scotland © 2009