

Q & A

Suicide & Depression

What are Depression and Depressive illnesses?

Depression and depressive illnesses occur when chemicals in the brain, such as serotonin, become unbalanced or disrupted. A person who has depression does not think like a health person. The illness can prevent him/her from understanding the options available to help relieve his/her suffering. Many people who experience depression report feeling as though they've lost the ability to imagine a happy future, or remember a happy past. Often they don't realize they're suffering from a treatable illness and seeking help may not even enter their mind. Emotions and even physical pain can become unbearable. It's not that they want to die, but they may think it's the only to end the pain. Experiencing depression is involuntary, just like cancer or diabetes, but it is a treatable illness that can be managed.

How do alcohol/drugs affect depression?

Alcohol or drug use can be lethal for a person experiencing depression. Attempting to alleviate the symptoms of depression by drinking or using drugs can increase the risk of suicide by impairing judgment and increasing impulsivity.

Can a person mask his/her depression?

Many people experiencing depression and even contemplating suicide can hide their feelings and appear to be happy. Sometimes a suicidal person will give clues as to how desperate he/she feels.

Why do people attempt suicide when they appear to feel better?

Sometimes a severely depressed person contemplating suicide doesn't have enough energy to attempt suicide. As the disease lifts she/he may regain some energy but feelings of hopelessness remain, and the increased energy levels contribute to acting on suicidal feelings. Another theory proposes that a person may "give in" to the disease because she/he can't fight it anymore. This may relieve some anxiety, which makes her/him appear calmer in the period preceding a suicide attempt.

Is depression the same as the blues?

We need to understand that grief and clinical depression are different. It is normal and even expected to feel badly (feel grief) after losing someone, or experiencing a disappointing or traumatic event. This grief can stay with us for a very long time. However, consistently experiencing the symptoms of clinical depression for longer than two weeks may indicate the presence of an illness and

warrants consultation with a physician or mental health professional.

Why do depressive illnesses sometimes lead to suicidal thoughts?

There is a direct link between depressive illnesses and suicide. Depressive illnesses can distort thinking so a person can't think clearly or rationally. The illness can cause thoughts of hopelessness and helplessness, which may lead to suicidal thoughts.

What causes a depressive illness?

A combination of genetic, psychological, and environmental factors play a role in how and when a depressive illness manifests. Because these are illnesses, stress doesn't necessarily have to be present, but can trigger or exacerbate a depression. Depression can appear when there seems to be no reason for a person to feel depressed.

People of all ages, including infants and children (who may be born with a chemical imbalance), can experience depressive illnesses. Since they may be genetically predisposed to depression, a person may be at higher risk than someone whose family doesn't have a history of depression. This doesn't mean everyone will inherit a depressive illness.

Can depressive illnesses be treated?

Yes. There are various ways to treat depressive illnesses depending on the type of illness, the severity, and the age of the person being treated. A person experiencing depression should not try to manage his/her own illness. Depression is a condition like diabetes or high blood pressure that can be effectively managed with the help of a physician, mental health counselor, etc.

If a person has experienced a suicide loss, is he/she at higher risk for suicide himself?

Statistics do show that those who have lost a close friend or family member to suicide are at higher risk themselves, probably for a combination of reasons. There may be a biological predisposition toward depression in some families; in addition, the "modeling" of suicidal behavior by a person important to one's life or the thoughts of a grieving person about joining the loved one in death may all play part in the increased risk. Most importantly, treatments for depression are steadily improving and are often highly effective. Furthermore, counseling and support for those who have lost someone to suicide is very helpful to survivors as they move forward in their lives.