Do I need to get professional help?

Some people feel embarrassed about getting help for depression. In some cases, people might not even know they are experiencing depression, but may be worried about bodily symptoms, such as headaches or chest pain, which can be the way our body expresses tension and anxiety, as part of a depressive illness.

Getting help for depression is not a sign of weakness. It is important to find ways of getting help to treat it as soon as possible. A General Practitioner (GP), nurse or mental health professional will be able to advise on the choices you can make about which treatment will suit you best.

If you find it easier, you could always ask a friend or someone from your family or cultural/community group to go with you to your appointment.

If it happened once, will it happen again?

It can do. Sixty percent of those who have an episode of depressive illness remain free of it over the next year, but the others can have a relapse during this time.

- Those who have had three episodes of depression have a higher rate of recurrence
- Of this group, 20% remain free of depression over three years
- The pattern of relapse varies between different people – some have long periods free of depression, others have clusters of episodes; and still others have more episodes more often as they grow older
- For some people, depression is more common at a particular time of year, particularly the winter months.

How do I get help?

A GP is often the first place to get help. When making an appointment, it is a good idea to ask for a long appointment. This is so there is time to discuss your situation, complete an assessment and begin treatment.

Most depression will be treated by a GP, although sometimes your GP might involve a specialist, either to provide advice or to take over the treatment for a short period. This might be a psychologist or a psychiatrist or a referral to a local specialist mental health team.

It is common for people who have depression to have thoughts about harming themselves. Some people feel so distressed that they fear they will act on these thoughts. Seeking professional help at your mental health centre or GP is recommended if at any time such thoughts distress you.

Depression may recur. Treatment reduces depression again.
It is OK to ask for help before your depression gets severe.
If you have severe depression, always ask for help if you have thoughts of self-harm.
You can also discuss this symptom with a trusted family member or friend until you feel safer – it is important not to be alone when depression symptoms worsen, so you do not feel overwhelmed with negative and distressing thoughts.

What can I expect from treatment?

It is often hard to know what to expect from treatment for health problems. This guide is based on research evidence and is written by people, both experts and those who have had treatment for depression, who agree that it is your right to have treatments that have been shown by research to work. It is a responsibility of health professionals to tell you about those treatments which are more likely to work in most people, and which are likely to benefit you.

The diagram overleaf shows the stages of getting professional assessment and treatment for depression. Good treatment includes:

- A thorough health and mental health assessment
- Information about the condition and its treatment
- Information about, and choices between, those health professionals who are available to treat depression
- Referral to another professional or specialist if your condition worsens or if treatment seems not to be working
- Information about the condition for your family or partner if this is wanted
- Follow-up to help you prevent a repeat episode of depression.

Assessment and treatment for depression

Questions at your initial visit and assessment include:
- Your symptoms and their effects on your life
- Any previous episodes of depression
- Any other medical or mental health problems
- Pressures relevant to this episode of depression
- Your current supports and relationships

Depending on the outcome of the assessment, your GP or other health professional will recommend:

Education about depression, problem solving and lifestyle changes

**AND/OR**

Referral to a psychiatrist or other health professional or hospital

Initial treatment:
- Antidepressant medicine
- Counselling (Cognitive Behavioural Therapy (CBT) and Interpersonal Therapy (IPT)) or both

Weekly check-ups with a GP or another health professional

On a regular basis and not less often than every six weeks, your GP or other health professional will:
- Review your symptoms
- Review changes in your problems and your supports
- Review any side effects of treatment, if any

They may adjust or change your treatment(s), including reviewing problem solving therapy.

If no improvement or if depression worsens:
- Discuss referring you to a psychiatrist, another specialist mental health professional or hospital care

Follow-up:
- For one year for first episode
- For up to three years for two or more episodes including a booster session of CBT or IPT to maintain your wellbeing.