

# Depression and the role of the physiotherapist

Depression is common: around one million Australian adults live with it each year. On average, one in five people will experience depression in their lifetime — one in four females and one in six males.



Pain and disability associated with musculoskeletal conditions also represents a significant health burden in Australia, with approximately one in three adults being affected by it, according to National Health and Medical Research Council (2003) —Evidence-based Management of Acute Musculoskeletal Pain, *Australian Government* — the prevalence of depression in the community, together with the close link between depression and chronic musculoskeletal pain, means physiotherapists commonly work with people who are experiencing depression.

Treating depression can not only help people become mentally well but also increase the likelihood of the successful management of physical problems, like musculoskeletal pain. Physiotherapists have the potential to play an important role in recognising depression in clients and pointing them in the right direction towards starting and / or maintaining treatment.

## What is depression?

Depression is more than just a low mood — it's a serious illness. While we all feel sad, moody, or low from time to time, some people experience these feelings intensely, for long periods of time and often without reason. People with depression find it hard to function every day and may be reluctant to participate in activities they once enjoyed.

## What is the link between depression and musculoskeletal pain?

The National Health and Medical Research Council (2003) study (as above) into musculoskeletal pain found that rates of depression among patients with chronic low back pain are three to four times higher than the general population.

This study also found that depression often went unrecognised and untreated even when a person had regular contact with a health professional. The low rate of recognition of depression among those with musculoskeletal pain is thought to be due, in large part, to depression often being seen as a normal result of being physically unwell. Having musculoskeletal pain can lead to losses such as being less physically active, social, or working to a lesser

degree. These losses can often be attributed to adjustment difficulties rather than depression.

Depression can make recovering from a chronic physical health problem, like musculoskeletal pain, more difficult. Depression often affects motivation and can make it harder for people to find the energy to maintain good physical health by eating healthily, exercising, or taking medication regularly. Severe physical pain can also make it harder to get together with family and friends. This can make people feel lonely and increase feelings of isolation and also make people less motivated which can increase social withdrawal and make it harder to recover from depression.

## What are the signs and symptoms of depression?

A person may be depressed, if for **more than two weeks** they have:

- Felt sad, down or miserable most of the time; or,
- Lost interest or pleasure in most of their usual activities; and,
- Experienced symptoms in at least three of the following four categories:

### 1. Feelings

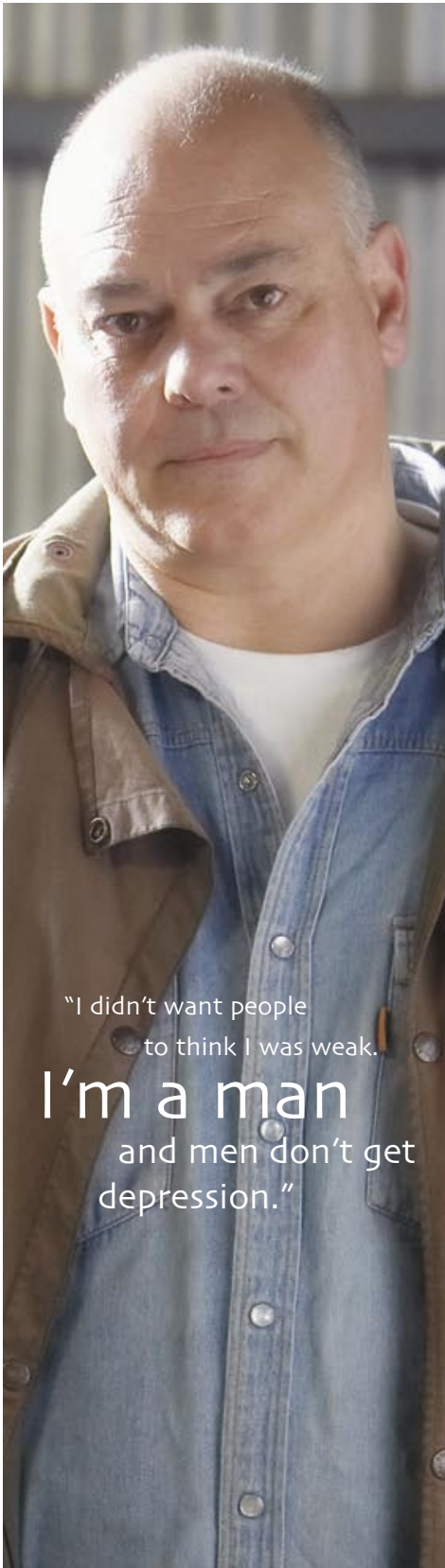
- Overwhelmed.
- Guilty.
- Irritable.
- Frustrated.
- Unhappy.
- Indecisive.
- Disappointed.
- Miserable.
- Sad, tearful.

### 2. Thinking

- 'I'm a failure.'
- 'It's my fault.'
- 'Nothing good ever happens to me.'
- 'I'm worthless.'
- 'Life is not worth living.'

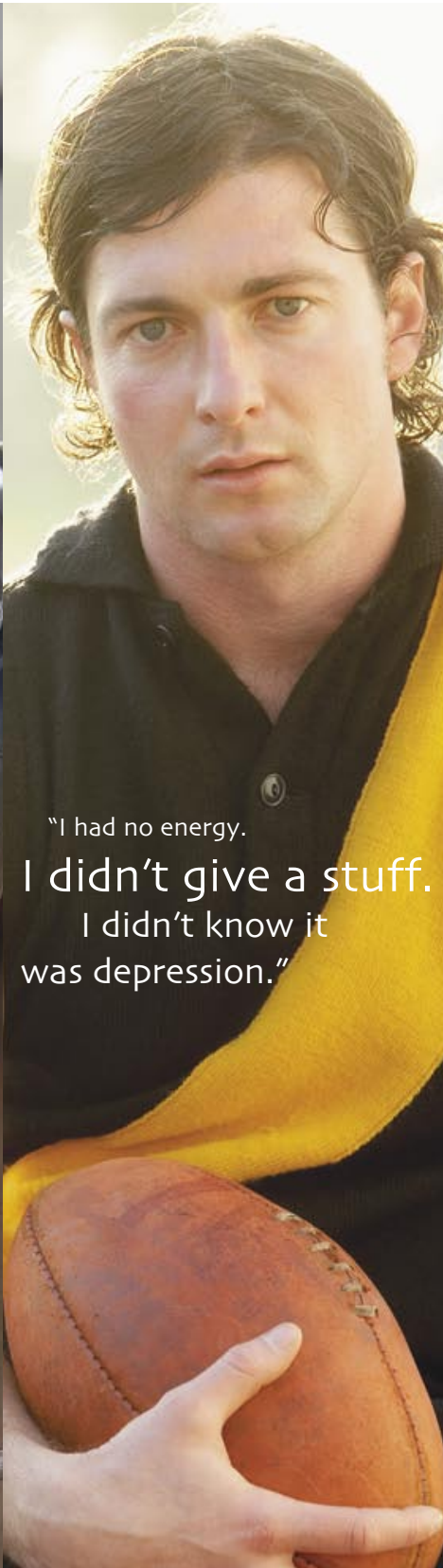
### 3. Behaviour

- Stopped going out.
- Not getting things done at work.
- Withdrawing from family and friends.
- Relying on alcohol and sedatives.
- Stopped doing things they enjoyed.
- Inability to concentrate.



"I didn't want people  
to think I was weak."

**I'm a man**  
and men don't get  
depression."



"I had no energy.  
**I didn't give a stuff.**  
I didn't know it  
was depression."



"When you're growing up  
you're told you have to  
**be the strong one.**  
But depression  
doesn't care."

*'If only the musculoskeletal pain is recognised and treated in people with comorbid depression it is unlikely that either condition will improve.'*

## BEYONDBLUE: THE NATIONAL DEPRESSION INITIATIVE

### 4. Physical

- Tired all the time.
- Sick and run down.
- Slowness of movement.
- Slowness of thinking.
- Headaches and muscle / stomach pains.
- Sleep disturbance.
- Poor appetite / weight loss.

#### How is depression treated?

There is a range of treatments that can be effective for people with depression. Treatment may include psychological therapies and / or medication.

#### Psychological treatments

##### COGNITIVE BEHAVIOUR THERAPY (CBT)

Often people with severe chronic physical illness and depression have different ways of seeing situations and people. Cognitive Behaviour Therapy helps people to identify and change negative thought patterns and find ways of enjoying themselves.

##### INTERPERSONAL THERAPY (IPT)

The way we get along with others has an impact on how we feel. Interpersonal Therapy (IPT) helps people find new ways of improving relationships as a way of beginning to feel better.

#### Medication

If a person is only mildly or moderately depressed, psychological treatment alone may be effective. However, if depression is severe or persists, medication is often necessary as well.

Medical research shows that depression is often associated with an imbalance of certain chemicals in the brain. Antidepressants can help rebalance these chemicals.

Antidepressant medication can take seven to 21 days to work effectively and should not be started or stopped without medical advice.

It's important that any current medication for the chronic physical illness, including over-the-counter medications and herbal or natural remedies are also reviewed by a medical practitioner before commencing antidepressants.

#### Where to get help?

- A General Practitioner (GP) is a good first port of call. In some cases, the person may be referred to a mental health specialist like a psychiatrist or psychologist. Some GPs

undertake specific training in mental health and offer psychological treatments. For a list of GPs with expertise in treating depression, anxiety and related disorders visit the beyondblue website [www.beyondblue.org.au](http://www.beyondblue.org.au) and click on Find a Doctor.

- Psychiatrists are doctors who specialise in mental health. They can make medical and psychological assessments, conduct medical tests and prescribe medication. Some psychiatrists use psychological treatments like CBT or IPT.
- Psychologists specialise in providing non-medical (psychological) treatment for depression and related disorders. This involves CBT and IPT techniques. Under the Better Access to Mental Health Care Initiative people can claim rebates from Medicare for up to 12 individual (18 in exceptional circumstances) and 12 group sessions in a calendar year. To find a psychologist, visit the beyondblue website [www.beyondblue.org.au](http://www.beyondblue.org.au) and click on Find a Psychologist.
- Social Workers and Occupational Therapists provide focused psychological treatment for people with mental disorders who are referred by a GP, psychiatrist, or pediatrician. This involves, but is not limited to CBT, IPT and self-management techniques. Under the Better Access to Mental Health Care Initiative clients can claim rebates from Medicare for these services for up to 12 individual (18 in exceptional circumstances) and 12 group sessions in a calendar year.

#### What can physiotherapists do to help a person who is depressed?

While it is not the role of the physiotherapist to formally diagnose or treat depression, there are many ways they can assist someone who they suspect has depression.

These include:

- Encouraging the person to see a doctor or other appropriate health professional.
- Giving the person relevant information or resources on depression.
- Encouraging the person to manage their depression by keeping active, getting enough sleep, eating healthily and limiting

alcohol and/or other drug use.

- Taking the treatment they are receiving for depression into consideration when devising or updating a treatment plan for their physical illness / pain.
- Encouraging the person to maintain their treatment for depression by continuing to seek appropriate help from a health professional on an ongoing basis and stick to a treatment plan.

#### Where can you get more information?

##### **beyondblue: the national depression initiative**

[www.beyondblue.org.au](http://www.beyondblue.org.au)

Information on depression, anxiety and related alcohol and drug problems, available treatments and where to get help.

##### **beyondblue info line**

1300 22 4636

Information on depression, anxiety and related drug and alcohol problems, available treatments and referral only (local call).

##### **www.ybblue.com.au**

*beyondblue's* website for young people — information on depression and how to help a friend.

##### **Australian Physiotherapy Association**

[www.physiotherapy.asn.au](http://www.physiotherapy.asn.au)

Information for physiotherapists on physiotherapy, professional development, conferences and events.

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