

RECOGNIZING THE SIGNS AND SYMPTOMS OF DEPRESSION

It's often complex to correctly diagnose people who have ALS and their caregivers with depression. How you judge whether someone is suffering from depression, can be different for each person with ALS, compared to their caregivers.

For people who have ALS it's more difficult to decide what is 'typical' for a certain person and what isn't. Especially since the activities in their lives can be limited by the disease.

Understanding the signs

Depression is usually expressed as feelings of sorrow, guilt, insomnia, a change of appetite and an increased irritability during daily life interactions. When they keep feeling unhappy – sorrow and anger that last longer than two to four weeks – then a warning light for depression can go on.

A depression can influence daily functioning. For a precise diagnosis it's necessary to try make a difference between the symptoms of ALS and those of a depression. Is it normal for example that someone with ALS takes two naps a day? Fatigue may point to depression, but it might not.

When collecting attentive and detailed diagnostic information you also have to consider the 'timelines' that go with fear, sorrow and a serious illness. Keeping that in mind it's to be expected of caregivers of ALS patients that they are confronted with feelings of sorrow, a feeling of loss. For a family that has recently been confronted with the diagnosis, the situation – the timeline – for expressing sorrow is different than for a family that has been dealing with ALS for a longer period of time. This can decide what kind of symptoms to look for.

See the big picture

A depression can, as previously mentioned, cause changes in the sleeping and eating pattern, inexplicable irritability, mood swings, memory loss and more.

Communicating with the treatment teams or community services is often the most important step when learning to deal with emotions. It's important for the entire family that they can talk about their feelings and for the treatment team it's equally important to get an overall view of the people with ALS and their loved ones. It's a good thing to involve as many people as possible in an open discussion for solving problems, because it helps to answer questions.

Are aggression or behavior outbursts of a person with ALS ascribed to depression or is it something else entirely? Those reactions can also be a consequence of what they describe as 'frontotemporal dementia', an illness that isn't rare with ALS patients and which is one of the many possible diagnoses.

The treatment team can also offer a more extended guidance when they understand how a caregiver reacts to a loved one with ALS. It's useful to remember that a depressive person is sometimes the last one to recognize his or her own symptoms. Caregivers are encouraged to talk about reactions to 'anticipating sorrow', or fear for what could happen in the future. This phenomenon occurs very often but is also ignored often and can – eventually – turn into a depression.

But there is good news as well, because depressions can be treated efficiently. Know that there are people nearby whom you can always reach and who know exactly how to help you.

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