

cancer.org | 1.800.227.2345

Depression

Depression is one of the most common types of mental distress. Feelings of sadness, grief, or distress are a normal response to having cancer. Dreams, plans, and the future may feel uncertain.

But if you've been feeling depressed for a long time and it hasn't gotten better, or if it's keeping you from doing your daily activities, it's important to find support.

- What is depression?
- Causes
- Depression and cancer
- Symptoms
- Screening for depression
- Treatments
- Tips for coping with depression
- Talking to your health care team
- What caregivers, friends, and family can do
- Find more support

What is depression?

Depression can describe a temporary mood or feeling. It can also describe a mental health diagnosis.

The most common types of depression in people who have, or had, cancer are:

• Major depression disorder (MDD) also known as clinical depression. People with MDD often have very intense symptoms of depression over shorter periods of time (but for at least 2 weeks).

• Persistent depressive disorder (PDD), also known as dysthymia. People with PDD often have less intense symptoms but for a much longer time (at least 2 years).

Causes

Depression isn't caused by just one thing. Studies show that when a person has depression, it is often caused by a combination of different factors. This can include:

- Trauma, abuse, and grief
- Stress and life events

Depression and cancer

Phone: 988

• Interpretation for more than 240 languages

ASL Videophone for people who are deaf or hard of hearing

Text: 988 (English and Spanish only)

Website: http://suicidepreventionlifeline.org

To get immediate help, you can also go to the emergency department or call 911.

Screening for depression

Many experts recommend screening everyone with cancer for anxiety and depression. If your health care team asks you about your depression, share how you're really feeling.

They might ask questions to learn more about:

- Thoughts or feelings you are having
- How often you have those feelings, and how intense they are
- Physical symptoms that might be connected to your depression
- How these symptoms affect your day-to-day life
- If you're thinking of hurting yourself or anyone else

Treatments

Managing depression is very personal and individualized. It's different for everyone. If you have depression, your treatment will depend on your specific situation, lifestyle, and needs.

Treatment might include talk therapy, medication, or a combination of both. Sometimes, other specialized activities like light therapy and mindfulness meditation are also combined with these standard medical treatments.

The goal of treatment is to improve your symptoms of depression, reduce your suffering, and improve your quality of life.

Psychotherapy (talk therapy)

There are many types of psychotherapy (talk therapy). The most common types used to treat depression include:

- Cognitive behavioral therapy (CBT): CBT helps you recognize and process your feelings. You'll learn relaxation techniques, coping strategies, and ways to manage negative thoughts.
- Acceptance and commitment therapy (ACT): ACT is a sub-set of CBT. You'll
 use mindfulness practices to notice and acknowledge your negative thoughts
 without trying to change or get rid of them.
- Interpersonal therapy (IPT): IPT focuses on the connection between your depression and your relationships with others.
- Eye movement desensitization and reprocessing (EMDR): EMDR therapy uses directed eye movements along with talk therapy to help the brain heal from past life experiences.

Medicines for depression

Your doctor or cancer care team might suggest adding medications if depression is affecting your everyday life or isn't improving. There are many types of medicines that can be used to treat depression. Many of them work for anxiety or other mental health conditions as well.

Selective serotonin reuptake inhibitors (SSRIs)

Selective serotonin reuptake inhibitors (SSRIs) are the most common type of medicine used to treat depression. There are certain chemicals (called **neurotransmitters**) that affect depression. SSRIs stop your body from absorbing these chemicals.

The most common SSRIs used for depression are: Fluoxetine (Prozac), paroxetine (Paxil), sertraline (Zoloft), and escitalopram (Lexapro).

Some SSRIs are also used to treat anxiety, post-traumatic stress disorder (PTSD), eating disorders, obsessive-compulsive disorders (OCD), and bipolar disorders.

The most common SSRI side effects are sexual problems (low libido, erectile dysfunction), weight gain, stomach problems (heartburn, nausea, diarrhea, or constipation), insomnia, headaches, and dizziness. If you have bad side effects with one SSRI, your health care team might have you try a different one. You might not have the same side effects with a different medicine.

SSRIs usually take 4-6 weeks to make a difference, so it's important to be patient.

Other medicines used for depression

Mindfulness-based activities

Studies show that certain mindfulness-based activities can improve symptoms of depression.

Mindfulness is about noticing and being present with your thoughts, emotions, body, and the world around you.

Our minds distract us from the present moment all the time, so it's easy to get caught up in thoughts and worries about the past or future.

Mindfulness can help you stay connected to the present moment.

Learn more about <u>practicing mindfulness and relaxation</u>⁶.

Tips for coping with depression

- **Reflect**. Think about what helped you in the past during distressing situations.
- Take one moment at a time. Also, it's okay if you don't always feel positive. An important part of healing is letting yourself feel all your feelings, good and bad.
- Stay informed and ask questions. One of the most distressing things for many people is the unknown.
- Have a reliable support system. This might be a friend, family member, group, or even a pet.
- Find someone you can talk to. A therapist can help you identify and reframe negative thoughts and behaviors and learn new coping skills.
- Take deep, slow breaths. This tells your nervous system you're safe and can relax. Doing this over time can help change your physical reactions to mental distress.
- **Use a journal.** Writing down or recording your thoughts and feelings can help you process what you're going through.
- Try yoga, massage, imagery, writing, music, or pet therapy. These have all been shown to help with depression. Even getting outside for a walk can make a difference.
- Connect with others. Connection, community, and meaningful relationships are what gives our lives meaning.
- Get help with the stressors in your life. If you have distress about money, work, school, transportation, or insurance you can ask about talking to a social worker or navigator. They can often find community resources or other support for you.

It's important to know that you might still have depression sometimes, even if you're being treated for it. This doesn't mean it's not working for you. The goal is to get your depression to a manageable level, so it doesn't stop you from living your life and finding joy in the activities and people you love.

Often, there isn't one single fix. Something might even work one day but not the next. The more coping methods you have ready, the better prepared you'll be when you need them.

Talking to your health care team

It can be difficult to talk about mental health. It might help to write down some of the symptoms you're having or questions you want to ask. Here are a few ideas:

- Can my symptoms be managed?
- What types of treatments do you recommend?
- Would medication help?
- Can I talk with a therapist or specialist about my symptoms?
- Can you recommend a support group for me?

What caregivers, friends, and family can do

Cancer and Mental Health: How Caregivers, Friends, and Family Can Help 7

https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/social-cohesion#top

Our epidemic of loneliness and isolation: The U.S. Surgeon General's advisory on the healing effects of social connection and community. US Department of Health and Human Services. May 2023. Accessed December 15, 2023. https://www.hhs.gov/sites/default/files/surgeon-general-social-connection-advisory.pdf

Roy-Byrne PP. Management of psychiatric disorders in patients with cancer. *UpToDate*. UpToDate Inc; 2023. Updated September 2023. Accessed December 15, 2023. https://www.uptodate.com/contents/management-of-psychiatric-disorders-in-patients-with-cancer

Rivest J and Levenson J. Patients with cancer: clinical features, assessment, and diagnosis of unipolar depressive disorders. *UpToDate*. UpToDate Inc; 2024. Updated March 2023. Accessed January 5, 2024. https://www.uptodate.com/contents/patients-with-cancer-clinical-features-assessment-and-diagnosis-of-unipolar-depressive-disorders

Rivest J and Levenson J. Patients with cancer: Overview of the clinical features and diagnosis of psychiatric disorders. *UpToDate*. UpToDate Inc; 2024. Updated January 2023. Accessed January 5, 2024. https://www.uptodate.com/contents/patients-with-cancer-overview-of-the-clinical-features-and-diagnosis-of-psychiatric-disorders

Saad AM, Gad MM, Al-Husseini MJ, AlKhayat MA, Rachid A, Alfaar AS and Hamoda H. Suicidal death within a year of a cancer diagnosis: A population-based study. *Cancer*. 2019. 125: 972-979. https://doi.org/10.1002/cncr.31876

Syrjala KL & Chiyon Yi J. Overview of psychosocial issues in the adult cancer survivor. *UpToDate*. UpToDate Inc; 2023. Updated October 2023. Accessed December 15, 2023. https://www.uptodate.com/contents/overview-of-psychosocial-issues-in-the-adult-cancer-survivor

Last Revised: July 25, 2024

Written by

The American Cancer Society medical and editorial content team (https://www.cancer.org/cancer/acs-medical-content-and-news-staff.html)

Our team is made up of doctors and oncology certified nurses with deep knowledge of cancer care as well as editors and translators with extensive experience in medical writing.

American Cancer Society medical information is copyrighted material. For reprint requests, please see our Content Usage Policy (www.cancer.org/about-us/policies/content-usage.html).

cancer.org | 1.800.227.2345