If you are living with a chest, heart or stroke condition you may have periods when your mood is low: this is quite common. ‘Feeling down’ for some of the time is a natural reaction as you learn to accept, and adapt to, your illness. However, if you are feeling low for most of the time you could be depressed.

Depression affects your mood and how you feel about life – you may feel as if there is no point in anything. It can make you feel as if you don’t want to get up in the morning or as if you don’t want to go out or see family or friends. Often depression creeps up over a period of time.

Unfortunately many people don’t seek help. You may not realise that feelings you have may actually be symptoms of depression. You may not want to speak about how you feel because you think there is a stigma attached to being depressed, or you are afraid of what other people will think of you. However, depression is actually a common condition. In the UK, at any point, around 10% of people are treated for depression and 1 in 6 people will experience it at some point in their life.

Depression is an illness that can be successfully treated, so it is important to acknowledge if you think you are depressed and to let someone know how you are feeling.

Depression is not a sign of weakness; it is not your fault that you feel depressed.

You don’t have to feel like this; depression can be treated.

The first step is to let someone know how you are feeling; you are not alone.

Depression takes a while to develop and can take time to resolve, but it will get better faster with the right help.
How is your mood?

Depression often builds up over a period of time – you may think feeling low is “just something else you have to put up with”. However, this isn’t true! Recognising the symptoms of depression is the first step to getting the help you need.

Common symptoms of depression include:

- not being able to enjoy things that are usually pleasurable or interesting.
- loss of interest in life.
- feelings of helplessness and hopelessness.
- persistent sadness / crying spells.
- mood swings: feeling short tempered / irritable or easily upset.
- tiredness and loss of energy.
- loss of confidence and self esteem.
- difficulty concentrating.
- feelings of guilt or worthlessness / blaming yourself for everything.
- changes in appetite / weight gain or loss.
- sleeping problems – difficulties getting off to sleep or waking up much earlier than usual.
- lack of energy / motivation.
- being less aware of others and more inward looking.
- headaches, palpitations / chest pain and other physical aches and pains (these can sometimes be mistaken for symptoms of your chest, heart or stroke condition).
- loss of sex drive / sexual problems.
- feeling alone even if you are in company.
- avoiding other people, sometimes even your closest friends.
- thinking about suicide and death.

If you have any of these symptoms for over 2 weeks and they are affecting how you cope with day-to-day life then you should let someone know how you are feeling. Your GP or practice nurse are both good people to speak to as they will also understand about your chest, heart or stroke condition. Often these symptoms get better as your overall health improves but the crucial thing is to be open about them with those around you. Don’t add to your worries by trying to hide things.

It may be hard, at first, to talk about how you are feeling but remember doctors and nurses are skilled at recognising and treating depression. They will also be aware of how common depression is when you are living with a long-term health condition.

The severity of depression varies from person to person. Doctors tend to classify depression as mild, moderate or severe depending on your symptoms and how you feel you can cope with daily life.
Effects on your day-to-day life

Depression colours the way you look at life. It can drain you of energy, hope and motivation. You may be very critical of yourself without even realising it. If you are depressed you are likely to view your life (your past, present and future) in a negative way and you may not believe there is anything you can do to get better.

With most chest, heart and stroke conditions being proactive is an important part of self-managing your condition and keeping yourself well. You have to have a certain amount of motivation, for example, to make changes to your lifestyle, keep active and continue with your rehabilitation exercises.

If you are depressed you are less likely to look after yourself and do things to help keep yourself well. It can be easy to slip into a negative attitude of “losing weight / stopping smoking / doing my rehab exercises?” etc.”

Depression can make you want to avoid seeing people, even those that are closest to you. You may believe that “no one wants to see me as I have nothing to say.” This can lead to a vicious cycle of withdrawal and isolation, which in turn makes you feel even lower.

The most important thing to remember is that depression is a common illness which can be treated. It is not your fault. If you do talk to others around you then you are likely to find others have felt the same way – that, in itself, can be helpful.

Feeling better may take time, but depression can be treated and you can enjoy life again.
**Why do I feel low?**

There are many reasons why you may be feeling low or depressed. Living with a chest, heart or stroke condition can be exhausting. As well as dealing with physical symptoms you may need to come to terms with the effect that your illness has on your life. This can include:

- not being able to do some of the things you enjoy doing.
- changes in your body image and how you feel about yourself.
- change in your close relationships / family dynamics.
- changes in your job / not being able to work.
- financial worries.
- fears of what your future holds.
- feeling isolated and alone.
- changes in your sexual relationships.
- loss of independence and / or mobility.

Illness affects everyone differently; it is likely that you will go through a range of emotions as you try to accept what is happening to you. Common emotions include fear, anger, frustration and sadness. Often these feelings pass; however, if you are feeling low for most of the time you could be depressed.

**Other causes of depression-like symptoms**

Usually there is no single cause of depression. Some people can develop depression out of the blue. For others, it can be triggered by a stressful time / event, e.g. bereavement, redundancy or divorce.

Some people are more prone to depression, e.g. if you have been depressed before, or if there is a history of depression in your family.

Depression can sometimes have a physical cause, e.g. problems with your thyroid gland, low levels of certain vitamins or low levels of iron in your blood (anaemia). Sometimes depression can develop as a side effect of the drugs you are prescribed or if you are drinking too much alcohol.

*Whatever the cause it is important to remember that depression can be treated. The first step is to tell someone how you are feeling.*
**Going to see your doctor / nurse**

Your doctor / nurse may ask about your mood if you are seeing them for a check-up. You may, however, want to make an appointment specifically to talk about how you are feeling. Try not to get nervous as your doctor / nurse is trained to recognise signs of depression and will be used to talking about emotions.

- If you think it would be helpful, ask someone you trust to come to your appointment with you. It can be useful to write down how you are feeling beforehand, especially if your concentration is affected or you feel you might clam up during your appointment.
- You will be asked a series of questions about how you have been feeling in the past few weeks. You may also be given a questionnaire to fill out. This can help your doctor / nurse assess the level of depression you may have. Remember there are no right or wrong answers; the main thing is that you are honest about how you have been feeling.
- You may need some blood tests to rule out any physical cause of depression.

**Treatments for depression**

After an initial assessment your doctor / nurse can identify what degree of depression you have: mild, moderate or severe. This can help them to decide what treatment is best for you.

Your treatment will also depend on how long you have been feeling the way you do, if you have had treatment for depression before, how your general health is and what treatment you are currently taking for your chest, heart or stroke condition.

Treatment can include ‘talking therapies’ and antidepressant drugs. Sometimes a combination of both will be suggested.

Your doctor may also recommend that you make changes to your lifestyle to help improve your mood.

- **Talking therapies:** there are lots of different types of therapies which involve talking about how you feel. Some, e.g. cognitive behavioural therapy (CBT), have been proven to be particularly helpful if you are depressed.

  CBT is a form of therapy which focuses on how you think about yourself, the world and others as well as how your thoughts and actions affect your feelings. CBT can help you to change how you think (cognitive) and what you do (behaviour). Telephone and face-to-face CBT services are available from some support organisations as well as the NHS. Living Life to the Full provide a free web-based CBT course (contact details are at the end of this factsheet).
Counselling is another talking therapy which involves talking about your feelings / problems with a trained counsellor. Your counsellor will listen to you, support you and help you deal with how you are feeling. Some GP practices have a counsellor working from their surgery. Otherwise your GP should have a list of local support agencies and counsellors. Some agencies offer low-cost counselling depending on your financial situation.

Depression is a very personal experience: you are the only one who truly knows how you are feeling and what you are going through. Different forms of talking therapy suit different people. It is important that you feel safe and comfortable with your therapist and that you can talk openly about how you are.

• **Antidepressant drugs**: these balance chemicals in your brain which may be contributing to how you are feeling. There are several different types: your doctor will decide which one is best for you depending on your symptoms and medical history.

Antidepressants take a few weeks to start working and it can take up to 6 weeks to get their full effect. Sometimes you may have to try more than one type before you start to feel better.

Antidepressants are not the same as tranquillisers and they are not addictive. However, their use has to be monitored and they should not be stopped suddenly. As with all treatments you may notice some unwanted side effects, especially in the first few weeks of treatment, e.g. nausea, dizziness and dry mouth. When you begin your treatment it is important to arrange a follow-up appointment with your GP, within the next month, to talk to your doctor about how you are feeling and any side effects that you are having.

**Do not take any herbal remedies for depression (e.g. St John’s Wort) without talking to your doctor. Herbal remedies may interact with any prescribed drugs you are taking for your chest, heart or stroke condition.**
If you have severe depression, you are feeling desperate or suicidal, or you are not responding to treatment, your doctor may refer you to a specialist mental health team. You may see a psychiatrist and / or a specialist psychiatric nurse.

**For more detailed information about all aspects of treatment for depression contact Action on Depression (details at the end of this factsheet).**

**Making changes to your lifestyle**

As well as recommending talking therapy and / or antidepressant drugs your doctor is likely to offer you some general healthy lifestyle advice which can help to improve your mood. This can include:

- Keeping as active as possible. Get outside in the fresh air if you can. Exercise can help improve symptoms of depression and lift your mood. Some GPs prescribe a structured programme of exercise as a treatment for depression.
- Monitoring how much alcohol you drink. Alcohol will bring your mood down and can make sleeping patterns worse.
- Avoidance of any recreational drugs.
- Eating as healthy and varied a diet as you can.
- Trying to keep in touch with family and friends. Emailing, texting and social networks can all be useful if you don't feel up to talking.
- Trying to keep up with some of the activities you normally enjoy. Making regular arrangements with friends / family can help with motivation. If you don't feel like socialising try choosing activities that won't involve too much interaction, e.g. watching TV or walking the dog.

Making these changes can also help your chest, heart or stroke condition and can have a positive impact on your overall health.

**Other things you can do for yourself**

Tips about coping with depression

- Most people find they have good and bad days. Be kind to yourself and be patient.
- If sleeping is a problem, try to establish a bedtime routine, e.g. have a warm bath to relax you and go to bed at the same time each night. Try not to worry if you don't sleep. Read, or listen to the radio or TV. Your body is still resting by lying down.
• Depression can be exhausting. So try to pace yourself – if you feel worse at certain points of the day, e.g. the morning, try to plan activities for when you feel best.

• When you are low it can be difficult to make decisions – talk to those people you trust before making any big changes / decisions.

• Try not to bottle up your feelings. Even though you may want to avoid people try talking to a friend, family member, colleague or someone from your church. Find out about what support is available locally (e.g. support groups), by telephone (e.g. helplines) or online (e.g. discussion forums – these can be very helpful). The CHSS Advice Line nurses (Freephone 0845 077 6000) can help you to find counselling and other support services in your local area.

• Relaxation, Mindfulness, yoga, tai chi and reflexology are examples of additional ways to increase your feeling of well being and reduce stress / anxiety.

Remember that depression can be treated and these negative / distressing feelings will lift.

Other sources of support

Action on Depression
Thorn House, 5 Rose Street, Edinburgh EH2 2PR
Information service: 0808 802 2020 (2pm – 4pm Wednesdays)
Tel: 0131 243 2786
Email: info@actionondepression.org Website: www.actionondepression.org

Breathing Space
Phoneline: 0800 83 85 87
Website: www.breathingspacescotland.co.uk
Breathing Space is a free and confidential phoneline service for any individual who is experiencing low mood or depression, or who is unusually worried and in need of someone to talk to. The phoneline is open 24 hours at weekends (6pm Friday – 6am Monday) and from 6pm to 2am on weekdays (Monday – Thursday).

Living Life to the Full
A free online life skills course developed in Scotland based on cognitive behaviour therapy.
Website: www.livinglifetothefull.com

If you are feeling desperate, suicidal or need to talk to someone now please call Samaritans on 08457 90 90 90 or email jo@samaritans.org