You or someone you know may have been diagnosed with anxiety, depression, or both. What do you do next? As you read this brochure, you will learn about anxiety and depressive disorders, available treatments, and tips for managing symptoms.

You are not alone — and the Anxiety and Depression Association of America (ADAA) is here to help.

Most of us feel anxious or depressed at times. A death in the family, losing a job or home, separation and divorce, financial instability, a severely ill child... the list is endless. Feelings of sadness, loneliness, fear, hopelessness, stress, and anxiety are normal, and they usually pass with time. But if they interfere with daily activities, cause a high level of distress, or occupy your mind endlessly, you may have an anxiety disorder or depression — or both.

It is common to experience anxiety and depression. About half of those who are diagnosed with depression are also diagnosed with an anxiety disorder, and most people with depression experience some anxiety symptoms. Many people with an anxiety disorder also may experience periods of depression. At times, anxiety and depression may seem inseparable.

Anxiety and depression can be crippling, and they can have profound negative effects on you and your family and friends. They can disrupt your daily activities and affect your ability to care for loved ones or complete tasks related to school or work or around your home.

These disorders are real and they are serious, but they can be treated. There is hope, and finding the right treatment will help you get better.

ANXIETY DISORDERS

An important part of living, anxiety is a normal emotional reaction to stress, which is a biological response to a threat. Anxiety helps us get out of harm’s way and prepare for important events, and it warns us when we need to take action.

When anxiety is persistent, excessive, seemingly uncontrollable, overwhelming, and disabling or when it interferes with daily activities, you may have an anxiety disorder.

The term “anxiety disorder” includes generalized anxiety disorder (GAD), panic disorder and panic attacks, agoraphobia, social anxiety disorder, selective mutism, separation anxiety, and specific phobias.

Obsessive-compulsive disorder (OCD) and posttraumatic stress disorder (PTSD) are closely related to anxiety disorders; anxiety is one of the symptoms. Some people may experience either of these disorders, along with depression, anxiety, and other related disorders.

Each disorder has specific symptoms. For more details, visit the ADAA website at www.adaa.org.

DEPRESSION AND DEPRESSIVE DISORDERS

The term “depression” often characterizes feelings of being sad, discouraged, hopeless, irritable, unmotivated, as well as a general lack of interest or pleasure in life. When these feelings last for a short period of time, it may be called a passing case of “the blues.” But when they last for more than two weeks and interfere with regular daily activities, it’s likely to be a depressive disorder.
Depressive disorders, also known as mood disorders, include three main types: **major depression**, **persistent depressive disorder**, and **bipolar disorder**, and they can occur with any anxiety disorder. Adults, teens, and children may be diagnosed with a depressive disorder.

**Major depression** involves a combination of symptoms that are disabling and interfere with your ability to work, study, eat, and sleep. It may occur once in your lifetime or more frequently. Or you may experience it following the death of a loved one, a romantic breakup, a medical illness, or other life event. Some people may experience physical aches and pains, leading them to believe that these are symptoms of an undiagnosed physical ailment. Others may feel that life is not worth living, and a small number may attempt to end their lives.

Depression is different in each person. No two people experience the same combination, severity, frequency, and duration of symptoms.

**Symptoms of major depression**

- Persistent sad, anxious, or “empty” mood
- Feelings of guilt, worthlessness, helplessness
- Loss of interest or pleasure in hobbies and activities, including sex
- Decreased energy, fatigue, feeling “slowed down”
- Difficulty concentrating, remembering, making decisions
- Insomnia, early-morning awakening, or excessive sleeping
- Low appetite and weight loss or overeating and weight gain
- Thoughts of death or suicide, suicide attempts
- Restlessness or irritability

**Persistent depressive disorder** is a form of depression that usually continues for at least two years. Although it is less severe than major depression, it involves the same symptoms, mainly low energy, poor appetite or overeating, and insomnia or oversleeping. It can show up as stress, irritability, and mild anhedonia, which is the inability to derive pleasure from most activities.

**Bipolar disorder**, once called manic-depression, is characterized by moods that shift from severe highs (mania) or mild highs (hypomania) to severe lows (depression). During the manic phase, a person may experience abnormal or excessive elation, irritability, a decreased need for sleep, grandiose notions, increased talkativeness, racing thoughts, increased sexual desire, markedly increased energy, poor judgment, and inappropriate social behavior. During the depressive phase, a person experiences the symptoms of major depression. Mood swings from manic to depressive are often gradual, although they can also take place abruptly.

**The Numbers**

- **Anxiety disorders**: More than **40 million** adults in the U.S.
- **Major depression**: About **14.8 million** American adults
- **Persistent depressive disorder**: About **3.3 million** American adults
- **Bipolar disorder**: About **5.7 million** American adults
Treating Anxiety and Depressive Disorders

Anxiety and depression are highly treatable. Therapy and medications have proved effective in treating anxiety and depressive disorders, sometimes separately and sometimes in a combination. New scientific research emerges all the time to improve treatments. This brochure gives an overview of current treatments that are proven effective for these disorders.

Often depression and anxiety can be treated the same way and at the same time. Treatment should be tailored to your individual diagnosis and designed to help you manage and reduce the your symptoms. You may have symptoms that require treating one disorder first. The first step is getting the appropriate diagnosis from a licensed mental health practitioner and deciding on a course of treatment that will work for you.

Forms of psychotherapy. Cognitive-behavioral therapy (CBT) is a short-term form of psychotherapy that is very effective. CBT teaches you skills to help you cope with anxiety and depression. It helps you feel more comfortable doing things that you have been afraid of or lost interest in by teaching you to deal directly with the thoughts, feelings, and behaviors that are upsetting you and to change what keeps them going. CBT can also encourage a more balanced state in your body and better attendance with all aspects of your environment.

Medications. Symptoms of anxiety and depressive disorders often occur together, and both respond to different classes of medications. Selective serotonin reuptake inhibitor (SSRI) and serotonin norepinephrine reuptake inhibitor (SNRI) medications are the treatment of choice. SSRIs and SNRIs have fewer side effects than many of the medications prescribed in the past. These medications must be taken for at least two to four weeks to experience their full effect, and it may take several weeks to adjust the medication to the correct dosage. Be sure to discuss with your doctor any interactions with other prescriptions, including birth control and antibiotics.

Once you are feeling better, you must continue taking your medications for the prescribed time period. Changing or withdrawing from any medication should only be done under your doctor’s supervision.

Medications for bipolar disorder. Mood stabilizers (lithium, valproate, lamotrigine) are the treatment of choice. It’s important to get a proper diagnosis and discuss treatment options that will lead to a healthy and productive life. Untreated, bipolar disorder usually gets worse, causing more frequent and more severe manic and depressive episodes, increasing the likelihood of substance abuse and suicide attempts. Unlike treating depression and anxiety, taking an antidepressant may worsen symptoms of
bipolar disorder. Your doctor may suggest a combination of medication and CBT or another type of therapy. Finding the right treatment may take some time.

Benzodiazepines are also a class of drugs often used to treat anxiety disorders, and they do not appear to have negative effects on bipolar disorder.

Discuss your options with your doctor. And stay in touch to report any side effects, which your doctor will carefully monitor. You may need to try a few different combinations, and it may take some time to find the most effective medications for you.

Detailed information about medications is available at the ADAA website www.adaa.org.

For information about specific medications approved by the U.S. Food and Drug Administration (FDA), visit www.fda.gov.

Other forms of therapy. Your doctor or therapist may suggest other therapies.

Recent studies have shown attention training can be as effective in treating GAD (generalized anxiety disorder) and social anxiety disorder as CBT and medication. Other studies have shown it to be effective in reducing depression symptoms. Attention training helps patients practice how not to focus on threatening words or on images of threatening faces.

Family therapy uses strategies to reduce the level of distress within a family that may contribute to a person’s symptoms or result from them. Relaxation techniques and mindfulness meditation — breathing re-training, progressive muscle relaxation, and exercise — may help you develop the ability to cope more effectively with the stresses that contribute to anxiety and mood, as well as physical symptoms.

Particularly effective for bipolar disorder is interpersonal and social rhythm therapy. This program stresses maintaining a regular schedule of daily activities and stability in personal relationships. People record the timing of their activities, moods, and levels of social stimulation. As treatment progresses, they work to keep stable social rhythms (when to sleep, exercise, eat, etc.), anticipate events that could disrupt rhythms, and develop plans for continued mood and social rhythm stability.
COMPLEMENTARY AND ALTERNATIVE MEDICINE

Interest in complementary and alternative medicine, or CAM, is growing as consumers and health care professionals search for additional ways to treat anxiety, depression, and other related disorders.

Complementary medicine is used along with conventional medicine. An example is aromatherapy — inhaling the scents of essential oils to promote health and well-being — to help lessen discomfort following surgery. Alternative medicine is used in place of conventional medicine. An example is following a special diet to treat cancer instead of undergoing surgery, radiation, or chemotherapy recommended by a medical doctor. One hazard of alternative medicine is delaying use of known effective treatments because of unnecessary worries about them.

Some CAM therapies are currently used to treat anxiety and anxiety disorders. Yoga, which combines physical postures, breathing exercises, meditation, and a distinct philosophy, is one of the top ten CAM practices.

Before beginning CAM or any type of treatment, talk to your mental health provider or primary care doctor. Visit http://nccam.nih.gov/health/whatiscam/ to learn about the great variety of CAM treatments.

Your mental health professional may also recommend self-help materials and regular exercise, which can help reduce symptoms of anxiety and depressive disorders. Ask for guidance and recommendations.

New forms of treatment — medications and therapies — are being developed all the time. Visit www.adaa.org for updates, and ask with your doctor about what’s new.

Suicide

Research shows that both depression and anxiety are risk factors for suicide. More than 90 percent of people who commit suicide have a diagnosable illness. Early diagnosis and intervention with appropriate treatment are critical steps to feeling better.

▶ Contact the American Foundation for Suicide Prevention (www.afsp.org) for more information.

▶ Call 1-800-273-TALK (8255) to talk to a skilled, trained counselor at a crisis center in your area at any time (National Suicide Prevention Lifeline).

Getting Help

Doctors, therapists, counselors, clinical social workers, psychiatrists, and psychologists are among the many types of trained professionals who can diagnose and treat anxiety, depression, and other related disorders. You might also seek assistance from your primary care doctor or insurer.

FIND A THERAPIST

Most people with an anxiety or depressive disorder can be helped with professional care. The first step is finding a therapist. Here are a few places to start:

▶ Visit www.adaa.org to search the Find a Therapist directory.

▶ Ask your primary care physician for a referral.

▶ Contact your health insurance company for a referral to a specialist.

▶ Contact a local hospital or university and ask about mental health clinics or staff psychiatrists, psychologists, or social workers.
MORE HELP
- Look for a clinical trial at www.adaa.org/clinicaltrials.
- Search for a local support group at www.adaa.org/finding-help/getting-support.
- Visit the Depression and Bipolar Support Alliance at www.dbsalliance.org.

ASK QUESTIONS
It is appropriate and expected to ask questions during a brief telephone, email, or in-person consultation to see if this is the right treatment provider for you. Before he or she can respond to some of your questions, you may be asked to give your age, your diagnosis or the problems you are seeking help with, as well as any treatment history.

PRACTICAL ISSUES
- Where are you located?
- What are your hours?
- What are the costs?
- Do you accept my insurance? If not, what arrangements do you have for payment? Do you have low-fee or sliding-scale options?
- What times are available for initial and regular appointments?
- If I need medication, can you prescribe or refer me to someone who does?

CREDENTIALS
- What training and experience do you have in treating depression, anxiety, or both?
- Do you have a license or certification by the state? If so, in what profession?

WORKING TOGETHER
- Could you describe how you would work with a person like me?
- Do you give homework or reading to do between sessions?
- May I include family members in my treatment?
- How frequently and for how long would you anticipate seeing me?
- How long do you expect it to take before I begin feeling better?
- Will you coordinate my care with other treatment providers, and if so, how?
- How can I be in touch with you between sessions if I have questions?
- Do you recommend any mobile apps to help manage my symptoms?

MEDICATION
- Can I expect minor side effects?
- What should I know about any side effects that could be serious?
- May I drink alcohol while taking these medications?
- May I drive while taking these medications?
Will taking herbal remedies (such as kava or St. John's wort) have an effect on my medications?

What should I know about interactions with other medications?

SPECIALIZED KNOWLEDGE
If you have choices, it’s best to have a therapist who specializes in your disorder. Below are some common terms in the literature and training of specialists. If these terms do not appear to be familiar, the therapist may be a general mental health provider who might not be up to date in specific treatments for anxiety disorders or depression.

For OCD — Ask about ERP (exposure and response or ritual prevention)

For panic disorder and phobias — Ask about exposure-based treatments such as interoceptive (exposure to sensations of anxious arousal) or imaginal (facing fears in imagination) or VR (virtual reality).

For generalized anxiety disorder (GAD) — Ask if the therapist does something more than relaxation and if so, what that might be. Ask what specific cognitive therapy techniques will be used.

For depression — Ask if the therapist will do more to explore the origins of your symptoms. Ask about treating your symptoms directly, such as interrupting ruminations (repetitive worry and preoccupations). Find out if this therapist can prescribe medications or work with a prescribing physician if medications are needed.

For all disorders — Ask if the therapist treats types of anxiety and depression differently.

Think of your first few sessions with a new therapist as a mutual assessment. Do you and the therapist agree that he or she will provide the help you’re looking for? Do you and the therapist have the same goals? Do you agree on the tasks necessary to help you reach your goals? Do you feel a connection or bond with your therapist? Finally, be wary of promises of quick cures, requirements of large commitments of resources up front, and of one-size-fits-all methods. Keep in mind that treatment takes time and effort.

HELP YOURSELF
Regular exercise can reduce symptoms of depression and anxiety. The ten tips below can help you reduce stress.

1. Take a time-out. Practice yoga, listen to music, volunteer, or get a massage. Stepping back from the problem lets you clear your head.
2. Eat well-balanced meals. Do not skip any meals. Do keep healthful, energy-boosting snacks on hand.
3. Get enough sleep. When stressed, your body needs additional sleep and rest.
4. Do your best instead of trying to be perfect. Perfection isn’t always possible, so be proud of however close you get.
5. Accept that you cannot control everything. Put your stress in perspective: Is it really as bad as you think?
6. Take even belly deep breaths. Exhale slowly.
7. Count to 10 slowly. Repeat, and count to 20 if necessary.
8. Welcome humor. A good laugh goes a long way.
9. Maintain a positive attitude.
10. Learn what triggers your anxiety. Is it work, family, school, or something else you can identify? Write in a journal when you’re feeling stressed or anxious, and then look for a pattern.

Eat well-balanced meals. Count to 10 slowly. Welcome humor. Maintain a positive attitude.

Learn what triggers your anxiety. Take a time-out. Get enough sleep.
HELP A FAMILY MEMBER OR LOVED ONE
Support is an important part of the recovery process for anyone with an anxiety disorder and depression. Recovery may be stressful for family members and loved ones, so it’s helpful to build a support network of relatives, friends, and therapists. Here’s how you can help a loved one.

▶ Learn about the disorders.
▶ Recognize and praise small accomplishments.
▶ Modify expectations during stressful periods.
▶ Measure progress on the basis of individual improvement, not against some absolute standard.
▶ Be flexible and try to maintain a normal routine.
▶ Don’t panic or lose hope, even if your loved one does.

Visit www.adaa.org/finding-help/helping-others for more information.

HELP YOUR CHILD
Like adults, children can develop anxiety and depressive disorders. They may occur along with other mental or physical illnesses, such as eating disorders or ADHD. Your child may also complain of stomachaches, headaches, or other physical symptoms.

Anxiety and depressive disorders in children should be diagnosed early and treated. If your child has some combination of the symptoms listed below, seems out of step with peers, or exhibits changes or problems in any of these areas, consider an evaluation from a mental health professional:

▶ Eating habits or appetite
▶ Sleeping
▶ Schoolwork
▶ Activity level
▶ Mood
▶ Relationships with family or friends
▶ Aggressive behavior
▶ Behavior typical of a younger child
▶ Speech, language, and other development milestones

Find out more about helping your child at www.adaa.org/living-with-anxiety/children.

MEDICATION WARNING FOR CHILDREN
The U.S. Food and Drug Administration (FDA) issued a warning in October 2004 that antidepressant medications, including SSRIs, may increase suicidal thoughts and behavior in a small number of children and adolescents. The FDA does not prohibit the use of these medications, but it does alert patients and families to the risks, which must be balanced against clinical need.

In May 2007 the FDA proposed that makers of all antidepressant medications update their products’ labeling to include warnings about increased risks of suicidal thinking and behavior in young adults ages 18 to 24 during initial treatment (generally the first one to two months).

Find out more at the FDA website: www.fda.gov/cder/drug/antidepressants/default.htm

Not taking medications may pose more of a risk than not taking them. Discuss all concerns about antidepressants and other medications with your doctor.
ADAA Can Help You

Suffering from an anxiety disorder, depression, or both can interfere with many aspects of your life. And you may feel alone, embarrassed, or frightened. ADAA can give you the resources to help you and your loved ones better understand your condition, connect you with a community of people who know what you are experiencing, and assist you in finding mental health professionals who can help you.

Visit www.adaa.org and search the Find a Therapist directory to identify local therapists who treat anxiety, depression, and related disorders. Learn about the causes, symptoms, and best treatments for all of the disorders, and review questions to ask a therapist.

The ADAA website provides many resources to help you make the best decisions so that you can get on with your life.

Visit www.adaa.org:

- Sign up for Triumph, the ADAA monthly e-newsletter.
- Learn about anxiety, depression, and related illnesses, including treatments.
- Listen to informative podcasts and attend webinars for free.
- Find a therapist, clinical trial, or local support group.
- Read stories of people who have triumphed over anxiety and depression.

HELP ADAA HELP OTHERS.

You can make a difference by helping ADAA expand its efforts to reach those with anxiety disorders, depression, OCD, PTSD, and related disorders. Your contribution supports ADAA’s efforts to increase awareness and provide education that helps people find treatment. Your donation also supports research and allows ADAA to advocate for improved treatments and access to care.

Donate online at www.adaa.org.

on the phone (240-485-1001),

or by mail to ADAA,
8701 Georgia Avenue, Suite 412
Silver Spring, MD 20910.

All donations are tax-deductible.
About ADAA

The Anxiety and Depression Association of America (ADAA) is a national 501(c)(3) nonprofit organization whose mission is to promote the prevention, treatment, and cure of anxiety disorders and to improve the lives of all people who suffer from them.


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