A recent mental health survey of U.S. veterinarians (2014, Center for Disease Control and Prevention) revealed that 1 in 10 veterinarians have experienced depression and 1 in 6 veterinarians have considered suicide since graduation.

Why such Distress in the Veterinary profession?
We can only speculate on some of the factors until a more detailed breakdown of the survey is provided for JAVMA. Most of the veterinary students I have seen in therapy knew they wanted to be a veterinarian at a young age. In order to succeed they had to be extremely focused and driven for most of their lives. As with anything we work so hard to achieve, the pride and joy in our accomplishments can sometimes give way to disillusionment. Long hours, student loan debt, feeling isolated at work, high stress situations, compassion fatigue, and exposure to death and loss, are among many difficult issues facing veterinarians.

The very qualities which gain you entrance to Veterinary school - perseverance, perfectionism, conscientiousness, (and maybe a little bit of neurotic tendencies) are also risk factors for depression and suicide. Other potential suicide risk factors in veterinary medicine include access to lethal drugs and a desensitization to euthanasia.

What are Symptoms of Depression?
Depression is different than just feeling a little down or experiencing transient sadness. Depression feels more like deep despair and lasts two to three weeks or longer. The most common symptoms of this mood disorder are:

- Lack of interest or pleasure in most, if not all activities. Life feels joyless.
- Persistent sad, anxious, or “empty” feelings
- Loss of appetite or overeating
- Sleep disturbances (insomnia or oversleeping)
- Fatigue with difficulty motivating to do a normal routine
- Psychomotor agitation (purposeless or restless activity, constantly needing to be on the move)
- Irritability
- Feeling worthless or feeling excessive and inappropriate guilt
- Difficulty concentrating, focusing, and making decisions
- Physical symptoms: Persistent aches/pains (limbs, joints, head, back), Gastrointestinal problems
- Recurrent thoughts of death, suicidal ideation, a specific plan for committing suicide, or a suicide attempt

What Causes Depression?
The causes of depression are not always clear but many factors may be involved:

- Biology: Some people have a biological vulnerability to depression; a family history of depression may increase the risk
- A significant life event: Loss of a loved one, break-up with a significant other, a life transition, diagnosis of a major illness
- Psychological trauma (being a victim of sexual or physical abuse)
- Substance abuse: This can be a “chicken or the egg” dilemma - are substances causing the depression or is the person self-medicating (“numbing”) the depression with substances?
- Setting unrealistic/irrational goals for oneself - “I must be perfect”, “I can never make mistakes”
- Sometimes there is no apparent reason for the onset of depression and no clear trigger

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The diagnosis of depression is based on the intensity and duration of the symptoms. A primary care provider or psychologist will evaluate for depression and assess problems with functioning caused by the symptoms.

The prognosis for depression is very promising for people who receive treatment. Anti-depressant medication and talk therapy are both extremely effective in treating depression. Psychologists are highly trained and have years of experience studying depression and helping people recover from it. Unfortunately, some people feel reluctant to seek help because there is a stigma associated with mental health issues. They view depression (and other mental health problems) as a “weakness” or a “character flaw” and feel they should just be strong and get past it. Some people are raised in families where it is frowned upon to talk about feelings and clearly never okay to discuss personal matters with people outside the family. However, not having an outlet and a safe place to express these overwhelming and all-consuming feelings, can lead the person with depression to feel very alone. If left undiagnosed and untreated, depression can worsen, last for years, cause great suffering, and possibly lead to suicide.

**What are Suicide Warning Signs?**
When depression is not treated, the feelings of hopelessness and worthlessness can be so overwhelming, that thinking becomes distorted and taking one’s own life seems like the only way to stop the pain. Warning signs include:

- A constellation of symptoms of depression (listed on previous page)
- Feeling no reason for living, no purpose in life (“No one will miss me”)
- Being in unbearable pain, feeling no way out, feeling trapped, thinking you are a burden to others
- Feeling rage, anger, seeking revenge (“I’ll show them…”)
- Isolating
- Getting affairs in order, giving away possessions
- Reckless behavior, taking risks with one’s safety, not caring or thinking about potential harm
- Preoccupation with death, thinking about ways to kill oneself

**What are the best ways to seek help?**
If you think you may be experiencing depression, there are many ways to get started with assessing and treating your depressed mood. Here are a few options:

- Make an appointment to see your primary care physician to discuss your symptoms of depression. He/She may suggest beginning anti-depressant medication or referring you to a licensed psychologist for further evaluation and treatment. Most PCPs keep a list of mental health practitioners whom they regularly refer to.
- Seek out your own referral to a licensed psychologist by going on to the Massachusetts Veterinary Medicine Association website (www.massvet.org/?page=Psychologists) to find psychologists who MVMA has identified as having expertise in working with veterinary students and veterinarians.

Learning methods of self-care is CRUCIAL for those of us who provide care for others. Consistent self-care helps prevent job burn-out, compassion fatigue, and depression. In future MVMA newsletters, I will share various methods of self-care that you can begin to incorporate in your life.

**About Dr. Lisa Y. Livshin**
Lisa Y. Livshin, Ed.D. is a licensed psychologist in private practice in Massachusetts where she specializes in the evaluation and treatment of trauma. Her sub-specialty is working with veterinary and medical students. She is the Boston Team Liaison for the Massachusetts Disaster Response Network. Dr. Livshin also serves as a crisis consultant and in that capacity, has worked most recently with survivors of the Boston Marathon Bombings.

She is an Adjunct Professor in the Division of Counseling and Psychology at the Lesley University Graduate School of Arts and Sciences where she teaches Disaster Mental Health. Since 1987, she has been a Clinical Instructor in Psychiatry at Tufts University School of Medicine.