

Managing Depressive Symptoms in Substance Abuse Clients During Early Recovery

A Glossary of Some Useful Terms

Any examination of depressive symptoms or depression diagnosis brings with it a special lexicon. This glossary of some of the most common terms associated with depression was compiled with an eye to providing assistance for those who are confronted with and have to address depressive symptoms in early recovery

Alcoholism: An addiction to alcohol so strong that it is considered a mental illness; alcoholism is oftentimes accompanied by [depression](#), an anxiety disorder, or another mental illness.

Anhedonia: A condition of being unable to experience pleasure from what would normally be a pleasurable. This is a hallmark feature of major depression.

Antidepressants: The primary medications used to treat depressive disorders. They have been shown to improve mood, sleep, appetite, and concentration in many people with depression. Types of antidepressants include atypical antidepressants, tricyclic antidepressants, selective serotonin reuptake inhibitors (SSRIs), and serotonin and norepinephrine reuptake inhibitors (SNRIs).

Atypical antidepressants: Medications that do not fit into the other major categories of antidepressants; examples are bupropion (Wellbutrin) and mirtazapine (Remeron).

Bipolar disorder: A condition in which a person cycles between longer periods of depressed mood and usually shorter periods of mania or heightened activity and irritability; sometimes referred to as manic-depressive illness, and formerly called [manic depression](#).

Clinical depression: A term often used by doctors to refer to an episode of major depressive disorder.

Cognitive-behavioral therapy (CBT) A form of psychotherapy which can be helpful in treating depressive disorders. It is a blend of two therapies: cognitive therapy (CT) and behavioral therapy. CT focuses on a person's thoughts and beliefs, and how they influence a person's mood and actions, and aims to change a person's thinking to be more adaptive and healthy. Behavioral therapy focuses on a person's actions and aims to change unhealthy behavior patterns

Double depression: Episodes of major depressive disorders that are accompanied by a chronic, low mood (dysthymia) and that last for at least two years with little fluctuation.

Dysthymia A condition which is typified by long-lasting symptoms, usually two years or longer, but less severe symptoms than with major depressive disorders; also called dysthymic disorder. While not typically disabling, dysthymia can prevent a person from feeling well or functioning normally (poor appetite or overeating, insomnia or excessive sleep, low energy or fatigue). Because of the chronic nature of dysthymia, patients may be prone to making statements such as, "I've always been this way," or "That's just how I am."

Eating disorders: Behavioral problems that are often associated with depression. These include binge eating, anorexia nervosa, and bulimia.

Inpatient treatment: Treatment that requires at least one overnight stay in a hospital or mental health facility.

intensive outpatient program (IOP): This is a kind of treatment service and support program used primarily to treat [eating disorders](#), [depression](#), [self harm](#) and [chemical dependency](#) that does not rely on [detoxification](#). IOP operates on a small scale and does not require the intensive [residential](#) or [partial day services](#) typically offered by the larger, more comprehensive treatment facilities.

The typical IOP program offers group and individual services of 10–15 hours a week. IOP allows the individual to be able to participate in their daily affairs, such as work, and then participate in treatment at an appropriate facility in the morning or at the end of the day.

The typical IOP program encourages active participation in [12-step programs](#) in addition to the IOP participation. IOP can be more effective than individual therapy for chemical dependency.

Light therapy: A common treatment for [seasonal affective disorder](#) (SAD). It involves exposure to bright manmade light for a certain period of time each day, usually supervised by a doctor.

Major depressive disorder: A depressive episode that lasts more than two weeks and is characterized by feelings of sadness and loss of interest in normal daily activities, along with at least four of these additional symptoms: disruption in sleep, appetite, or concentration; fatigue; feelings of helplessness, hopelessness, or guilt; psychomotor slowness or agitation; and thoughts of death or self-harm. A person might have only one episode or many episodes of major depressive disorder throughout his lifetime.

Mania: A condition characterized by excessive elation, a decreased need for sleep, grandiose thoughts, increased talking, increased sexual desire, poor judgments, increased energy, inappropriate social behavior, and irritability.

Minor depression: An episode of depression that lasts for less than two weeks or during which the person has too few depression symptoms to meet the definition of major depressive disorder.

Neurotransmitter: A chemical that regulates mood in the brain. Serotonin, norepinephrine, and dopamine are examples of neurotransmitters.

Outpatient treatment: Treatment that does not require an overnight stay in a hospital or medical center.

Perinatal depression: A newer term for what has been called postpartum depression; the change was made to reflect the fact that many cases of postpartum depression actually have their onset during pregnancy.

Postpartum depression: A type of depression related to childbirth that develops in about 10 to 15 percent of new mothers; also called the “baby blues.”

Psychomotor slowness: A symptom of depression that refers to the slowing down of both motor skills and psychological activity.

Psychosocial A term used to describe the influence of social factors on mental health and behavior.

Psychotherapy: Also known as talk therapy, a treatment often used in conjunction with antidepressants to treat people with depression. This therapy helps people gain a greater understanding of their illness and come up with strategies, tools, and skills for coping and functioning better in everyday life. The exact psychotherapy approach can vary based on the person’s individual needs.

Psychotic depression: A case of major depressive disorder or another severe depression that is accompanied by hallucinations, delusions, or another form of psychosis.

Seasonal affective disorder (SAD): A depressive disorder in which symptoms typically start during the winter months when there is less natural sunlight. Light therapy may be used to treat SAD symptoms, sometimes in combination with antidepressant medications and psychotherapy.

Serotonin: A neurotransmitter that affects mood.

SNRIs (serotonin and norepinephrine reuptake inhibitors): Antidepressant medications that alter the action of both serotonin and norepinephrine in the brain. Examples of SNRIs are venlafaxine (Effexor), desvenlafaxine (Pristiq), and duloxetine (Cymbalta).

SSRIs (selective serotonin reuptake inhibitors): Antidepressant treatments that help regulate levels of serotonin, a chemical mood regulator, in the brain. Common SSRIs include fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), escitalopram (Lexapro), and Citalopram (Celexa).

Tricyclic antidepressants: A form of antidepressant that can help restore appetite and sleep. Common tricyclic antidepressants include amitriptyline (Elavil), desipramine (Norpramin), imipramine (Tofranil), and nortriptyline (Pamelor).