

# UNDERSTANDING DEPRESSION IN KIDNEY DISEASE



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## TABLE OF CONTENTS

WHAT IS DEPRESSION?.....	3
DEPRESSION AND CHRONIC KIDNEY DISEASE .....	4
THE SYMPTOMS OF DEPRESSION.....	4
WHAT CAUSES DEPRESSION? .....	5
AM I DEPRESSED? .....	6
SCREENING FOR DEPRESSION .....	7
TREATMENT FOR DEPRESSION .....	8
ANTIDEPRESSANTS .....	8
PSYCHOTHERAPY OR COUNSELING.....	9
WHO TREATS DEPRESSION.....	10
OTHER RESOURCES.....	10

# UNDERSTANDING DEPRESSION IN KIDNEY DISEASE

Living with chronic kidney disease (CKD) is a challenging task which impacts nearly every aspect of your life. Despite these lifestyle changes, one aspect of your life you shouldn't sacrifice is your emotional well-being. Learning to recognize and understand the impact depression has on you, as well as others you care about, will help you live a full and productive life while coping with CKD.



*“When I looked around my clinic and saw other patients laughing with the staff or talking about their jobs and hobbies with other patients, I couldn't figure out why I had no interest in any of those things or anything else in my life for that matter.”*

John H., Dallas, TX

Most people on hemodialysis (HD) or peritoneal dialysis (PD) can consider getting a kidney transplant. Some in CKD Stage 4 or 5 may be able to get a transplant before having to go on any type of dialysis. That is known as a pre-emptive kidney transplant.

## WHAT IS DEPRESSION?

Depression is a complex and potentially serious medical issue impacting more than 20 million U.S. adults every year. Depression can affect anyone regardless of age, gender, race or socioeconomic background. Depression causes individuals to lose interest in life, withdraw from those they care about, stop participating in activities they once found enjoyable, and increase the risk of adverse health behavior, such as heavy smoking, excessive drinking, or making harmful decisions they would not normally make. In its severest form, untreated depression can lead to self-harm or suicide.

*“I thought I was the only one feeling so sad and down. It was helpful to me to learn that I wasn’t the only one suffering from depression.”*

Robert P., Chicago, IL

## DEPRESSION AND CHRONIC KIDNEY DISEASE

Depression can affect kidney patients regardless of what stage they are in. According to the National Institutes of Health (NIH), studies have shown that depression affects more than 20 percent of individuals with early stage chronic kidney disease (CKD). Unfortunately, dialysis patients are at a greater risk of suffering from depression than those who do not have kidney disease. Depression rates in the general population are more than 8 percent of all U.S. adults annually. If you are on dialysis, those rates soar between 20-30 percent.

Untreated, depression can be associated with other dialysis health issues such as:

- An increase in death rates
- An increase in hospital stays

- An increase in patients shortening/skipping dialysis treatments as prescribed
- A decrease in patients taking their medications

## THE SYMPTOMS OF DEPRESSION

Depression can present itself in many ways. What is important to understand is depression is not the normal feelings of sadness or grief we all experience from time to time. These feelings are generally associated with a distinct event, such as the death of a family member, friend or another unpleasant experience. These normal feelings of sadness and grief tend to pass after a relatively short time and you return to your normal level of functioning.

Depression on the other hand is characterized by a set of emotional and physical symptoms that tend to last for longer periods of time and despite your best efforts your mood doesn’t improve and it begins to impact your daily routine or activities. To be diagnosed with depression, a person must have symptoms most of the day, nearly every day, for at least two weeks. Listed are some signs/symptoms that physicians

and other mental health experts use to diagnose the condition.

- Feeling down or depressed most of the day, nearly every day
- Loss of interest or pleasure in most activities
- Significant weight loss or weight gain
- Sleep problems (sleeping too much, waking at night and being unable to return to sleep, or not sleeping enough)
- Fatigue or loss of energy
- Feeling slowed down or like you are moving in “slow-motion”
- Feelings of being worthless, useless or feeling guilty for no apparent reason
- Difficulty concentrating or making decisions
- Recurrent thoughts of death or suicide

*“Sure I had slowed down as I got older, but I still enjoyed going for walks, playing cards, meeting up with friends for coffee or watching my grandchildren play. But over time, I lost all interest in everything and I felt lonely and miserable most of the time.”*

Margaret C., Los Angeles, CA



## WHAT CAUSES DEPRESSION?

Currently, there is no definite answer to this question. However, with advances in research, the medical community is gaining a stronger understanding of depression and what causes it. What is known and can be said without hesitation is being depressed is not a sign of weakness or a statement about your character. Depression can happen to anyone and you may or may not have one of the reasons listed below that contributed to your depression.

- Family history of depression
- Suffering a traumatic event
- Chronic stress
- Certain prescription medications

- Chemical imbalances in the brain
- Alcohol/Drug abuse
- Managing a chronic illness (may impact both the patient and/or care partner of the patient)



*“The more I talked to my relatives about my depression, the more I learned that other family members lived with depression too. As I think about it, I am pretty sure my own father had some battles with depression.”*

Susanne R., Seattle, WA

## AM I DEPRESSED?

Depression has the ability to distort your thinking and make you feel bad about yourself. If you feel embarrassed, ashamed or think you should be able to solve your own problems, you are not alone. Thinking you might be depressed can be overwhelming, but remember being depressed doesn't mean you are weak or can't take care of yourself. In fact, the longer you ignore your depression, the worse it can get. Below are some statements frequently made by people who suffer from depression. If any of these statements sound like you, be sure to tell someone you trust how you are feeling.

- “I am such a burden to everyone.”
- “People would be better off without me around.”
- “I just can't seem to get going, everything is a chore.”
- “What's the point of trying anymore?”
- “Nothing seems fun to me, it's like everything is work.”
- “I just feel ‘empty’ most of the time.”



*“It was embarrassing to think I was suffering from depression, but no matter how hard I tried, I couldn’t make myself feel better.”*

Phil A., New York, NY



## SCREENING FOR DEPRESSION

Unlike other medical conditions, depression cannot be diagnosed by a blood test or an x-ray. Rather, the diagnosis of depression relies on you to report your symptoms and feelings to your doctor, social worker, nurse or other healthcare professional. There are many different screening tools which can be used to help determine the level of your depression. The screening tools used are generally questionnaires that ask you a

range of questions about your feelings and emotions. Commonly used depression screening tools are:

- The Beck Depression Inventory (BDI)
- The Zung Self-Rated Scale for Depression
- The Patient Health Questionnaire (PHQ-9)

If you are concerned you are suffering from depression, several self-screening tools exist on the internet. These tools do not replace the advice of your physician or other mental health professional. They can give you some idea of your mood and whether or not you might be suffering from depression and can be used as a conversation starter with your doctor about how you are feeling.

*“It felt sort of odd answering questions about my mood, interest in activities, eating and sleeping habits, and whether or not I was thinking about suicide. But after I finished the questionnaire and it showed that I was experiencing a serious bout of depression, it all started to make some sense to me.”*

Paula T., Miami, FL

## TREATMENT FOR DEPRESSION

Many people believe living with depression is just part of life. However, keep in mind depression is not the normal feelings of sadness we all have at one time or another. If you think you are depressed, it is important for you to consider talking with someone about your feelings. Then you can be evaluated and receive help to make you feel better.

Two of the common approaches for treating depression are the use of antidepressants and psychotherapy or counseling. Each approach has benefits, but it is clear using an antidepressant and counseling together is most likely to provide you with the greatest relief from your depression.

## ANTIDEPRESSANTS

Contrary to common myth, antidepressants are not magic pills which alter your personality, nor are they addictive, “uppers” or stimulants. Rather antidepressants work by alleviating the debilitating feelings of depression, such as feelings of constant sadness and emptiness, recurrent thoughts of death and never ending loneliness.

According to 2021 data from the National Institute of Mental Health (NIMH), 47 percent of adults with mental illness in the U.S. received treatment such as inpatient/outpatient treatment, counseling, or prescription medication. The good news is, of the 47 percent who are being treated, more than 80 percent of them report an improvement in their depression.

Although you are dealing with reduced kidney function, many antidepressants exist which are safe for you to use. Your physician will be able to help you find the most effective medication for you. If you are prescribed an antidepressant, some important things to remember are:

- The medication must be taken as prescribed to be effective.
- Generally, you need to take the medication for 6-8 weeks to determine if it is working.
- Not all antidepressants work the same for everyone. If after trying one for the recommended time you don't receive relief, a second (and sometimes a third) medication might need to be tried.
- The length of time you need to take the medication varies from individual to individual. Discontinuing too soon can lead to relapse of your depression.



You will need to speak with your doctor about what to expect.

- Side effects of antidepressants can be minimized by adjusting doses or trying a different medication.
- It's critical to keep your physician informed on whether or not the medication prescribed is helping to improve your depression.

*“The last thing I wanted to do was add another pill to all the ones I already take. Then I tried one and it didn’t do anything for me which was frustrating. But I stuck with it and tried a second type and as good as I feel now, I am glad I hung in there.”*

Ron C., Philadelphia, PA

## PSYCHOTHERAPY OR COUNSELING

When thinking about psychotherapy many people still think about the couch in the psychiatrist’s office with a passive therapist simply nodding in agreement with what the patient is saying. The reality is, psychotherapy has changed dramatically. Psychotherapy is

an interactive process between therapist and client, is goal driven and can be short-term or long-term, depending on the individual’s needs.

Today, psychotherapy is focused on working with you as a depressed individual to improve your thinking and coping skills. When you are suffering from depression, it is common to develop negative thoughts. These thoughts make it difficult for you to be happy. For example, when suffering from depression, it is common to think you will never feel better and you begin to lose the ability to be optimistic about change for the good. When you are in psychotherapy, you will work with your therapist to identify this negative thinking and replace it with more positive and productive thoughts.

*“It was embarrassing at first, but once it became clear to me the therapist understood what I was dealing with, I actually started to look forward to the sessions.”*

Irene V., Oklahoma City, OK

## WHO TREATS DEPRESSION

Several professionals are available to help you cope with your depression. For dialysis patients, many of them are often available through the dialysis center. Below is a description of some of the professionals who can help you cope with depression.

### 1. Dialysis Unit Social Worker

Every dialysis center in the United States is required by federal regulation to have the services of a master's trained social worker available to you. These individuals have training in identifying and counseling persons who are depressed. This is an excellent resource for you to look for to receive help.

### 2. Psychologist

Many psychotherapists are individuals who have training in psychology with either a master's degree or doctorate. You will most likely find these professionals in private or public mental health clinics. Generally this group is not able to prescribe medications to deal with your depression. They often work with others who can prescribe medications.

### 3. Psychiatrist

A psychiatrist is a medical doctor who has received special training in mental health disorders. Psychiatrists can prescribe medication to treat issues such as depression. Many psychiatrists no longer engage in psychotherapy, but frequently work in conjunction with social workers, psychologists or other counseling professionals.

## OTHER RESOURCES

To learn more about depression, you can visit the AAKP Web site at [www.aakp.org](http://www.aakp.org) or any of the following resources:

1. The National Institute of Mental Health – [www.nimh.nih.gov](http://www.nimh.nih.gov)
2. The Depression and Bipolar Support Alliance – [www.dbsalliance.org](http://www.dbsalliance.org)
3. National Alliance on Mental Illness – [www.nami.org](http://www.nami.org)
4. AAKP's Living, Coping, and Thriving with Kidney Disease brochure  
<https://bit.ly/AAKPbrochures>

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Discount on National Meeting registration	Discount on National Meeting registration with CEUs	Discount on National Meeting registration	AAKP HealthLine webinars	AAKP HealthLine webinars
Center for Patient Engagement & Advocacy Alerts	Center for Patient Engagement & Advocacy Alerts	Center for Patient Engagement & Advocacy Alerts	Discount on National Meeting registration for up to (5) employees with CEUs	Discount on National Meeting registration for up to (2) individuals with CEUs for healthcare professionals
Access to market research and clinical trials	Access to market research and clinical trials	Access to market research and clinical trials	Center for Patient Engagement & Advocacy Alerts	Center for Patient Engagement & Advocacy Alerts
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American Association of Kidney Patients  
14440 Bruce B. Downs Blvd., Tampa, FL 33613  
(800) 749-AAKP (813) 636-8100  
info@aakp.org www.aakp.org



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