

OVERCOMING DEPRESSION FACT SHEET

Introduction

For most women, facing premature ovarian insufficiency (POI) can be a challenging and lonely experience. POI be accompanied by feelings of loss of identity and a crisis of femininity, it may also bring with it a host of unpleasant symptoms and overwhelming emotions. A diagnosis of POI and the possibility of not being able to conceive naturally may provoke feelings of worthlessness and helplessness. This can ultimately lead to depression.

Leading psychiatrist Dorothy Rowe, who has been writing about and treating depression for many years, writes in *'The Depression Handbook'*, that 'uncertainty and negative expectations' are common responses in POI. She adds that, when it happens unexpectedly early, it can be particularly distressing and provoke concerns about physical health as well as possible social and emotional consequences. She has a number of ideas for how you might deal with these negative feelings and suggests that keeping a diary can be enormously helpful as just the simple act of writing things down can make you feel more in control of your emotions. She emphasises how vital it is to rest regularly and not let your life be ruled by tiredness and to pay attention to your physical health. Above all, she advises sufferers from depression to learn to value themselves and to give themselves permission to feel good about themselves.

The Benefits of Exercise and Good Nutrition

Exercise can help to alleviate feelings of depression. In *The Premature Menopause Book*, Kathryn Petras says: 'Exercise is nature's own mood-lifter, and it works! Exercise raises the level of endorphins in your brain, which are natural mood elevators. In addition exercising is a way of reclaiming power over your body, which can also lift your spirits.' So, whether you choose an exercise class, walking, swimming, or even running, it's worth giving regular exercise a try.

And what you eat can make a difference. Scientists have now found that foods can trigger all kinds of important changes in our brain chemistry. In *Natural Solutions to Menopause*, Marilyn Glenville states: 'What we eat and drink can determine whether we feel happy or depressed. These powerful brain chemicals can also affect our appetite and our ability to control it. Many of us eat more when we are feeling sad, lonely and depressed....Becoming aware of what controls your appetite and eating patterns is crucial when it comes to losing weight and establishing a healthy diet.' In her book Dr Glenville gives advice on how to alleviate anxiety and irritability, depression and fatigue by improving your diet, taking supplements and using herbal remedies.

Seeking Help

Depression is, however, an illness and in many cases positive thinking and a realigned mental attitude may not be enough, or may not be possible. If you regularly feel that everything is getting too much for you and coping is becoming difficult, the time has probably come to take action and seek help.

You may wish to find someone you can talk to who will listen and support you. You may need more help than a friend or partner can give and you may wish to find a counsellor. Your GP's surgery may recommend one or the associations listed in the useful addresses at the end of the fact sheet will point you in the right direction. You may have no idea what seeing a counsellor entails. A counsellor is someone who (if they are doing their job properly) will listen and not criticise or comment on your behaviour but simply give you the time and the space to talk within a 'safe' environment. It's generally sensible to find out what kind of therapy a particular counsellor practises before you sign up with them and to meet with or talk

to them on the phone beforehand to discover whether they have those personal qualities which inspire your trust.

You may wish to try complementary therapies. St John's Wort has been shown in a number of clinical trials to significantly improve moderate to mild depression. However, you should contact your GP before taking it as it can interact with other drugs such as HRT.

Or you may wish to book an appointment with your GP to discuss medical treatment. With so many anti-depressants now on the market, you should be able to find one that suits you. Make sure you find out about any potential side-effects before you start taking them, though, and report any unusual or severe symptoms to your doctor. Your GP will hopefully also recommend that you arrange at least a few sessions with a counsellor.

A fact sheet cannot cure depression but it can provide some reassurance that you are not the only one who feels like they are 'losing the plot', or has 'menopausal madness'. Perhaps you will identify with some of our members' experiences. Even if you don't, we hope that you take comfort in the fact that over time they dealt with their depression and that if they did it so can you!

MEMBERS' STORIES

'My Menopause Madness: Sue's Story

I was diagnosed with premature menopause just over a year ago, aged 29. Three years ago I began having hot flushes but put it down to stress at work. Then I met my partner and went on the Pill. When I came off the Pill, I plunged into what my partner now calls 'menopause madness'.

I had all the physical symptoms - hot flushes, sleeplessness and lack of sex drive. But the emotional problems were devastating for me. I began to suffer from depression. I stopped going out and answering the phone. I was irritable all the time and everything seemed pointless. I also started having panic attacks. I knew something was wrong but didn't understand what. With all the symptoms, I began to think about menopause.

I went to my GP and told him of my fears. He asked me if I had hot flushes at night. When I said I didn't, he assured me that it wasn't the menopause, especially at my age. I went to another GP at the same practice about six months later with another problem and ended up telling him my suspicions. He sent me for a blood test to 'put my mind at rest.'

Even the consultant was surprised at the results. He said that he had only seen this once before in his nineteen-year career. I couldn't believe it had taken so long to be diagnosed. Of course, I was sent away with no information at all about the condition. I have got access to the Internet at home and luckily found The Daisy Network site.

I was given HRT by my consultant and the depression lifted almost immediately. I felt like my old self again. I know HRT does not suit everyone but I felt so much happier. I have tried four different types of HRT because I have had side-effects, such as headaches and sickness, but I can cope with all that as long as I am feeling OK within myself. When I look back, I can't believe how awful it was. My partner told me that he nearly left me; luckily I was diagnosed before he did. I was just pleased to finally find out what was wrong with me, even though the diagnosis was so upsetting.

I have found infertility difficult to deal with, especially as a lot of my friends are having babies, but I have had counselling to help me cope with it. We are on the waiting list for egg donation but I try not to think about it. I would be devastated if it didn't work.

I tell everyone about what happened to me to raise awareness about premature menopause and its effects. I try to be positive about the future.

Mary's Story

My story began when I was nearly 35 years old. My daughter, Eve, was three years old. For some months I'd been thinking I was ready for another child. I suppose, looking back, my husband Paul and I just assumed another child would come along at some point; the possibility that I was infertile was the furthest thing from my mind.

There was, however, something bothering me and that was an increasingly erratic pattern of periods (and mood swings!). I often keep a diary and, during this time, I noted these changes in mood. On a number of occasions, when a period didn't appear, I imagined there was a strong likelihood I was pregnant but each time I found I wasn't and, sure enough, the expected period would then appear, sometimes the following month or even the month or two after that!

I decided I needed to visit my doctor. I wasn't sure what might be wrong but I felt, perhaps instinctively, something was wrong. My doctor felt it was purely a matter of stress or just a 'blip'. As you might imagine, I left the surgery feeling very dissatisfied and still quite uncertain and confused. In the May of 1999, I'd gone several months without a period and then had a very light showing - it really wasn't like a normal period. This sort of 'spotting' had occurred before but this time it coincided with increased feelings of anxiety - an odd, unsettled feeling. As a point of interest, it was the very last period I ever had.

I tried to cope with the anxiety and even tried to ignore it. On and off for a month this seemed vaguely possible but deep down I was panicky and afraid. I started to fear being alone, especially if out somewhere. I actually avoided going out alone if I could help it. I was also very afraid because I felt I was losing my grip. My husband and I ran our own business and over the summer (our busiest time), I was finding it increasingly hard to function. Somehow I managed the basics.

In June, I visited my doctor again and he prescribed beta-blockers for my anxiety. It was about 18 months since my original visit. Unfortunately the beta-blockers made no difference to how I felt. In fact, I can honestly say I felt myself slide further and further, week by week, into a dark gulf of fear, panic and, perhaps worst of all, despair. By August, I'd really reached my lowest point. Sleep was very unsettled and I really wasn't coping or even caring about my appearance. I did the basics but even that took some effort. Facing each day was possibly the hardest thing. Part of me felt like letting go of my grip and just allowing myself to slide completely into what felt like a black hole. It seemed as if I was being pulled physically downwards. I'd made attempts to be positive during the summer and to fight it, but the depression felt so much stronger. One way I could describe it would be like having a black, heavy blanket or shroud over and around me. I'd lost a lot of weight and weighed seven stone and it was obvious to those around me that I was in a bad way. My thoughts were increasingly confused and disturbed.

People use the word 'depression' so freely, often to describe simply being down in the dumps for a while. I will never use it in that way. Real depression is extremely debilitating and serious. I mentioned earlier that it was in August that I reached virtually total despair. I kept thinking and planning how to end it all; at times I could see no way out. This distressed me because I didn't really want that option. I just felt I couldn't go on as I was. I was helped greatly during this time by faithful friends and family who stood by me (sadly, not everyone does stay by you!). Those of my friends and family who were Christians prayed faithfully and kept encouraging me. My own faith, perhaps surprisingly, did not die but became, over time (and I do stress 'over time'), stronger and deeper.

A breakthrough came when I deliberately visited a female doctor. I explained the last two or so years to her and she immediately said I must have a blood test. The result went to my own doctor and it astounded him. I had had a premature menopause. He admitted that he knew only one other 'young' person experiencing this. I felt some anger that my diagnosis had taken so long but ultimately I felt relief that something physical was very possibly to blame

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and I wasn't slowly going round the bend! My doctor did feel it explained an awful lot. Two further blood tests were taken for confirmation and I visited the consultant at Norwich Hospital.

The next stage for me was HRT, and also anti-depressants. A few months down the line, I could see definite improvements. I stayed on the anti-depressants for around two years. That may seem a huge amount of time, but I'd received helpful advice from an acquaintance who'd suffered from post-natal depression and found stopping too soon threw her back into her depression. I can only say this seemed to work for me, although I can't be sure how beneficial just taking the HRT would have been or just the anti-depressants. I can only conclude that both made the difference and I do believe that, had I taken the HRT sooner than I did, I would not have suffered the difficulties I did or, at the very least, I would have coped much better.

Having got through the awful experience of depression, I am eternally grateful that I survived it and I have much sympathy for others who suffer in this way for whatever reason. I am convinced, in the case of the menopause and possibly more so with the premature menopause, that there are strong connections between the brain and hormonal functions.

I hope my story is of some help or encouragement to others. Knowing you're not alone and you can get through it, can make the light at the end of the tunnel seem a lot closer. And, believe me, there is always light at the end of the tunnel, no matter how long or dark the tunnel is.

Useful Addresses

BACP (British Association for Counselling and Psychotherapy)
BACP House, 15, St John's Business Park, Lutterworth, Leicestershire LE17 4HB
Tel: 01455 883300 Fax: 01455 550243
[E-mail: bacp@bacp.co.uk](mailto:bacp@bacp.co.uk)
www.bacp.co.uk

MIND (National Association for Mental Health)
Mind Infoline, P O Box 277, Manchester M60 3NX
Information Line: 0300 123 3393
[E-mail: info@mind.org.uk](mailto:info@mind.org.uk)
www.mind.org.uk
(There are also offices in London and Cardiff, please see the website)

BICA (British Infertility Counselling Association)
Contact by e-mail only
[E-mail: info@bica.net](mailto:info@bica.net)
www.bica.net

Useful Reading

The Depression Handbook, Dorothy Rowe

'The Premature Menopause Book', Kathryn Petras

The author, Kathryn Petras, experienced POI herself. The book covers the symptoms and signs, finding a doctor, fertility issues, diet, exercise and HRT. Although the book only covers American brands of HRT, it is nevertheless a comprehensive guide to both the emotional and physical aspects of POI.

Chapter 4 - Why Me? Dealing with the Emotional Realities of Premature Menopause.

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'Natural Solutions to Menopause', Marilyn Glenville

'Understanding Depression', Kwame McKenzie

For a concise and up-to-date overview of depression in all its manifestations, this book is a valuable source of information. It is written clearly and is easy to understand.

Chapter 8 – Natural Alternatives to HRT

Chapter 11 - How to Control your Weight and your Moods

Chapter 12 - The Benefits of Exercise and Sex at the Menopause