



Depression in children and teens

What is depression in children and teens?

Depression is a serious mood disorder that can take the joy from a child's life. It is normal for a child to be moody or sad from time to time. You can expect these feelings after the death of a pet or a move to a new city. But if these feelings last for weeks or months, they may be a sign of depression.

Experts used to think that only adults could get depression. Now we know that even a young child can have depression that needs treatment to improve. As many as two out of 100 young children and eight out of 100 teens have serious depression.

Still, many children don't get the treatment they need. This is partly because it can be hard to tell the difference between depression and normal moodiness. Also, depression may not look the same in a child as in an adult.

If you are worried about your child, learn more about the symptoms in children. Talk to your child to see how he or she is feeling. If you think your child is depressed, talk to your doctor or a counselor. The sooner a child gets treatment, the sooner he or she will start to feel better.

What are the symptoms?

A child may be depressed if he or she:

- Is irritable, sad, withdrawn, or bored most of the time.
- Doesn't take pleasure in things he/she used to enjoy.

A child who is depressed may also:

- Lose or gain weight.
- Sleep too much or too little.
- Feel hopeless, worthless, or guilty.
- Have trouble concentrating, thinking, or making decisions.
- Think about death or suicide a lot.

The symptoms of depression are often overlooked at first. It can be hard to see that symptoms are all part of the same problem.

Also, the symptoms may be different depending on how old the child is.

- Both very young children and grade-school children may lack energy and become withdrawn. They may show little emotion, seem to feel hopeless, and have trouble sleeping. Often they will lose interest in friends and activities they liked before. They may complain of headaches or stomachaches. A child may be more anxious or clingy with caregivers.
- Teens may sleep a lot or move or speak more slowly than usual. Some teens and children with severe depression may see or hear things that aren't there (hallucinate) or have false beliefs (delusions).

Depression can range from mild to severe. A child who feels a little "down" most of the time for a year or more may have a milder, ongoing form of depression called dysthymia (say "dis-THY-mee-uh"). In its most severe form, depression can cause a child to lose hope and want to die.

Whether depression is mild or severe, there are treatments that can help.

What causes depression?

Just what causes depression is not well understood. But it is linked to a problem with activity levels in certain parts of the brain as well as an imbalance of brain chemicals that affect mood. Things that may cause these problems include:

- Stressful events, such as changing schools, going through a divorce, or losing a close family member or friend.
- Some medicines, such as steroids or opioids for pain relief.
- Family history. In some children, depression seems to be inherited.

How is depression diagnosed?

To diagnose depression, a doctor may do a physical exam and ask questions about your child's past health. You and your child may be asked to fill out a form about your child's symptoms. The doctor may ask your child questions to learn more about how he or she thinks, acts, and feels.

Some diseases can cause symptoms that look like depression. So the child may have tests to help rule out physical problems, such as a low thyroid level or anemia.

It is common for children with depression to have other problems too, such as anxiety, attention deficit hyperactivity disorder (ADHD), or an eating disorder. The doctor may ask questions about these problems to help your child get the right diagnosis and treatment.

How is it treated?

Usually one of the first steps in treating depression is education for the child and his or her family. Teaching both the child and the family about depression can be a big help. It makes them less likely to blame themselves for the problem. Sometimes it can help other family members see that they are also depressed.

Counseling may help the child feel better. The type of counseling will depend on the age of the child. For young children, play therapy may be best. Older children and teens may benefit from cognitive-behavioral therapy. This type of counseling can help them change negative thoughts that make them feel bad.

Medicine may be an option if the child is very depressed. Combining antidepressant medicine with counseling often works best. A child with severe depression may need to be treated in the hospital.

There are some things you can do at home to help your child start to feel better.

- Encourage your child to get regular exercise, spend time with supportive friends, eat healthy foods, and get enough sleep.
- See that your child takes any medicine as prescribed and goes to all follow-up appointments.
- Make time to talk and listen to your child. Ask how he or she is feeling. Express your love and support.
- Remind your child that things will get better in time.

What should you know about antidepressant medicines?

- Children who take antidepressants should be watched closely. These medicines may increase the risk that a child will think about or try suicide, especially in the first few weeks of use. If your child takes an antidepressant, learn the warning signs of suicide, and get help right away if you see any of them. Common warning signs include:
 - Talking, drawing, or writing about death.
 - Giving away belongings.
 - Withdrawing from family and friends.
 - Having a plan, such as a gun or pills.
- Your child may start to feel better after one to three weeks of taking antidepressant medicine. but it can take as many as six to eight weeks to see more improvement. Make sure your child takes antidepressants as prescribed and keeps taking them so they have time to work.
- A child may need to try several different antidepressants to find one that works. If you notice any warning signs or have concerns about the medicine, or if you do not notice any improvement by three weeks, talk to your child's doctor.
- Do not let a child suddenly stop taking antidepressants. This could be dangerous. Your doctor can help you taper off the dose slowly to prevent problems.

Help is available. For additional information, visit [MagellanHealth.com/MYMH](https://www.MagellanHealth.com/MYMH)

Source: Healthwise