

Hope on the horizon

By Ciara Varone, Daily Sun Senior Writer 11 hrs ago



New and Better treatment options may help people win the fight against depression.

Illustration by Adam Rogers, Daily Sun

She felt stuck at the bottom of a hole — an emptiness in her chest. Carolyn Cass had a good job and supportive family when depression first struck her more than 20 years ago.

“A lot of people don’t understand how you can be unhappy when everything should be OK,” the Village of Mallory Square resident said. “It is a disease.” Cass eventually found treatment success with antidepressants, a relief that soon may come to more Americans with the recent approval of a new drug for people with the most difficult cases of depression. Whether through medication, counseling or talking to a support group, Cass wants others to know that assistance is available locally, and asking for it is worthwhile. Better management of depression may help curb suicide rates, with several high-profile suicides occurring in recent weeks.

Two survivors of the shooting at Marjory Stoneman Douglas High School in Parkland died by suicide in March, as did the father of a child killed in the mass shooting at Sandy Hook Elementary School in Newtown, Connecticut. A Villager died by a public suicide earlier this month, and her family and friends told investigators she had been depressed.

Advancing Treatment

Though not always the cause, depression is the most common condition associated with suicide, according to the American Foundation for Suicide Prevention.

This month, the Food and Drug Administration approved Spravato, a new nasal spray medication to treat depression.

The spray uses the drug esketamine, which is related to ketamine. Once a street drug, ketamine is approved as an anesthetic, and some doctors also are prescribing it for depression.

Spravato was approved for people with treatment-resistant depression, meaning other therapies, including at least two antidepressant treatments, have not improved their condition.

Because of potential side effects such as sedation and dissociation, Spravato must be taken in a doctor's office, where patients are monitored for at least two hours after receiving a dose. An oral antidepressant is taken with the spray.

As a spray, the medicine is absorbed by the lining of the nasal passages and into the bloodstream for quicker relief.

The U.S. Department of Veterans Affairs announced March 19 that its health care providers would offer the drug to patients.

The Villages Health's providers are not prescribing esketamine at this time, said Dr. Joseph Sivak, director of behavioral health.

"As this medicine gains more real-world experiences, data, and becomes more established, and also consistently affordable for patients, we will clearly revisit this medication," he said. "We will be monitoring all this closely."

It's one potential tool for a condition with no universal treatment, said Linda Bleecker, nurse practitioner specializing in psychiatry with TVH.

“You can have people that have the same symptoms but they respond very differently to each treatment,” she said.

Increasing Numbers

When left untreated, depression can be debilitating and, in some cases, leads to tragedy.

Suicide rates rose in every state except Nevada from 1999 to 2016, increasing 10.6 percent in Florida, according to the Centers for Disease Control and Prevention.

Suicide is the eighth-leading cause of death for adults ages 55 to 64.

More than 47,000 people died by suicide in 2017, according to the AFSP.

The highest suicide rate was among adults between 45 and 54 years of age, and the second-highest rate occurred in those 85 years or older, according to AFSP.

“It is absolutely a public health concern — a very large one,” Bleecker said.

Joanna Dailidas’ son, Joseph, took his own life two weeks after she moved to The Villages. He was 24 years old.

Though not afraid of the description, she typically does not tell people he died by suicide.

“Depression was actually what ended my son’s life,” she said. “We just couldn’t get him the long-term care he really needed.”

Joseph sought treatment for mental disorders including addiction.

Dailidas said they struggled to get insurance to cover treatments beyond several weeks at a time, though it was a chronic condition.

The Mental Health Parity and Addiction Equity Act of 2008 requires group health plans and health insurance issuers that provide mental health or substance-use disorder benefits to offer the same coverage for those conditions as they do for other medical conditions.

For example, if the plan offers unlimited doctors visits for diabetes, it also must offer unlimited visits for depression, the National Alliance on Mental Illness explains.

But insurance companies don’t always follow this federal law, Dailidas said.

Misconceptions

In addition to better funding for treatment, Dailidas said, educating the community on how to speak to someone in crisis is crucial to preventing future tragedies.

It's a misconception that asking someone if they're suicidal will encourage them to go through with it, Bleecker said. Typically, she said, they feel better if someone talks about it.

Well-meaning people have sometimes told Cass to give them a call if she goes to a dark place.

"That's what you can't do when you're down there," she said.

She encourages people to check on their loved ones without waiting for them to reach out.

Cass facilitates a depression support group at 7 p.m. on the first and third Tuesdays of each month at Lake Miona Recreation Center for those who want to share their experience.

"If you had a heart problem, if you had any other disease, you would go and get help for it," she said.

An estimated 17.3 million American adults had at least one major depressive episode in 2017, according to data from the most recent National Survey on Drug Use and Health.

Though recognized in the medical community as a treatable condition, a stigma surrounds the word for some people, Bleecker said.

"There's still, for a large number of people, a shame associated with having any type of thing like depression," she said. "Sometimes people will describe it as feeling like they failed if they can't handle things by themselves."

Lucy Rathier, health psychologist with The Villages Health, said depression goes beyond just feeling sad. The disorder impairs a person's ability to function in daily life for more than two to four weeks at a time, she said.

"You can't see the reason for getting out of bed," Cass said. "You can't see the reason for taking care of yourself."

There's no single, known cause of depression. Chemical imbalances in the brain likely play a role.

There's a genetic component for some patients, but depression can affect anyone at any age.

Dealing with the loss of a loved one, social isolation after moving away from family or living with medical issues can trigger depressive feelings in older adults.

Cass said she felt her depression returning after moving to The Villages. While her husband embraced the active lifestyle, she struggled to get out of the house.

After talking with her doctor, she switched medications and felt better. Cass said finding the right medication is a difficult process that takes time.

But in many cases, medication, counseling, or both, can help patients recover, Bleecker said.

Though not an easy path for most, Cass said seeking help is critical.

If you or someone you know is in crisis, resources are available 24-7 through the National Suicide Prevention Lifeline and the Crisis Text Line. Call 1-800-273-8255 or text “home” to 741741. Call 1-800-799-4889 if deaf or hard of hearing. And if someone is in immediate danger, call 911.

Ideally, a person will find help before reaching that point, Bleecker said.

Cass said there are two big misconceptions about depression: There’s nothing you can do about it and you can’t help somebody who has it.

“We want this happy place to be happy for everybody,” Cass said. “There’s no reason for somebody to be suffering here or anywhere.”

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