

This Free E–Book is brought to you by Natural–Aging.com.

100% Effective Natural Hormone Treatment
Menopause, Andropause And Other Hormone Imbalances
Impair Healthy Healing In People Over The Age Of 30!

Major Depression and Manic–Depression — Any difference?

By Michael G. Rayel, MD

Major Depression and Manic–Depression — Any difference?

by: **Michael G. Rayel, MD**

Countless number of patients and their family members have asked me about manic-depression and major depression. "Is there any difference?" "Are they one and the same?" "Is the treatment the same?" And so on. Each time I encounter a chorus of questions like these, I am enthused to provide answers.

You know why? Because the difference between these two disorders is enormous. The difference does not lie on clinical presentation alone. The treatment of these two disorders is significantly distinct.

Let me begin by describing major depression (officially called major depressive disorder). Major depression is a primary psychiatric disorder characterized by the presence of either a depressed mood or lack of interest to do usual activities occurring on a daily basis for at least two weeks. Just like other disorders, this illness has associated features such as impairment in energy, appetite, sleep, concentration, and desire to have sex.

In addition, patients afflicted with this disorder also suffer from feelings of hopelessness and worthlessness. Tearfulness or crying episodes and irritability are not uncommon. If left untreated, patients get worse. They become socially withdrawn and can't go to work. Moreover, about 15% of depressed patients become suicidal and occasionally, homicidal. Other patients develop psychosis—hearing voices (hallucinations) or having false beliefs (delusions) that people are out to get them.

What about manic–depression or bipolar disorder?

Manic–depression is a type of primary psychiatric disorder characterized by the presence of major depression (as described above) and episodes of mania that last for at least a week. When mania is present, patients show signs opposite of clinical depression. During the episode, patients show significant euphoria or extreme irritability. In addition, patients become talkative and loud.

Major Depression and Manic–Depression — Any difference?

Moreover, this type of patients doesn't need a lot of sleep. At night, they are very busy making phone calls, cleaning the house, and starting new projects. Despite apparent lack of sleep, they are still very energetic in the morning — ready to establish new business endeavors. Because they believe that they have special powers, they involve in unreasonable business deals and unrealistic personal projects.

They also become hypersexual — wanting to have sex several times a day. One-night stands can happen resulting in marital conflict. Like depressed patients, manic patients develop delusions (false beliefs). I know a manic patient who thinks that he is the "Chosen One." Another patient claims that the President of USA and the Prime Minister of Canada ask for her advice.

So the big difference between the two is the presence of mania. This manic episode has treatment implications. In fact the treatment of these disorders is completely different. While major depression needs antidepressant, manic–depression requires a mood stabilizer such as lithium and valproic acid.

Recently, new antipsychotics, for example risperidone, olanzapine, and quetiapine, have been shown to be effective for acute mania.

In general, giving an antidepressant to manic-depressed patients can make their condition worse because this medication can precipitate a switch to manic episode. Although there are some exceptions to the rule (extreme depression, lack of response to mood stabilizers, among others), it is preferable to avoid antidepressants among bipolar patients.

When considering the use of antidepressant in a depressed bipolar patient, clinicians should combine the medication with a mood stabilizer and should use an antidepressant (e.g. bupropion) that has a low tendency to cause a switch to mania.

Copyright © 2004. All rights reserved. Dr. Michael G. Rayel - author (First Aid to Mental Illness-Finalist, Reader's Preference Choice Award 2002), speaker, workshop leader, and psychiatrist. Dr. Rayel pioneers the CARE Approach as first aid for mental health. To receive free newsletter, visit

. His books are available at major online bookstores.

Depression Q&A: Common Kinds Of The Depression

By Dane Loveless

* What is Depression?

Depression is a disorder, engaged in a person's body, mood and thoughts. It can influence and interrupts eating, sleeping or judging manner. It is different from unhappiness or a "down" feeling. It is also not an indication of personal flaws or a condition that can be motivated or wanted away.

Persons with this disorder cannot just gather themselves together and get well. Usually, treatment is important and significantly vital to healing.

Major Depression and Manic–Depression — Any difference?

* Are there different types of depression?

Yes, there are actually three primary types of depression. Most of these are established by how ominous the signs are. They are:

·Major depression - This is the most serious type of mood disorder based on the number of signs and austerity of symptoms. It has become a severe health disorder and significant health concern in this country.

·Manic depression - This type involves both high and low mood swings. It also indicates other major symptoms not found in other depression types.

·Dysthymia depression - identifies the low to moderate level of depression that continues for about two years and sometimes longer. Though the symptoms are not as serious as a major depression, they more lasting and defiant to healing. People with this type develop a major depression for a moment when depressed.

* What is major depression?

This is the most serious type of depression. More symptoms found in this depression that are usually severe and serious.

Sometimes, it can be an effect from a particular disturbing incident in your life or it may develop gradually because of various personal frustrations and life struggles. Some people seem to develop the signs of a major depression with no apparent life problems.

Major depression can happen once, because of a major emotional trauma, react to healing, and will not happen again as long as you live. This is normally what they called a "single episode depression".

Some people are inclined to have habitual depression, with events of depression followed by periods of a number of years without depression, followed by another one, typically in reaction to another distress. This would be continuing depression.

Usually, the healing is similar, but that healing normally is over a longer period for continuing depression.

* What is Post–partum depression?

Postpartum depression can vary from temporary "blues" following childbirth to serious, unbearable and emotional depression.

Post partum depression signs are just the same to those experienced by other depressives, involving desperate belief, feelings of despair, low self–confidence, and constant fatigue and mood changes.

It can be healed successfully as long as the mother and her support group identify the warning

Major Depression and Manic–Depression — Any difference?

symptoms and examine them with considerate clinical experts. While some psychological occurrences and depressive feelings might be completely normal, constant feeling of unimportance or desperate views are not.

The secret to healing is to be honest with what you feel during each post partum meeting with your physician.

* What is Seasonal Affective Disorder (SAD)?

Seasonal Affective Disorder (SAD) is a mood disorder felt by most people during Winter months. It is characterized by a seasonal depression, the "down" feeling, a longing to sleep for too long and habitual desire for starchier foods.

The signs of SAD normally start in the late Fall where there is already less daytime. It may not start subside until late winter or spring.

Symptoms of Seasonal Affective Disorder include:

- Symptoms such as unnecessary eating and sleeping, weight increase normally take place during the Fall or Winter months. ·Complete reduction from despair happens in the Spring and Summer months.
- Indications have taken place in the past two years, with no seasonal depression episodes.
- Seasonal episodes considerably outnumber no seasonal depression episodes.
- There is a longing for sweet and starchy foods.

* What is bipolar depression?

Bipolar depression, also identified as manic depression, is categorized as a type of affective disorder or mood disorder that happens during life's normal difficulties. It can become a severe clinical condition. It is a significant health concern in the United States. This is distinguished by irregular episodes of acute excitement, elevated mood, or bad temper (also referred to as mania) opposed episodic, common depressive signs.

Dane Loveless is a regular contributor to depression–related guides and sites such as 'Depression Tips.' See:

Related Content:

Read more Content at

Related Products:

: A genuine resource center for Quality Ebooks and Softwares



This Free E–Book has been brought to you by Natural–Aging.com.

100% Effective Natural Hormone Treatment
Menopause, Andropause And Other Hormone Imbalances
Impair Healthy Healing In People Over The Age Of 30!