

Depression

Reactive depression is an appropriate response to progressive illness, unrelieved symptoms, and impending death, we should not even attempt to totally ameliorate the depression.

Depression symptoms include anxieties related to depleted self-esteem, loss of control, frustration and worry about declining physical strength, and physical and emotional impact of the disease.

Assess for patients that tend to hold things inside, feel hopeless in having any power to take action in the situation, or very withdrawn and difficult to help.

The first line of treatment is psychosocial support not antidepressants.

1. Meaningful, unhurried dialogue to elicit the most overwhelming issues.
2. Enhance physical comfort, honest discussions about the future, involvement with family and friends, spiritual comfort, guidance for social and financial problems, and encouragement to finish business and life review.
3. Review the importance of observing usual life events and finding meaningful ways to remain active within physical and emotional constraints.
4. Psychotropic medications may be helpful but are not substitutes for these other measures.
5. Patient may wish to be medicated if sleeplessness, bad dreams, emotional lability, or persistent despair is distressful.
6. Clinical depression is treated with an antidepressant.

Comfort Measures:

- 1) Establish a trusting relationship and follow-up fully by listening to what the patient shares
- 2) Answer the patient's questions honestly in a sensitive and caring, but totally open manner
- 3) Involve family, friends, and clergy, as indicated
- 4) Encourage mental and physical activities that may add meaning and satisfaction
- 5) Do not inhibit tears or outburst; these may be therapeutic
- 6) Record memories, life review, and important events on audio and/or visual tapes

Medical Measures:

- 1) Meticulous attention to symptom control
- 2) Elimination of potentially offending drugs
- 3) Anxiolytic medication
- 4) Amitriptyline (Elavil), 25-150mg PO HS (beginning at 25-50 mg and inc by 25-50mg Q2-3 days as tolerated.
- 5) Doxepin (Sinequan), 50-150 mg HS, titrated same as Amitriptyline
- 6) Fluoxetine (Prozac) 20mg daily
- 7) Citalopam (Celexa) 20mg daily
- 8) Other SSRIs