

Friends In Low Places

Depression: Can you help?

BY HEATHER KEAFER

PHOTO ILLUSTRATION BY DAVE DRUSE

FOR WEEKS, DANIELLE*, 21, a junior dietetics major at Temple U., picked at her food or ate nothing at all. She slept late — right through 9:40 biochem and 10:50 lab, through lunch and *The Young and the Restless*.

Her roommates were frustrated. They tried to wake her up for classes and to make her eat. Danielle wished they would leave her alone. She didn't care anymore.

A week before finals, they found her in the bathroom — gaunt and pale except for a bloodied left wrist, but alive. A razor had eased the feeling of emptiness and made the plea for help.

Depression is the leading cause of suicide, and, according to the American Psychiatric Association, suicide is the third leading cause of death among 15-to-24-year-olds.

Jeff Vansyckle, a psychologist with Temple counseling services, says that most college students he counsels have problems with ongoing depression. "Usually it's related to academic or relationship problems," he says.

One in four women and one in 10 men develop depression during their lifetime. And those numbers don't include loved ones, who can be just as affected by the disease. Nothing prepares them for noticing depression and helping someone through it.

"When the behavior becomes something they cannot pull out of, it's time for friends to step in,"

says Michelle Dixon, a social worker at Philhaven women's services in Pennsylvania.

Commonly recognized symptoms of depression include feelings of hopelessness and sadness, loss of motivation, change in sleep patterns (either sleeping too much or too little), loss of appetite, low energy, poor self-esteem, worrying about the past, irritability and loss of interest in activities previously enjoyed.

It's tough to tell whether a friend is clinically depressed or just sad, to know whether to intervene or butt out.

"I wish I had recognized it earlier as depression and not just my roommate's personality," says one of Danielle's roommates, Carey, a Temple senior.

"I felt limited trying to be a best friend, balancing the role of a confidant and knowing what she really needed," Carey says.

Danielle attempted suicide twice before Carey and other roommates involved a school counselor.

"It's normal to want to help, but know that you cannot change things," Dixon says. She says that when someone becomes isolated, indulges in dangerous behavior or engages in suicidal acts, outside help is needed. Many college and university counseling centers treat depression.

Between 80 and 90 percent of all depressed people respond to treatment, which can include psychotherapy, medication or a combination of the two, according to the APA. Nearly all depressed people who get treatment see at least some relief from their symptoms.

Depression is often as bewildering to victims as it is to their loved ones.

"I wish my friends understood that I had no control and couldn't just snap out of it," says a female Temple senior who is being treated for depression.

Friends who try to help can also get sucked into depression, Dixon warns.

"Know your limitations," Dixon stresses. "Realize that you cannot help the situation on your own."

Dixon suggests that friends of depression victims do what they enjoy to help relieve stress and prevent becoming depressed themselves. Also, it's important that friends have support systems of their own. Carey says that talking to friends helped her reassess the situation and feel better.

Danielle has taken a semester off from school to receive therapy. "Show you care by taking an active role," she advises. "Don't pretend depression doesn't exist."

* Name has been changed

For a free pamphlet on depression write The American Psychiatric Association, DPA Dept. NCM, 1400 K St. NW, Washington, D.C. 20005.

Heather Keafer is a senior journalism major at Messiah College in Pennsylvania.



Shiny, Happy People

The latchkey kids of the '80s are flying into the real world with more emotional baggage than can fit into the overhead compartment.

There are statistics to prove it: Those born after 1955 are three times as likely to suffer from depression as those born before, and since 1945, the 20-to-29 age group has more than tripled its suicide rate. Simply put, many members of our Breakfast Club won't be joining us for lunch.

But now there's Prozac.

Since its introduction in 1988, Prozac has become the second most commonly prescribed drug in the country. And because nonpsychiatric physicians can prescribe Prozac, it's also being used to treat an ever-wider range of afflictions and bad habits — smoking, PMS, weight control, premature ejaculation, you name it.

But despite its versatility and impressive 65 percent success rate in treating depression, everyone reacts differently to the wonder drug of the '90s. Sally, an Orange Coast College junior, had quit school, used amphetamines and cocaine, was bulimic and fought constantly with family and friends. Today, two years after going on Prozac, Sally is a drug-free 4.0 student who enjoys a happy, productive life.

Then there's Lillian, a recent U. of Texas graduate who found Prozac's side effects to be nothing but trouble.

"It screwed up my sex life," Lillian says. "I was no longer orgasmic."

This is a consequence that often divides users along gender lines. Women are irked by the reduction of sexual sensation, while guys claim Prozac makes them Energizer bunnies of love.

Surprisingly, it's not cases like Lillian that concern skeptics, but success stories like Sally's. Critics worry about the long-term effects of taking Prozac. Some fear future medical problems, while others envision a New World Order society of passionless robots.

Ridiculous? Yes. But these concerns are valid, since Prozac will undoubtedly alter the events that unfold in our lifetime. The question for our generation is: Will the change be for better or worse?

If a substantial portion of the population is on Prozac, how will that affect, say, politics? Would John F. Kennedy have been voted in by an electorate of Prozac poppers? If so, would Oswald, if on Prozac, still have assassinated him? Would a chemically balanced Jim Morrison still have written "The End," then overdosed himself into oblivion? Or would he have written more sanguine pop songs ("A Fresh Start"?) and be participating in a joint reunion tour with the Eagles right about now?

As we bravely march toward the end of the millennium, Prozac, for better or worse, is now part of our arsenal. And like any device, it is only as helpful or destructive as the person who uses it.

By James Hibberd, U. of Texas, Austin



Guest Expert: Carrot Top

"I think everybody should try Prozac. Have a little for breakfast, a sensible lunch, then a shake for dinner."