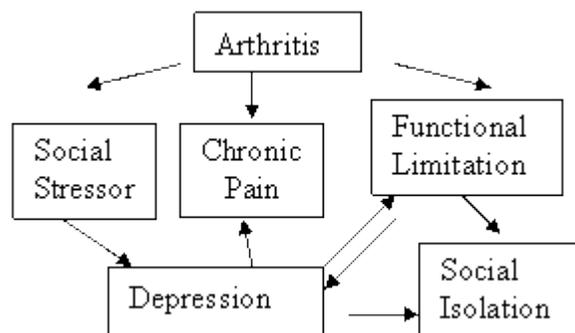


## Arthritis and Depression

### What is depression and how does it relate to arthritis?

Depression is a mental disorder generally expressed as inability to concentrate, disturbance in sleep pattern, loss of appetite, inability to experience pleasure, feelings of extreme sadness, guilt, helplessness and hopelessness, and thoughts of death.

Pain, fatigue, functional limitation and social isolation are major risk factors for the development of depression and are often experienced by persons with arthritis. Therefore, people with arthritis and their health care providers should be aware of the risk for developing depression and patients should seek help if needed.



### How common is depression among people with arthritis?

Major depressive disorders affect 13 percent to 17 percent of patients with rheumatoid arthritis (RA). Major depressive disorder is two to three times as common in patients with RA as in the general population.

### What are the symptoms of depression that people with arthritis should watch for?

If people with arthritis experience any of the following symptoms for more than two weeks, they should contact a mental health professional or a provider immediately –

- Depressed mood
- Loss of interest and enjoyment
- Reduced energy
- Being easily fatigued
- Diminished activity
- Marked tiredness on slight effort
- Reduced concentration and attention on a task
- Reduced confidence and self-esteem
- Feeling of guilt and unworthiness
- Bleak and pessimistic views of the future
- Ideas or acts of self-destruction or suicide

- Disturbed sleep
- Diminished appetite and interest in sexual activity
- Unexplained physical symptoms

(Source: International Classification of Disease, World Health Organization - 1992)

### **How is depression diagnosed in people with arthritis?**

Diagnosis of depression is made through a medical and psychological evaluation, conducted by a specialist trained to recognize and diagnose depression. The specialist will contact a mental health professional or the primary care physician, who can address to both arthritis and depression.

### **Who is at risk of depression?**

There are several risk factors for developing depression, and they can be either **biological** (including genetic factors and chemical imbalances in the body), **psychosocial** (including chronic stressors like life events involving personal loss - death in the family, chronic pain like chronic arthritis pain and daily hassles due to restricted mobility) **or both**.

### **How can people with arthritis manage depression?**

Appropriate management can help people with arthritis live healthy and independent lives, thus decreasing functional limitation. However, in order to manage health, one will have to control **both arthritis and depression**.

Arthritis pain and disability can be controlled by self-management. It is important for patients to learn about their disease and to take part in their own care. Research has shown that patients who take part in their own care report less pain, make fewer visits to their doctor and enjoy a better quality of life.

The following are important self-management skills:

Exercise is important for maintaining healthy and strong muscles, for preserving joint mobility and for maintaining flexibility and good life style.

Rest or a short nap that does not interfere with nighttime sleep may be useful in controlling pain, tiredness and muscle weakness associated with arthritis.

Assistive devices can be used to reduce stress on certain joints. For example, braces or canes may help reduce stress on the knees. Jar grippers or similar gadgets may help reduce stress on small joints.

Family members and others in close contact with the person with depression can offer support, by early recognition of onset of depression; by helping the patient to start

treatment at an appropriate facility and by helping them continue with the treatment; by providing adequate supervision and support to minimize the risk of suicide; by helping the patient to resume their activities and role in life on recovery; and by getting all the necessary guidance and information to prevent further recurrence.

People with depression should see their health care provider as soon as symptoms begin.

The Arthritis Foundation Self Help Program and Arthritis Foundation Exercise Program are known to decrease depression and improve the mood of people with arthritis.

**Resources:**

Substance Abuse and Mental Health Services Administration (SAMHSA)  
[www.samhsa.gov](http://www.samhsa.gov)

National Institute of Mental Health  
[www.nimh.nih.gov](http://www.nimh.nih.gov)

The U.S. Administration on Aging  
[www.aoa.gov](http://www.aoa.gov)

National Institute of Arthritis and Musculoskeletal and Skin Diseases  
301-495-4484  
[www.nih.gov/niams](http://www.nih.gov/niams)

***Information for this fact sheet was compiled from the following sources –***

- The American Psychosomatic Society
- The Journal of the American Medical Association
- World Health Organization
- Arthritis Foundation

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