

Depression and Cancer

Research has enabled many men, women and young people with cancer to survive and to lead fuller, more productive lives, both while they are undergoing treatment, and afterwards. As with other serious illnesses, such as HIV, heart disease or stroke, however, cancer can be accompanied by depression, which can affect mind, mood, body and behavior. Treatment for depression helps people manage both diseases, thus enhancing survival and quality of life.

About 9 million Americans of all ages are living with a current or past diagnosis of cancer. People who face a cancer diagnosis will experience many stresses and emotional upheavals. Fear of death, interruption of life plans, changes in body image and self-esteem, changes in social role, lifestyle, and medical bills are important issues to be faced. Still, not everyone with cancer becomes depressed. Depression can exist before the diagnosis of cancer or may develop after the cancer is identified. There is no evidence to support a causal role for depression in cancer, but depression may impact the course of the disease and a person's ability to participate in treatment.

Despite the enormous advances in brain research in the past 20 years, depression often goes undiagnosed and untreated. About 25 percent of

people with cancer have depression, but only 2 percent receive treatment. Persons with cancer, their families and friends, and even their physicians and oncologists (physicians specializing in cancer treatment) may misinterpret depression's warning signs, mistaking them for inevitable accompaniments to cancer. Symptoms of depression may overlap with those of cancer and other physical illnesses. However, skilled health professionals will recognize the symptoms of depression and inquire about their duration and severity, diagnose the disorder, and suggest appropriate treatment.

Depression Facts

Depression is a serious medical condition that affects thoughts, feelings, and the ability to function in everyday life. Depression can occur at any age. NIMH-sponsored studies estimate that 6 percent of 9- to 17-year olds in the U.S. and almost 10 percent of American adults, or about 19 million people age 18 and older, experience some form of depression every year. Although available therapies alleviate symptoms in over 80 percent of those treated, nearly two-thirds of people with depression do not get the help they need.

Depression results from abnormal functioning of the brain. The causes of depression are currently a matter of



Depression Symptoms

- Persistent sad, anxious, or "empty" mood
- Feelings of hopelessness, pessimism
- Feelings of guilt, worthlessness, helplessness
- Loss of interest or pleasure in hobbies and activities that were once enjoyed, including sex
- Decreased energy, fatigue, being "slowed down"
- Difficulty concentrating, remembering, making decisions
- Insomnia, early-morning awakening, or oversleeping
- Appetite and/or weight loss or overeating and weight gain
- Thoughts of death or suicide; suicide attempts
- Restlessness, irritability

If five or more of these symptoms are present every day for at least two weeks and interfere with routine daily activities such as work, self-care, and childcare or social life, seek an evaluation for depression.

intense research. An interaction between genetic predisposition and life history appear to determine a person's level of risk. Episodes of depression may then be triggered by stress, difficult life events, side effects of medications, or other environmental factors. Whatever its origins, depression can limit the energy needed to keep focused on treatment for other disorders, such as cancer.

Cancer Facts

Cancer can develop in any organ or tissue of the body. Normally, cells grow and divide to produce more cells only when the body needs them. But sometimes cells keep dividing when new cells are not needed. These extra cells may form a mass of tissue, called a tumor. Tumors can be either benign (not cancerous) or malignant (cancerous). Cells in malignant tumors are abnormal and divide without control or order, resulting in damage to the organs or tissues they invade.

Cancer cells can break away from a malignant tumor and enter the bloodstream or the lymphatic system. This is how cancer spreads, or "metastasizes," from the original cancer site to form new tumors in other organs. The original tumor, called the primary cancer or primary tumor, is usually named for the part of the body in which it begins.

Cancer can cause a variety of symptoms. Some include:

- Thickening or lump in the breast or any other part of the body

- Obvious change in a wart or mole
- A sore that does not heal
- Nagging cough or hoarseness
- Changes in bowel or bladder habits
- Indigestion or difficulty swallowing
- Unexplained changes in weight
- Unusual bleeding or discharge

When these or other symptoms occur, they are not always caused by cancer. They may also be caused by infections, benign tumors, or other problems. It is important to see a doctor about any of these symptoms or about other physical changes. Only a doctor can make a diagnosis. One should not wait to feel pain; early cancer usually does not cause pain.

Treatment for cancer depends on the type of cancer; the size, location, and stage of the disease; the person's general health; and other factors. People with cancer are often treated by a team of specialists, which may include a surgeon, radiation oncologist, medical oncologist, and others. Most cancers are treated with surgery, radiation therapy, chemotherapy, hormone therapy, or biological therapy. One treatment method or a combination of methods may be used, depending on each person's situation.

Get Treatment

At times it is taken for granted that cancer would induce depression; that depression is a normal part of dealing with cancer; or that depression cannot be alleviated for a person suffering

from cancer. But these assumptions are false. Depression can be treated and should be treated even when a person is undergoing complicated regimens for cancer or other illnesses.

Prescription antidepressant medications are generally well-tolerated and safe for people being treated for cancer. There are, however, possible interactions among some of the drugs that require careful monitoring. Therefore, people undergoing cancer treatment who develop depression, as well as people in treatment for depression who subsequently develop cancer, should make sure to tell any physician they visit about the full range of medications they are taking. Specific types of psychotherapy, or "talk" therapy, also can relieve depression.

Use of herbal supplements of any kind should be discussed with a physician before they are tried. Recently, scientists have discovered that St. John's wort, an herbal remedy sold over-the-counter and promoted as a treatment for mild depression, can have harmful interactions with some other medications. (See the alert on the NIMH web site: <http://www.nimh.nih.gov/events/stjohnwort.cfm>.)

Treatment for depression can help people feel better and cope better with the cancer treatment process. There is evidence that the lifting of a depressed mood can help enhance survival. Support groups, as well as medication and/or psychotherapy for depression, can contribute to this effect.

Treatment for depression in the context of cancer should be managed by a mental health professional—for example, a psychiatrist, psychologist, or clinical social worker—who is in close communication with the physician providing the cancer treatment. This is especially important when antidepressant medication is needed or prescribed, so that potentially harmful drug interactions can be avoided. In some cases, a mental health professional that specializes in treating individuals with depression and co-occurring physical illnesses such as cancer may be available.

While there are many different treatments for depression, they must be carefully chosen by a trained professional based on the circumstances of the person and family. Recovery from depression takes time. Medications for depression can take several weeks to work and may need to be combined with ongoing psychotherapy. Not everyone responds to treatment in the same way. Prescriptions and dosing may need to be adjusted. No matter how advanced the cancer, however, the person does not have to suffer from depression. Treatment can be effective.

Other mental disorders, such as bipolar disorder (manic-depressive illness) and anxiety disorders, may occur in people with cancer, and they too can be effectively treated. For more information about these and other mental illnesses, contact NIMH.

Remember, depression is a treatable disorder of the brain. Depression can be treated in addition to whatever other illnesses a person might have, including cancer. If you think you may be depressed or know someone who is, don't lose hope. Seek help for depression.

For more information about depression and research on mental disorders, contact:

National Institute of Mental Health
(NIMH)
Office of Communications and Public
Liaison
6001 Executive Blvd., Rm. 8184,
MSC 9663
Bethesda, MD 20892-9663
Phone: 301-443-4513
TTY: 301-443-8431
Fax: 301-443-4279
Mental Health FAX 4U: 301-443-5158
E-mail: nimhinfo@nih.gov
Web site: <http://www.nimh.nih.gov>

NIMH Depression Publications
Toll-free: 1-800-421-4211

For more information about cancer research, contact:

National Cancer Institute (NCI)
Office of Communications
31 Center Drive, MSC 2580
Bethesda MD 20892-2520
Cancer Information Service:
Toll-free 1-800-4-CANCER
CancerNet PDO: <http://cancernet.nci.nih.gov/pdqfull.html>
NCI Publications Locator Service:
<http://publications.nci.nih.gov>

All material in this fact sheet is in the public domain and may be copied or reproduced without permission from the NIMH. Citation of NIMH as the source is appreciated.

March 2001