

Diabetes and Depression:

Having one increases risk for the other

By Stan Pettegrow, LCSW, Katahdin Valley Health Center

Depression afflicts some 17 million people in the United States and can strike anyone at any age but people with diabetes may be at greater risk.

And, it seems, that the risk cuts both ways.

A recent study published in the June 18, 2008 issue of the *Journal of the American Medical Association* conducted two trials with people suffering from diabetes and depression. The first trial found that people with Type 2 diabetes had a 54 percent increased risk of developing depressive symptoms over the 3.2 year follow-up period while the second trial found that elevated depressive symptoms were associated with a 42 percent increased risk of developing diabetes. Even after adjusting for factors such as being overweight, smoking and sedentary lifestyle, the risk of developing diabetes was still 34 percent higher in patients with depression.ⁱ

Depression is a serious medical condition that affects a person's thoughts and feelings and interrupts everyday functioning. Depression is marked by feelings of sadness, a loss of pleasure in activities that were once pleasurable, disturbances in sleep and appetite, feelings of restlessness or irritation, feelings of worthlessness or guilt, a diminished ability to think, concentrate or make decisions, and sometimes thoughts of death and suicide. Episodes of depression may be triggered by stress, difficult life events or other circumstantial factors.

Although the specific causal relationship remains unclear, there are several factors that may contribute to the overall findings.

Being diagnosed with diabetes is a major life stressor. It requires multiple physical and psychological changes. The person must learn a new and often complex system of dietary and medical interventions. These changes often impact many areas of a person's life and may require many lifestyle changes. These changes can be exhausting not only for the newly diagnosed diabetic, but for his or her family as well.

Often individuals with depression do not realize that they are depressed. Symptoms of depression are often mistaken as symptoms of diabetes. This is particularly troublesome because depressed persons tend to have difficulty managing their diabetes. Additionally, persons suffering from both depression and diabetes tend to have higher health care costs in primary care.

A person suffering from depression may not have the motivation and energy to maintain good diabetic management. Diabetes is a chronic disease and persons suffering from diabetes must think constantly about diet, medications and the possibility of complications, which include peripheral nerve problems, blindness and even amputation. Proper diabetic management requires a vigilance that depression does not allow.

Recent studies suggest that treatment of depression can improve diabetic management. In a study by Lustman and colleagues, glucose levels were shown to improve as depression lifted. The better the improvement in depressive symptoms, the better the diabetic control.ⁱⁱ

Persons do well with a combination of antidepressant treatment and psychotherapy. Today there is a greater variety of antidepressant medications than ever before, affording a greater choice and a minimization of side effects. Paired with cognitive behavioral psychotherapy, demonstrated to be effective at treating depression and anxiety, the combination has been shown to be more effective than either separately

An integrated approach to the treatment of diabetes and depression provide the best opportunity for results. Proper screening and accurate diagnosis of diabetes and depression are of the utmost importance. Doctors need to be sensitive to the risk of depression in their diabetic patients, and mental health clinicians need to be aware of the risk for diabetes in their clients suffering from depression. Patients benefit when doctors and mental health clinicians work with the patient together as a team.

Although the biological mechanisms between depression and Type 2 diabetes remain unclear, there is building evidence that these two long-term diseases are linked. Treating both of these serious medical diseases simultaneously with an integrated treatment approach offers the best opportunity for increasing their quality-of life over the short and long term. Persons suffering from diabetes, depression, or both, should talk with their providers about these risks and what options are available.

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ⁱ Golden, SH, Lazo, M, Carnethon, M, Bertoni, AG, Schreiner, PJ, Diez Roux, AV, Lee, HB, Lyketsos, C; *Examining a Bidirectional Association Between Depressive Symptoms and Diabetes.* JAMA (2008). 299[23]: pp. 2751-2759.

ⁱⁱ Lustmen, PJ, Griffith, LS, Freedland, KE, Clouse, RE; *The course of Major Depression in Diabetics.* General Hospital Psychiatry 1997, 19(2) 138-143.