



# Journal of Trauma and Rehabilitation on depression

**Karen McGrellis\***

Senior Training & Consultation Specialist, Rutgers University behavioral Health Care, United States

\*Corresponding author: Karen McGrellis, Senior Training & Consultation Specialist, Rutgers University behavioral Health Care, United States, Email: karen.mcgrellis@rutgers.edu

## Editorial

Journal of Trauma and Rehabilitation is a peer reviewed journal that focuses on the advancements in the research of Traumatic sciences and its medical rehabilitation. This Journal considers almost all aspects of research related to trauma sciences, psychiatry and its rehabilitation methods from all countries.

The longer we live, the more inevitable it is that we will experience trauma. Trauma is the response to a deeply distressing or disturbing event that overwhelms an individual's ability to cope, causes feelings of helplessness, diminishes their sense of self and their ability to feel the full range of emotions and experiences.

It does not discriminate and it is pervasive throughout the world. A World Mental Health survey conducted by the World Health Organization found that at least a third of the more than 125,000 people surveyed in 26 different countries had experienced trauma. That number rose to 70% when the group was limited to people experiencing core disorders as defined by the DSM-IV (the classification found in the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition). But those numbers are just for instances that have been reported; the actual number is probably much, much higher.

Most of us feel sad, lonely, or depressed at times. It's a normal reaction to loss, life's struggles, or injured self-esteem. But when these feelings become overwhelming, cause physical symptoms, and last for long periods of time, they can keep you from leading a normal, active life.

That's when it's time to seek medical help.

Your regular doctor is a good place to start. They can test you for depression and help manage your symptoms. If your depression goes untreated, it may get worse and last for months, even years. It can cause pain and possibly lead to suicide, as it does for about 1 of every 10 people with depression.

Recognizing the symptoms is key. Unfortunately, about half the people who have depression never get it diagnosed or treated.

## Symptoms

They can include:

- Trouble concentrating, remembering details, and making decisions
- Fatigue
- Feelings of guilt, worthlessness, and helplessness
- Pessimism and hopelessness
- Insomnia, early-morning wakefulness, or sleeping too much
- Irritability
- Restlessness

- Loss of interest in things once pleasurable, including sex
- Overeating, or appetite loss
- Aches, pains, headaches, or cramps that won't go away
- Digestive problems that don't get better, even with treatment
- Persistent sad, anxious, or "empty" feelings
- Suicidal thoughts or attempts

## Diagnosis

There isn't a "depression test" a doctor can use to see if you have it, so figuring that out often starts with a thorough history and physical exam.

Your doctor will want to know:

- When your symptoms started
- How long they've lasted
- How severe they are
- If depression or other mental illnesses run in your family
- If you have a history of drug or alcohol abuse

You'll also be asked if you've had similar symptoms of depression before, and if so, how it was treated.

## Treatment

If your doctor rules out a physical cause for your symptoms, he may start you on a treatment or refer you to a mental health professional. This specialist will figure out the best course of treatment. That may include medicines (such as antidepressants), a type of therapy called psychotherapy, or both.

Are There Warning Signs of Suicide With Depression?

Depression carries a high risk of suicide. Suicidal thoughts or intentions are serious. Warning signs include:

- A sudden switch from sadness to extreme calmness, or appearing to be happy
- Always talking or thinking about death
- Clinical depression (deep sadness, loss of interest, trouble sleeping and eating) that gets worse
- Taking risks that could lead to death, such as driving through red lights
- Making comments about being hopeless, helpless, or worthless
- Putting affairs in order, like tying up loose ends or changing a will
- Saying things like "It would be better if I weren't here" or "I want out"
- Talking about suicide
- Visiting or calling close friends and loved ones

If you or someone you know shows any of the above warning signs, call your local suicide hotline, contact a mental health professional right away, or go to the emergency room.

The Journal mainly focuses on treatment of traumatic brain injuries, psychological trauma, childhood trauma, spinal cord injuries and post-traumatic stress. It also includes the advancements of rehabilitation therapies like physical therapy, dysphagia therapy, hand therapy, infection control, occupational therapy, and speech & language therapy.

The journal accepts almost all types of write-ups like research articles, review, case reports, commentary, letter to editor, mini review, opinion, short communication, book review, editorials etc. in the field of Trauma, its cause and treatment.