

Help is
at hand

Men and Depression



The Royal College of Psychiatrists

About this leaflet

This leaflet is for any man who is depressed, their friends and their family. Men seem to suffer from depression just as often as women, but they are less likely to ask for help. It covers:

- some basic facts about depression
- how it affects men in particular
- how to get help.

Why is it important?

Depression causes a huge amount of suffering. It is a major reason for people taking time off work. Many people who kill themselves have been depressed – so it is potentially fatal. However, it is easy to treat, and this is best done as early as possible.

What's the difference between just feeling miserable and being depressed?

Everyone has times in their lives when they feel down or depressed. It is usually for a good reason, does not dominate your life and does not last for a long time. However, if the depression goes on for a long time, or becomes very severe, you may find yourself stuck and unable to lift yourself out of the depression. This is what doctors call a 'depressive illness'.

Some people suffer from bipolar disorder (also called manic depression). They have periods of bad depression, but also times of great 'elation' and over-activity. These can be just as harmful as the periods of depression.

What are the signs and symptoms?

If you are depressed, you will probably notice some of the following:

Mind

You:

- feel unhappy, miserable, down, depressed. It just won't go away and can be worse at a particular time of day, often first thing in the morning.
- can't enjoy anything
- can't concentrate properly
- feel guilty about things that have nothing to do with you
- become pessimistic
- start to feel hopeless, and perhaps even suicidal.

Body

You:

- can't get to sleep, and wake early in the morning and/or throughout the night
- lose interest in sex
- can't eat
- lose weight.

Other people may notice that you:

- perform less well at work
- seem unusually quiet and unable to talk about things
- worry about things more than usual
- are more irritable than usual
- complain more about vague physical problems
- are not looking after yourself properly – you may not bother to shave, wash your hair, look after your clothes.

How is depression different for men?

Men seem to suffer from depression just as often as women, but are less likely to ask for help. Men often try to deal with their depression by using drugs and alcohol.

There is no evidence for a completely separate type of 'male depression'. However, there is evidence that some symptoms of depression are more common in men than in women.

These include:

- irritability
- sudden anger
- increased loss of control
- greater risk-taking
- aggression.

Men are also more likely to commit suicide.

Men's attitudes and behaviour

Compared with women, men tend to be more competitive and concerned with power and success. Most men don't like to admit that they feel fragile or that they need help. They feel that they should rely on themselves, and that it is somehow weak to have to depend on someone else, even for a short time. They are less likely to talk about their feelings with their friends, loved ones or their doctors. This may be why they don't get the help they need.

This traditional view of how men should be – always tough and self-reliant – is also held by some women. Some men worry that, if they talk

about their feelings of depression, their partner may reject them. Even professionals may share this view, and do not spot depression in men as often as they should.

How do men cope?

Instead of talking about how they feel, men may use alcohol or drugs to feel better. This usually makes things worse, certainly in the long run. Your work will suffer and alcohol often leads to irresponsible, unpleasant or dangerous behaviour. Men may also focus more on their work than their relationships or home life. This can cause conflicts with your wife or partner. All of these things make depression more likely.

Relationships

For married men, research has shown that trouble in a marriage or long-term relationship is the single most common problem linked to depression. Men can't cope with disagreements as well as women. Arguments make them feel very physically uncomfortable. They try to avoid arguments or difficult discussions. The partner will want to talk about a problem, but he will do his best to avoid it. The partner then feels ignored and tries to talk about it more, which makes the man feel he is being nagged. So, he withdraws even further, which makes his partner feel even more ignored and so on... This vicious circle can destroy a relationship.

Separation and divorce

Men have traditionally seen themselves as being in control of their families' lives. However, the process of separation and divorce is most often started by women. Of all men, those who are divorced are most likely to kill themselves, probably because depression is more common and more severe in this group.

As well as losing your main relationship, you may

- lose touch with your children
- have to move to live in a different place
- find yourself short of money.

These are stressful events in themselves, quite apart from the stress of the break-up, and they may bring on depression.

Sex

When men are depressed, they feel less good about their bodies and less sexy. Many go off sex completely. Several studies have shown that, in spite of this, men who are depressed have intercourse just as often, but they don't feel as satisfied as usual. A few depressed men actually report an increase in sexual drive and intercourse, possibly as a way of trying to make themselves feel better.

Some antidepressants also reduce sex drive in a small number of men. However, the good news is that, as the depression improves, so will sexual desire, performance and satisfaction.

It's worth remembering that it can happen the other way round. Impotence (difficulty in getting

or keeping an erection) can bring about depression. Again, this is a problem for which it is usually possible to find effective help.

Pregnancy and children

We have known for many years that some mothers feel very depressed after having a baby. It is only recently that we have come to realise that more than 1 in 10 fathers also suffer psychological problems during this time. This shouldn't really be surprising. Major events in people's lives, even good ones like moving house, can make you depressed – and this particular event changes your life more than any other. Suddenly, you have to spend much more of your time looking after your partner, and possibly other children, and you may be very tired.

On an intimate level, new mothers tend to be less interested in sex for a number of months. Simple tiredness is the main problem, although you may take it personally and feel that you are being rejected. You may have to adjust, perhaps for the first time, to taking second place in your partner's affections. You may also find that you can't spend so much time at work.

New fathers are more likely to become depressed if:

- your partner is depressed
- you aren't getting on with your partner
- you are unemployed.

This isn't important just from the father's point of view. It will affect the mother and may affect how the baby grows and develops in the first few months.

Unemployment and retirement

Leaving work, for any reason, can be stressful. Studies have shown that up to 1 in 7 men who become unemployed will develop a depressive illness in the next 6 months.

After relationship difficulties, unemployment is the thing most likely to push a man into a serious depression – work is often the main source of a man's sense of worth and self-esteem.

- You may lose the signs of your success, such as the company car.
- You may have to adjust to being at home, looking after children, while your wife or partner becomes the bread-winner.
- From a position of being in control, you may face a future over which you have little, especially if it takes a long time to find another job.

You are more likely to become depressed if you:

- are shy
- don't have a close relationship
- don't manage to find another job.

Depression itself can make it harder to get another job.

Even retiring from work at the usual age can be difficult for many men, especially if your partner continues to work. It can be hard to adjust to losing the structure of your day and your contact with colleagues.

Gay men and depression

Some research shows that gay men appear to suffer from depression more than straight men. This could be linked to the stress of 'coming out', or discrimination experienced by gay men, such as physical or verbal attacks.

Suicide

Men are around 3 times more likely to kill themselves than women. Suicide is commonest among men who are separated, widowed or divorced, and is more likely if someone is a heavy drinker.

Over the last few years, men have become more likely to kill themselves, particularly those aged between 16 and 24 years and those between 39 and 54 years. We don't yet know the reason for this.

We do know that around half the people who kill themselves will have seen their GP in the previous 4 weeks – although not necessarily to discuss their emotional state. However, fewer men than women will have seen their GP in the year before their suicide. We also know that about 2 out of 3 people who kill themselves will have talked about it to friends or family.

Asking someone if he is feeling suicidal will not put the idea into his head or make it more likely that he will kill himself. Even if someone is not very good at talking about how he is feeling, it is important to ask if you have any suspicion – and to take these ideas seriously.

For a man who is suicidal, there is nothing more demoralising than to feel that others do not take him seriously. He will often have taken some time to pluck up the courage to tell anyone about it.

If you find yourself feeling so bad that you have thought about suicide, it can be a great relief to talk about it.

Violence

Some studies have shown that men who commit violent crimes are more likely to get depressed than men who don't. However, we don't know if the depression makes their violence more likely, or if it's just the way they lead their lives.

Helping men

Many men find it difficult to ask for help when they are depressed – it can feel unmanly and weak. It may be easier for men to ask for help if those who give that help take into account men's special needs.

Men who are depressed are more likely to talk about the physical symptoms of their depression than the emotional and psychological ones. This may be one reason why GPs sometimes don't diagnose it. If you are feeling wretched, don't hold back – tell your GP.

It can help to see depression as a result of chemical changes in the brain and/or as the inevitable cost of living in a demanding and difficult world. It is nothing to do with being weak or unmanly and it can be helped. Both talking and medication can be important ways to help you get better.

If a depressed man is married, or in a steady relationship – straight or gay – his partner should be involved so that they can understand what is happening. This will make it less likely for the depression to interfere with their relationship.

Some men don't feel comfortable talking about themselves and may be reluctant to consider psychotherapy (talking treatments). However, it is a powerful way of relieving depression and works well for many men.

Helping yourself

Don't bottle things up – if you've had a major upset in your life, try to tell someone how you feel about it.

Keep active – get out of doors and take some exercise, even if it's only a walk. This will help to keep you physically fit and you will sleep better. It can also help you not to dwell on painful thoughts and feelings.

Eat properly – you may not feel very hungry, but you should eat a balanced diet, with lots of fruit and vegetables. It's easy to lose weight and run low on vitamins when you are depressed.

Avoid alcohol and drugs – alcohol may make you feel better for a couple of hours, but it will make you more depressed in the long run. The same goes for street drugs, particularly amphetamines, cocaine and ecstasy.

Don't get upset if you can't sleep – do something restful that you enjoy, like listening to the radio or watching television. Use relaxation techniques – if you feel tense all the time, try exercise, yoga, massage, aromatherapy etc.

Do something you enjoy – set some time aside regularly each week to do something you really enjoy – exercise, reading, a hobby.

Check out your lifestyle – a lot of people who have depression are perfectionists and tend to drive themselves too hard. You may need to set yourself more realistic targets and reduce your workload.

Take a break – this may be easier said than done, but it can be really helpful to get away and out of your normal routine for a few days. Even a few hours can be helpful.

Read about depression – there are now many books and websites about depression. Not only can they help you to cope, but they may also help friends and relatives to understand what you are going through.

Remember, in the long run, depression can be helpful – some people come out of it stronger and coping better than before. You may see situations and relationships more clearly, and may now have the strength and wisdom to make important decisions and changes that you were avoiding before.

Finding more help

- The best place to start is your GP who can go over your options and discuss any worries you have about confidentiality. Many men are concerned that information held by their family doctors may need to be given in medical reports, and so may damage their chances in work. It's important to remember that, in the UK, it is illegal for an employer to fire you – or not hire you – solely because you have a diagnosis of a certain disorder. Their only grounds for this are that your condition (whatever it is) will actually interfere with your ability to do the job. Even if it does interfere to some extent, under the Disability Discrimination Act, an employer is expected to make reasonable adjustments to ensure that someone with a recognised condition – including depression – can be supported in their job rather than dismissed.
- Depression may be due to physical illness, so you need to get a proper physical check-up. If you are already having treatment for a physical illness, your GP will need to know.
- Any worries about confidentiality should be discussed with your GP.
- If you really feel that you can't talk about it with anyone you know, try the Samaritans 24-hour telephone helpline. This will allow you to discuss things anonymously.

- Depression can be as much of an illness as pneumonia or breaking your leg. You shouldn't feel embarrassed or ashamed about it. The most important thing to remember is to ask for the help you need, when you need it.
- If you need more information or would like to talk to somebody confidentially, the organisations listed overleaf may be able to help.

Remember – depression is common, it is treatable and you are entitled to the help you need.

Further reading

The Mind: A User's Guide (2007).
Editor R Persaud.

Further help

Aware: www.aware.ie

Tel: 00 353 1890 303 302

Organisation in Ireland that assists and supports those suffering from depression and their families. A helpline is available as well as support groups, lectures, and current research on depression.

CALM Campaign against Living

Miserably: www.thecalmzone.net

Helpline: 0800 58 58 58; open Sat. to Tues.
5.00pm to midnight.

Campaign about fighting depression amongst young men.

Depression Alliance:

www.depressionalliance.org

Depression Alliance does not currently run a helpline but you can call for an information pack on 0845 123 23 20; email: information@depressionalliance.org.

The Bipolar Organisation:

www.mdf.org.uk

Provides support, advice and information for people with bipolar disorder, their friends and carers. email: mdf@mdf.org.uk

Men's Health Forum:**www.menshealthforum.org.uk**

Charity that provides an independent and authoritative voice for male health in England and Wales and tackles the issues and inequalities affecting the health and well-being of men and boys.

Men to Men: www.mentomen.org

An innovative group looking to challenge society's and men's own view of the role of men.

Mental Health Forum:**www.mentalhealthforum.net**

A community where members can get mutual support, and discuss mental health policy and service development issues.

Samaritans: www.samaritans.org

Helpline: 08457 909090 (UK) or 1850

609090 (Eire); email: jo@samaritans.org

Samaritans is a registered charity based in the UK and Republic of Ireland that provides confidential emotional support to any person who is suicidal or despairing.

The Life Academy:**www.life-academy.co.uk**

Runs courses and produces literature on the subject of retirement for employees and employers.

References

Thase F.E. Natural history and preventative treatment of recurrent mood disorders. Annual Review of Medicine (1999).

NICE clinical guideline 90 Depression in adults: full guidance – interim proof copy. 28 October 2009.

Bjerkset O. Gender differences in the association of mixed anxiety and depression with suicide. The British Journal of Psychiatry (2008) 192: 474-475.

Branney P. and White A. Big boys don't cry: depression and men. Advances in Psychiatric Treatment (2008) 14: 256-262.

Luoma J., Martin C.E., & Pearson J.L. Contact with mental health and primary care providers before suicide: a review of the evidence. American Journal of Psychiatry (2002) 159:6 909-916.

Moller-Leimkuhler A.M. Barriers to help-seeking by men: a review of sociocultural and clinical literature with particular reference to depression. Journal of Affective Disorders (September 2002) Vol. 71, Issues 1-3:1-9.

Winkler D. et al. Gender differences in the psychopathology of depressed inpatients. European Archives of Psychiatry and Clinical Neurosciences (2003) 254, 209-214.

Ramchandani P., Stein A., Evans J., O'Connor T.G. Paternal depression in the postnatal period and child development: a prospective population study. *The Lancet* (25 June 2005) Vol. 365, Issue 9478: 2201-2205.

Ryan J., Carriere I. and Ritchie K. Late-life depression and mortality: influence of gender and antidepressant use. *The British Journal of Psychiatry* (2008) 192: 12-18.

Warner J., et al. Rates and predictors of mental illness in gay men, lesbians and bisexual men and women: results from a survey based in England and Wales. *The British Journal of Psychiatry* (2004) 185: 479-485.

The Royal College of Psychiatrists produces:

- a wide range of mental health information for patients, carers and professionals
- factsheets on treatment in psychiatry, such as antidepressants and cognitive behavioural therapy.

These can be downloaded from our website:

www.rcpsych.ac.uk

A range of materials for carers of people with mental health problems has also been produced by the Partners in Care campaign. These can be downloaded from

www.partnersincare.co.uk

For a catalogue of all our available materials, contact the Leaflets Department, The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG. Tel: + 44 (0)207 235 2351 ext. 6259; Fax: + 44 (0)207 235 1935; email: leaflets@rcpsych.ac.uk.

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