

Sadness

Note: My NM Care corner is not intended to replace clinical care or management by a healthcare provider. If you have a medical emergency, please contact your healthcare provider.

Some people say that they experience sadness or even depression during or after cancer. Some may feel a sense of loss of their health, and the life they had before cancer. After treatment, you may still feel sad and this is normal. It may take time to accept all the changes that happened to your body, family, and even work life.

If you have any of the following signs for more than 2 weeks, talk to your doctor about treatment that can help you feel better. Here are common signs of depression:

- Feelings of sadness that doesn't go away
- Having a sense of guilt or feeling unworthy
- Feeling helpless or hopeless, as if life has no meaning
- Crying for long periods of time or many times each day
- Feeling extremely tired (fatigue)
- Wanting to avoid social situations
- Finding it hard to enjoy everyday things, such as food or being with family and friends
- Thinking about hurting yourself

Common cause of depression may include:

- Learning you have cancer
- Family history of depression
- · Medical conditions: Abnormal levels of calcium, sodium, or potassium in the blood, anemia
- Side-effects caused by certain medicines
- Stress caused by life events other than cancer

Self-care Strategies

Here are some strategies to try at home that you can try to incorporate in your life to ease the symptoms of depression:

- Avoid drinking alcohol.
- Exercise can improve mood. Exercise several times a week. Start by exercising for 10 minutes 2-3 times

per week, and then add 5-10 minutes to your exercise sessions each week. Always check with your

doctor before starting a new exercise program.

- Expressing or sharing feelings like sadness with others can be helpful. Talk to trusted family and/or friends
 - about how you are feeling.
- Be sure to make time for yourself each day to do things that make you feel happy. Even if you are feeling
- sad, it's important to keep doing some of the activities you find fun. These activities might help improve

your mood.



• Join a support group and talk to people who have been through the same cancer treatment as you. Some

people find support groups to be helpful as they can meet and relate to other cancer survivors who share

similar experiences.

• Write down your feelings or worries in a diary or journal. Writing down your feelings can help you to feel

better.

- Try relaxation exercises and deep breathing.
- Use meditation, prayer, or other types of spiritual support.
- Ask your doctor for a referral to see a licensed mental health care provider.

How Your Care Team can Help

If you are feeling depressed, mention this to your doctor. Remember, getting the help you need is important for your health. Getting treatment for depression can also improve your daily activities, make you more productive at work, and improve the time you spend with your family and friends. Treatment will also help foster more positive thinking that will eventually replace negative thoughts as you continue to improve.

Antidepressant medications work by increasing the amount of chemicals in the brain that regulate mood. The primary chemicals in the brain that regulate mood are serotonin, dopamine, and norepinephrine. There are several types of antidepressant medications that are effective in treating depression occurring along with cancer. Antidepressants generally take between 2-4 weeks to begin relieving symptoms of depression.

Selective Serotonin Reuptake Inhibitors (SSRIs)

- SSRIs allow the body to build up serotonin levels to improve mood.
- Types of SSRIs boost norepinephrine and serotonin

Serotonin Norepinephrine Reuptake Inhibitors (SNRIs)

- SNRIs boost norepinephrine and serotonin.
- Types of SNRIs include Effexor, Cymbalta

Serotonin Antagonist Reuptake Inhibitors (SARIs)

- SARIs also work by increasing levels of serotonin.
- Types of SARIs include Serzones and Desyrel

Tricyclics

- Tricyclics are the oldest type of antidepressant; thought to increase serotonin and norepinephrine.
- Types of tricyclics include: Elavil, Tofranil, Pamelor, Norpramin, Anafranil and others

Monamine Oxidase Inhibitors (MAOIs)

- MAOIs are rarely used in cancer because this type of drug often interacts with other drugs and foods.
- Types MAOIs include: Nardil and Parnate



Noradrenergic Specific Serotonergic Antidepressant (NaSSA)

- NaSSAs are new and show promise for treating depression, anxiety, and insomnia.
- One type of NaSSA is Remeron

Norepinephrine Dopamine Reuptake Inhibitors (NDRI)

- NDRIs are good option for people who do not respond to SSRIs, who experience side effects, or who are concerned about sexual problems.
- One type of NDRI is Wellbutrin

Stimulants

- In special cases, low doses of stimulants can be used to treat depression in cancer patients. These may be used when standard antidepressants produce side effects that are too difficult to tolerate.
- Can provide a sense of well-being, decrease fatigue, and increase appetite. Can be helpful in managing the sedating effect of opioids.
- Common drug names: methylphenidate (Ritalin), modafinal (Provigil), dextroamphetamine (Dexedrine)

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