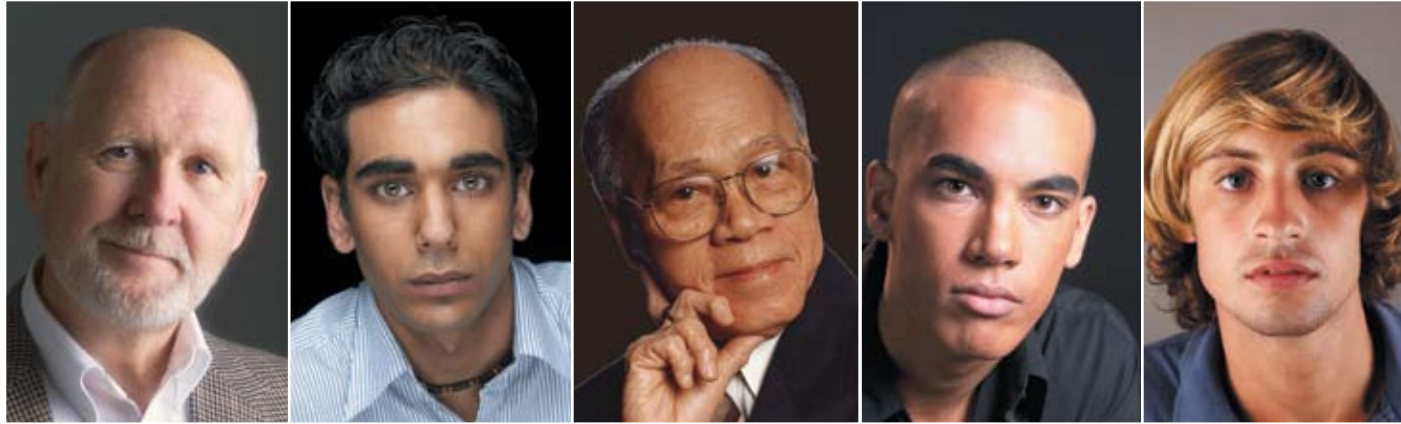


REAL MEN, REAL DEPRESSION



In spring 2003, the National Institute of Mental Health launched the first national public health education campaign designed to reach men with depression, entitled "Real Men, Real Depression." The campaign materials feature personal stories of men who live with depression: a firefighter, a national diving champion, a retired Air Force sergeant, a lawyer, a publisher and a college student. The primary message of the public service announcements and brochures is that it takes courage to ask for help, and that depression is treatable. The campaign aims to educate, reduce stigma and encourage men to seek treatment.

Psychological Services, University Health Services, University Housing, and Psychiatric Emergency Services (PES) in order to effectively reach the entire University community.

The U-M campaign featured a dedicated hotline staffed by PES; student consultation with PES; a dedicated U-M Mental Health web-site; an evaluation component; and perhaps most importantly, a U-M student featured in the campaign materials.

Materials were displayed in high-traffic areas such as athletic facilities, student unions and campus bus stops, and public service announcement ads were run on closed-circuit televisions in the residence halls. Students overwhelmingly agreed that the campaign was a valuable informational tool and that U-M's participation in the initiative sent a strong anti-stigma message.

For more information about the U-M campaign, please visit the Depression Center Web site, www.depressioncenter.org, or visit www.nimh.nih.gov for more information on the national campaign.

COULD YOU BE DEPRESSED?

If you think you may be suffering from depression, please visit the Depression Center's online screening program at <http://www.med.umich.edu/depression/screen.htm> and fill out the brief screening questionnaire. If the results indicate that you are at risk, seek help through a qualified mental health provider.

In February 2005, the Depression Center and its University of Michigan partners became the first university to specifically tailor the "Real Men, Real Depression" campaign to college students, and to implement the initiative on a college campus. This three-month outreach effort was a collaboration between the University of Michigan Division of Student Affairs, the Depression Center and the NIMH. Dr. Stephanie Pinder-Amaker, associate dean of students, also involved other key partners including students, Counseling and

VIEWPOINT ON DEPRESSION

ANDREW SOLOMON: A PERSONAL REFLECTION

Andrew Solomon is an author, mental health advocate and member of the Depression Center National Advisory Board. Mr. Solomon's book, "The Noonday Demon: An Atlas of Depression," won the 2001 National Book Award.

Depression is extremely stressful and keeping secrets is extremely taxing. Men who are depressed are likely to experience their depression in isolation, which escalates the complaint. Though the rate of depression is higher

for women than for men, the rate of suicide is higher for men than for women, and this is at least in part because men don't get the help and support they need. Destigmatizing male depression should be a top national priority.

I have been lucky to have my depressions while living in the accepting climate of New York with the forgiving job of being a writer; for many men, tolerance is elusive and the pressures of supporting a family are direly urgent. Even so, the depression

was an exercise in despair purer than I had ever known could exist, and I barely made it through. If I had sought help sooner, I would have made it through better. And perhaps if social attitudes changed, I and other men would be able to avoid, or at least better tolerate, some of this acute anguish.

DEPRESSION CENTER EVENTS

Please visit our Web site, www.depressioncenter.org, for information on ongoing family education and support groups, as well as the new *Bright Nights community forum series*, featuring panel discussions on a variety of topics related to depression.

SAVE THE DATE: March 21-22, 2006: Fourth Annual Depression on College Campuses Conference.

The University of Michigan Depression Center and the Michigan Center for Public Health Preparedness at the University of Michigan School of Public Health invite you to attend the 4th Annual Depression on College Campuses Conference, entitled "Depression on College Campuses: The University's Role in Responding to Crisis, Disaster and Loss." This conference is targeted to college counselors, health care professionals, administrators, faculty, staff, students, and concerned parents. For more information and registration forms, please visit www.depressioncenter.org, or contact Trish Meyer at (734) 763-7495 or meyerpa@umich.edu.



The new **Rachel Upjohn Building** will devote 54,000 square feet to research space. Specialty laboratories will include the Sleep and Chronophysiology Labs and the Depression Genetics Laboratory.

- The garden level of the new building will feature a state-of-the-art 2,500 square-foot auditorium with 120 seats, and three large conference rooms.

UNDERSTANDING MEN'S DEPRESSION

Did you know...



Common wisdom says that women become depressed twice as often as men. But research by University of Michigan psychiatrist and medical historian Laura Hirshbein, M.D., Ph.D., suggests that early depression research methods may have significantly overlooked men with depression. As Hirshbein explains, "Mid-20th-century efforts to describe depression excluded certain populations of patients, including alcoholics. Therefore, the research excluded from consideration a large number of men

who might have been depressed and self-medicating with alcohol."

While some debate which of the differences in depression among men and women are biological and which are cultural, most modern research illustrates that these are always interactive and should never be viewed as "either-or." Hirshbein's work on the history of depression suggests that social and cultural factors do shape how patients experience symptoms and to some extent how clinicians and families explain them.

SUBSCRIBE TO DEPRESSION CENTER UPDATE

You've received this newsletter because you elected to be added to our mailing list, or because you have been identified as someone interested in advances in the treatment and prevention of illnesses. If you want to be deleted from the mailing list, please contact Trish Meyer at meyerpa@umich.edu or call (734) 763-7495.

For More Information: Information about depression and bipolar disorder is available online. Please visit the University of Michigan Depression Center Web site at www.depressioncenter.org.

To Receive Future Issues: To be placed on the Depression Center's mailing list, call Trish Meyer at (734) 763-7495 or e-mail meyerpa@umich.edu.

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DEPRESSION CENTER

update

From the nation's first comprehensive depression center

WINTER 06

men & depression



"Depression remains the 'under' disease: under-diagnosed, under-discussed, and under-treated for everyone, but especially for men," says Dr. John Greden, executive director of the University of Michigan Depression Center. Men with depression often present with different clinical symptoms and a tendency to focus on physical rather than emotional ailments—for example, fatigue,

Depression is a medical illness, not a character flaw, and it is treatable.

physical pain and sleep problems. Thus, different screening and diagnostic strategies may be required for accurate diagnosis.

Researchers at the University of Michigan Depression Center Sleep and Chronophysiology Laboratory, directed by Dr. Roseanne Armitage, are conducting studies that may prove to have particular relevance to treating depression in men. One investigation examines gender differences in sleep regulation in childhood and adolescent depression.

Another study investigates sleep treatment for individuals undergoing treatment for alcohol abuse. The majority of those affected are men, many of whom are depressed but are attempting to mask their symptoms through self-medication with

alcohol or drugs. The Depression Center investigators have learned that the best outcomes result when both depression and alcohol abuse are treated at the same time.

"Regardless of gender, many with depression face a stigma barrier, but this is arguably even more of a struggle for men than women," continues Greden. To help combat stigma,

the Depression Center is developing a pilot program with retired professional athletes to provide support to those suffering from depression. This "Real Men, Real Depression" initiative conveys the message that depression is a medical illness, not a character flaw, and that it is treatable.

Depression does occur in men. It is important to find it early and not be misled by symptoms that commonly mask depression. The U-M Depression Center continues its efforts to ensure that depression and bipolar disorder in men does not remain under-diagnosed and under-treated.





WHAT IS THE DEPRESSION CENTER doing to help?

HOW CAN FAMILIES HELP?

As with virtually all illnesses, family support is critical to recovery. To help family members better understand and recognize depression, free resources are available at www.depressioncenter.org or at the FRIENDS Depression Center Resource Center at 2101 Commonwealth Ave. in Ann Arbor (this Resource Center will relocate to the Rachel Upjohn Building when it is completed).

SYMPTOMS OF DEPRESSION

IN MEN:

- Feeling angry, frustrated, or irritable
- **Working excessive hours**
- Physical aches and pains that won't go away
- Reckless behavior
- Abuse of alcohol or drugs



IN WOMEN:

- **Feeling sad, anxious or "empty"**
- Sleeping too little or too much
- Changes in weight or appetite
- Feeling helpless or hopeless
- Thoughts of death or suicide



HOW DEPRESSION AFFECTS MEN

HOW ARE YOU FEELING ?

POSSIBLE DEPRESSION TRIGGERS FOR MEN THROUGH THE LIFESPAN

- Adjustment to college or graduate school
- Loss of job, through layoff or retirement
- Ongoing health problems such as diabetes, cancer or heart disease
- Divorce
- "Mid-life Crisis"
- Death of friends or family members
- Excessive alcohol or drug use



Depression is a common brain disorder that affects one of every seven individuals in their lifetime. Depressive illnesses such as depression and bipolar disorder are caused by a combination of genetics, changes in the brain's stress response, different chemical messengers (neurotransmitters) and differences in the brain's circuitry patterns in response to life events. At least six million men in the United States suffer from a depressive episode every year.

Men and women share many standard symptoms of depression, such as sleep, appetite and pleasure disturbances, but men frequently experience depression differently than women. They may emphasize physical complaints, such as backaches. They may get discouraged, angry and irritable rather than helpless or hopeless. Instead of asking for help when depressed, men tend to turn to drugs or

At least six million men in the United States suffer from a depressive episode every year.

alcohol, or work excessively long hours. In addition, depressed men may not recognize that physical symptoms such as fatigue, digestive problems and aches and pains that won't go away can be symptoms of depression. Due in part to these factors, depression in men often goes undetected, with serious and tragic consequences: four times as many men as women die by suicide in the United States.

The positive news, however, is that depression is treatable, most often with medication, psychotherapy ("talk" therapy) or a combination of both. Even better news for those who have struggled with

repeat episodes is that it is possible to prevent recurrences for most.

For men, acknowledging they are depressed and asking for help may be the biggest hurdle. Men—and their families and friends—have to learn that depression is a brain disease and a common illness, just as pain in the chest may be secondary to a heart disease. **Depression is NOT a sign of weakness.** Family, friends and co-workers can help to recognize depressive symptoms in men, emphasize that depression is a medical illness and encourage them to seek appropriate treatment.



New Initiatives Targeting Men and Depression at U-M Depression Center

In our society, male athletes in particular have felt the burden of stigma associated with mental illness, and many tend to avoid seeking treatment. And due to the high-profile but short-term nature of their careers, many retired or injured players find themselves at particular risk for developing a depressive episode when they are no longer able to participate in their sport.

In response, the Depression Center is working on a pilot project with the retired player membership of the NFL Players Association (NFLPA), conducting research to identify the need for, and types of, educational and clinical programs most helpful to assist retired NFL players with depression and mental health concerns.

Depression Center staff members, including Associate Director Thomas L. Schwenk, M.D., Daniel Gorenflo, Ph.D. and Eric Hipple, retired Detroit Lions quarterback and Depression Center outreach coordinator (see box), have worked with Andre Collins, executive

DEPRESSION CENTER STAFF MAKING A DIFFERENCE

Eric Hipple is a former NFL quarterback whose ten-year career was spent entirely with the Detroit Lions, from 1980 to 1990. His accomplishments include two playoff bids and a divisional championship. Following his football career, Hipple enjoyed further success working in the auto industry and as a motivational speaker, and from 1995-2000 he hosted an NFL pre-game show in the Detroit market.



Former NFL quarterback Eric Hipple, above, in action with the Detroit Lions; and left, today. Hipple became an advocate for depression awareness after his son's suicide brought on his own bout with depression.

However, Hipple's life took a tragic turn in the year 2000, when his 15-year old son Jeff died by suicide. After struggling with depression himself in the aftermath of his son's death, Hipple decided to devote his energies to helping others to detect and treat depression, and to break down the stigma surrounding depressive illnesses. Now, Hipple is an outreach coordinator and spokesperson for the University of Michigan Depression Center, and has given more than fifty presentations to middle school, high school and college students, staff and faculty on the importance of early detection and prevention of depression. His primary message is one of hope: that depression is a treatable illness. "If I can make a difference in someone's life, then Jeff didn't die without a purpose" says Hipple.

director of the NFLPA, and members of the Detroit chapter of the NFLPA, to design a brief survey to assess the opinions and beliefs of retired players regarding their own stress responses and mental health issues, as well as their perception of the needs of other retired players.

The survey is currently 'in the field' with an excellent response rate of nearly 50 percent, and the Depression Center hopes to have preliminary results available for dissemination and discussion in February. These results will be critical to designing appropriate and helpful programs to address edu-

cation, awareness, early detection, stigma reduction and peer support around issues of depressive illnesses. Once these programs have been developed and tested with retired NFL players, they can then be modified for use with other groups where depression is currently under-detected and under-treated.