Depression: A Destructive Illness Changing The Lives Of Many People

Depression is a destructive illness changing the lives of many people around the world. Despite this, its validity is affected by the existing mark of shame associated within our communities.

Past and current research proves depression is both genetic and physical. The evidence presented within provides for only one possible result being made, namely, that depression is in fact, not an individual’s choice but an illness.

Depression is a very real illness. Due mostly to social pressure, and how people act toward each other, which are driving forces of behavior, it has become a significant, worldwide public crisis. Dealing with the way perception affects thoughts, attitudes, and behavior is extremely important to reducing the mark of shame in a person's decision to seek treatment for their mental health.

Despite the existence of known, effective treatment for depression, barriers to proper care are a key reason that this illness is 'a major contributor to the global burden of disease' (World Health Organization, 2017).

Even though there is the existence of the existence of known, effective treatment for depression, barriers to proper care are a key reason that this illness is 'a major contributor to the worldwide heavy load of disease' (World Health Organization, 2017). Social pressure, as well as both limited financial sources and trained health care providers are significant barriers to a person's willful decision to seek treatment as well as to an investment in research to find better treatments and/or cures, (Nature, 2013; World Health Organization, 2017). 'Mark of shame insinuates itself into access of care; health insurance; employment discrimination; policy decisions, and in allocation and priorities of research. Unfortunately, people who have mental illness also stigmatize themselves' (Jamison, 2008, p. 1)

This evidence supports my point, because, it identifies certain barriers that exist, which may prevent many people from receiving either proper treatment or any at all. The evidence will also describe the worldwide effect of said barriers.

The pathogenesis of emotional dysfunction is influenced by epigenetic mechanisms.

The pathogenesis of emotional behaviors is influenced by genetic changes. According to McCoy, Jackson, Day and Clinton, 'Weaknesses to mental illness is associated to severalfactors including inborn differences in personality and the inability to successfully deal with stress, which can be shaped through a combination of environmental and genetic influences' (2017, p.1). Gene expression and DNA methylation differences contribute to individual emotion regulation capabilities. Adult rat brain studies, performed by McCoy et al., 2017, examined the effect of molecular and epigenetic changes in an individual’s personality.

After breeding for both low response to novelty (having a high baseline for depression and anxiety) as well as for high response to novelty, results showed that rats with a low response to

novelty showed decreased brain levels of DNA methylation (McCoy et al., 2017).

This evidence supports my point because it validates the claim that depression is caused by epigenetic mechanisms which are a combination of both genes and the environment based on research done and published in peer-reviewed literature.

Depression is a serious, global illness that does not discriminate.

According to the World Health Organization (WHO), “worldwide there are more than 350 million people of all ages suffering from depression” (2017, p1).

The activities and responsibilities of everyday life are a huge challenge for those affected by this disease. As the worldwide “leading cause of disability” (Wilkinson et al., 2011) it is both impractical and unrealistic in many ways to add the stress of family; a career and/or higher education to the equation.

This evidence supports my point because it shows the prevalence and the impact, both individually and globally, of the illness.

Although depression is not a result of a chemical imbalance, no individual has control over getting it (Curtiss, 2001). Also, Curtiss (2001) wants everyone to believe that there is no genetic basis for depression, of which the cause can be attributed to “a natural part of pain” which can be controlled within an individual’s willpower and thought process changes.

In a personal life story, of her own experience with depression, A.B. Curtiss, an author, and certified thinking relating behaviorist, strongly defends that there is no genetic basis for depression (2001). Curtiss (2001) argues the result of a chemical imbalance in the brain. She instead describes depression as a “mind trick” and attributes the cause a natural part of pain, which can be controlled through individual willpower and changes in one’s thought processes (2001). Agreeing that positive thinking is a powerful tool, it is impossible to agree with her scientifically flawed philosophy of treating depression. For many years, evidence-based research clearly shows “depression is caused by both molecular and genetic abnormalities of the brain” (Johnson, 2007; Nature, 2014; Wilkinson et al., 2011). The claims made by the author are primarily biases and lack an objective scientific analysis. Taken from her own story, Curtiss (2001) describes her general attitude in regard to the etiology of depression as “our great-grandparents used willpower instead of Prozac and Zoloft. They valued conscience, commitment, courage, dedication, hard work, honesty, responsibility and sacrifice, while they practiced learning to bear suffering. These ideas were taught to adults when they were children, had been tested and revered for thousands of years. People trusted these ideas until the 1960’s when we threw then all away (P 248). Overlooking the existing evidence-based research during the time period in which A.B. Curtiss wrote and published her memoir demonstrates her clear lack of insight into the subject despite her credentials.

The most important points that I made in the responses above are:

- Depression is a disease caused by a combination of both genetic and environmental factors.
- In no way is depression a choice made by an individual.
- Depression is a serious, global illness that does not discriminate.

- Adult rat studies demonstrate the genetic basis of depression and effective treatment methods.
- Barriers to proper care are a key reason that depression is a major contributor to the global burden of disease.

Results of the adult rat studies referenced in the previous paragraph showed that when the rats with a low response to novelty were treated with dietary methyl, their depressive symptoms improved.

Will power and personal choice are not the answer for curing depression.

The implications of depression on an individual's life as a result of reckless misclassification are immense and frankly, unacceptable. Therefore, accurately understanding the etiology of depression is important for everyone and essential for both current and future physicians.

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