

## Can You Identify and Manage Depression in Your Teen?

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Much has changed in Pediatrics in the last 20 years. When I started my practice my patients were most likely to see me for well child care, vaccines and treatment of infections. Thanks to vaccinations there has been a significant decrease in infections particularly stomach viruses, otitis media, blood stream infections and pneumonia. However, in the same time frame, I have seen an alarming rise in emotional illness in children and teenagers.

In the United States each year, suicide claims the lives of about 5,000 teenagers. Suicide is the 3<sup>rd</sup> leading cause of death among high school teenagers and 2<sup>nd</sup> among college teenagers. It is estimated that 1 in 5 children will meet criteria for major depression during adolescents. While all of us feel sad or down from time to time, depression is quite different. Depression includes symptoms of ongoing sadness, hopelessness, and loss of interest in previously enjoyed activities for more than 2 weeks. Unfortunately, more commonly I see teenagers with months or even years of untreated depressive symptoms. Often teenagers come in who have withdrawn from life which may involve avoiding family and friends, school underachievement or failure, activity drop out and or substance abuse of illegal and/or prescription medication.

Why? As a group (generally), teenagers in this country have more materially and yet they are not happy. Over the last 20 years, educational expectations have grown and the abilities to tolerate adversity have fallen. There has been a rise in social media use, decrease in physical activity, and poor dietary and sleep habits. Related to these things, there is often a greater disconnect between teenagers and parents and teenagers and peers.

What should a parent do if he suspects depression? First, do not ignore your concern. Talk to your child, ask him about thoughts of hurting himself and ask him if he has ever hurt himself? If your child is threatening suicide or has a plan this is a medical emergency until proven otherwise. Even if your child is not suicidal get help as soon as possible your pediatrician or family doctor are good resources. Do not blame yourself, be embarrassed or think "but he has nothing to be depressed about." These thoughts are not helpful and will interfere with you getting the help your child needs to get better.

Next month, I will look at decreasing risk of developing depression by helping your child be resilient during difficult times.