

Occupational Therapy Toolkit

Depression

Risk Factors:

Stressful life events
Lack of a supportive social network
Having a chronic illness or condition
Certain medicines or combination of medicines - anticonvulsants, anti-inflammatory drugs, antibiotics, anti-Parkinsonian drugs, antipsychotic medications, cardiovascular medications, hormones, sedatives, anxiolytics, stimulants, and chemotherapy drugs
Living alone, social isolation
Recent bereavement
Presence of chronic or severe pain
Damage to body image (from amputation, cancer surgery, or heart attack)
Fear of death
Previous history of depression
Family history of major depressive disorder
Past suicide attempt(s)
Substance use or abuse
Poor eating habits (maybe a result of depression or due to B12 deficiency)
Lack of mobility

Clinical Manifestations:

Depressed mood most of the time
Unplanned and significant increase or decrease in weight
Sleeping too much or too little
Psychomotor agitation or retardation
Decreased interest and enjoyment of pleasurable activities one previously enjoyed
Fatigue, loss of energy
Impaired motivation
Lack of future orientation
Decline in personal hygiene
Feelings of guilt and worthlessness
Inability to concentrate or focus
Recurrent thoughts of death or suicide

Treatment:

Antidepressant medication, psychotherapy, Electroconvulsive Therapy (ECT)

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Specific Assessment:

1. Screening for Depression
 1. During the past month, have you often been bothered by feeling down, depressed or hopeless?
 2. During the past month, have you often had little interest or pleasure in doing things?If the patient answers “yes” to one or both of the questions, screen for suicide risk

2. Screening for Suicide Risk
 3. Have these symptoms or feelings that we’ve been talking about led you to think that you might be better off dead?
 4. This past week, have you had any thoughts that life is not worth living or that you’d be better off dead?
 5. Have you had any thoughts about hurting yourself or even killing yourself?If yes to any of these questions, then follow your agency/facilities “suicide protocol”

3. Center for Epidemiologic Studies Depression Scale (CES-D), NIMH
www.chcr.brown.edu

4. Geriatric Depression Scale www.stanford.edu

Occupational Therapy Intervention:

Therapeutic Use of Self

- Develop a trusting relationship
- Be fully present and engaged
- Listen to and not dismiss their experience of suffering
- Provide extrinsic motivation and verbal reinforcement
- Address and challenge cognitive distortions, such as catastrophizing
- Provide opportunities to succeed

ADL, IADL, work and leisure training including but not limited to...

Treat underlying physical limitations to safety and independence

Assess ability to access kitchen and prepare meals

Encourage patient to get dressed everyday

Reinforce medication management. Assist patient in developing a system to remember antidepressant medications (pill box, telephone reminders, lists, pictures)

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Functional mobility training

Treat underlying physical limitations to safety and independence

Assist in setting and following a realistic daily schedule, balancing self-care, work and leisure

Encourage involvement in social groups and meaningful activities

Provide UE therapeutic exercises and activities

Encourage use of full spectrum bulbs, spending time near a sunny window or outdoor.

Assist in developing self-management skills (effective communication, positive coping strategies, stress reduction, physical activity and exercise, medication management, healthy eating, and making informed decisions about medical and alternative treatments)

Educate patient and caregivers about depression, the availability of community resources and encourage participation in support groups.

Patient Education:

1. Upper Body Strengthening and Stretching Exercises
2. Stress Management and Relaxation Techniques