Recognizing and Combating Asthma-Related Depression

by ERIC PATTERSON

Managing Asthma-Related Depression

When you think of chronic medical conditions, what illnesses do you picture? Multiple sclerosis, dementia, osteoporosis and COPD are typical responses. The public generally perceives these diseases as serious and long-term. Additionally, the treatment seems intensive and somewhat risky while success is never assured. These qualities all fit the criteria for a chronic medical condition.

What about asthma? Outside observers might consider asthma to be a condition confined to childhood triggered only by allergens floating around the air. The common conception is that people “grow out” of asthma by adulthood so the notion that asthma is chronic could be difficult to accept. People with the diagnosis know differently, though.

Asthma fits into the category of chronic medical conditions for the same reasons the others do. Asthma is problematic, dangerous, long-lasting and treatment has its limitations. Because asthma is chronic, it carries the same burden as other illnesses in terms of pervasive stress and the menace of mental illness.

Asthma/Depression VS. Depression/Asthma

A very real risk for people with asthma, like people with other chronic medical conditions, is depression. There is much debate regarding which comes first: the asthma or the depression. The answer is that asthma can make depression worse and that depression can make asthma worse. You also know that having both is much worse than having either alone. Because of this, understanding the interaction between asthma and depression is an important step to improving your well-being.

Asthma Worsens Depression:

- **Asthma can trigger depression due to the restricting nature of the disease.** With asthma, you need to know and avoid your triggers. What if your triggers are all of the things you enjoy? Do you like going for walks? Asthma will flare if the pollen is high. Do you like eating out at restaurants with your friends? Sorry. The mix of scents will trigger high symptoms. People with asthma can often feel trapped inside their comfort zone while opportunities for fun pass by them. The more severe your symptoms, the more restricted your behaviors become. This allows depression to surge, as it would make anyone feel more isolated and pessimistic.

- **Asthma can trigger depression due to its treatment.** There is a growing base of research linking steroids like prednisone to depression with long-term use. If your asthma is prednisone-dependent there are greater risks involved. You may be saying that people with prednisone-dependent asthma have severe symptoms and severe symptoms lead to worse symptoms of depression. Opponents to this thought say that it is not the treatment it is only the asthma. This makes sense, but there have been studies comparing people with severe, prednisone-dependent asthma to severe, nonprednisone-

dependent asthma. The studies found that group dependent on the steroid had three times higher reports of depression than the nondependent group. No one can say that prednisone *causes* depression, but there is a link with long-term use.

Depression worsens asthma:

- **Depression makes asthma worse through poorer recognition of symptoms.** Being able to address problems before they gather momentum is crucial for any illness. Depression works to move focus from areas that are controllable to areas that are not. Rather than monitor your symptoms, depression encourages you to dwell on the time that you were mistreated by your boss or makes you feel guilty about the time that you lied to your friend. When you become consumed by the world inside your mind, you miss out on current world around you.
- **Depression makes asthma worse through poorer treatment follow-through.** Behaviorally, depression limits your energy and interest in doing things, especially the activities that are most beneficial for you. People with depression often miss doctor's appointments, follow-up testing and other essential pieces of care. Additionally, you may find it challenging to complete your at-home care with depression because you only feel comfortable zoned-out on the couch. The final component is that depression constantly wants you feeling more depressed. If depression can convince you that your treatment is not working and that there is no reason to follow-through than asthma will get worse. Subsequently, depression will get even bigger, stronger and more pervasive. Depression wins as you lose.

Next page: asthma and depression interventions.

Asthma/Depression Interventions

Now that you know why your symptoms are present, what are you going to do about them? Hopefully, you see the need to fight back against your symptoms rather than lying down and accepting your current state. In life, you cannot change much, but you can always change yourself. Here's how:

- **Monitor**. Self-monitoring is one of the most important skills you can develop. Self-monitoring means that you have the ability to understand yourself, your thoughts, your feelings and your triggers. If you cannot grasp what makes your depression flare, what triggers your asthma or what your feelings are in a given situation, you will have a much poorer prognosis. Self-monitoring is easy once you begin to note the value in it. To begin, check-in with yourself periodically throughout the day. Ask yourself about yourself. How are you feeling? What are your thinking about? How are your symptoms? The more you do it, the better you will become? The only piece of caution is that depression can skew your perceptions so be sure to take level of depression into account. You may need to grade yourself on a curve.

- **Educate**. Did you know about the link between depression and prednisone? Did you know that depression can worsen asthma symptoms? Just because you have a chronic medical condition, or two, does not mean that you automatically become an expert in the field. Expertise is acquired through education as well as experience. No one can take away your experience so it is time to add the education. Consult with your doctor to learn more about your symptoms and conditions. Talk to others with asthma for more firsthand experiences and delve into literature from the best sources online and in print for the medical point of view. Education will limit depression by making asthma seem less overwhelming and less powerful. It will also improve self-monitoring since you will know what to look for.
- **Relax**. Having a clear, calm mind is a fantastic way to fight depression. A clear mind allows you the opportunity to add more positive thoughts while denouncing the irrationally negative ones. Having a calm body puts yourself in a better situation to prevent and treat asthma when attacks occur. How relaxed are you right now? Your education has illustrated that stress makes both depression and asthma worse. Relaxation comes in many shapes and forms from spending time with friends to yoga to specific relaxation techniques learned in psychotherapy. Good options exist for those who seek them out and stick with it.

- **Treat**. Speaking of psychotherapy, counseling is a great option for someone with depression and asthma.

A therapist can assist with the above tasks while providing so much more. Consider the comparison between type-2 diabetes and asthma. Both are chronic medical conditions that require close monitoring and treatment. Both are highly associated with mental health issues like depression and anxiety. Recent studies show that therapy, especially cognitive-behavioral therapy, is effective in improving diabetes symptom management while reducing mental health symptoms. A therapist can help you by teaching you how to help yourself. If you aren't already in therapy, consider it. If you are in therapy, work with your therapist to restructure your sessions making asthma more of a focus.

- **Maintain**. With any chronic medical condition, becoming discouraged is a significant threat. You may feel like your best efforts are going unrewarded and nothing will ever improve. This sounds like depression talking. Symptoms can and do improve regularly. Stay the course to get the results you are seeking. They may not come as quickly as you envisioned, but the lasting results need more time to take root. Flowers spring from the ground a few days after the seed was planted but die by fall. Trees take weeks to break through but the product lasts a lifetime. Maintaining your plan will foster a tree.

Conclusion

Discounting the impact of your asthma on your mood could be a huge mistake. Rethink the way you see your symptoms and your mental health. If there is room for improvement, take it. You may not know how good life can be. Controlling asthma and depression can help you breathe a little easier.