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Illness or personality issue?

By Douglas Berger, M.D., Ph.D. on December 27, 2010

Pin It

QUESTION

My spouse has been told she has a depression but she is reluctant to engage in therapy or take medication. Can you help me understand the reasons for this and what to do about it?

ANSWER

This is a common issue seen in psychiatric practice which may have a number of reasons behind it. First, let me say here that an illness of depression means the person has a number of symptoms for at least a number of weeks (not just a passing reaction to stress) that are physical in nature, like low or irritable mood and decreased ability to enjoy things, increase or decrease in sleep or appetite, low concentration or energy, etc. This differentiates an illness from personality problems that are more interpersonal in nature as opposed to having physical symptoms. Common personality problems include the desire to be the center of attention, always trying to control people, being overly dependent on others. etc.

Here are some reasons the diagnosis of clinical depression may be difficult to accept:

1. It is difficult to accept the personal weakness of having a "mental illness" in the face of an already weakened selfesteem due to the depression itself.

2. Persons with depression often have had low moods for a long time and "re-calibrate" themselves to think it is normal to feel low or that everyone feels low in spite of that not being the case. 3. Persons with depression are often stoic and stubbornly insist that they can fight their low moods themselves in

spite of living with depression for a long time, and often have a rejection reaction to being controlled or told something by others.

4. Depression is often triggered by a stressful life event in persons vulnerable to depression. While most persons with the same stressors would be upset or aggravated but not in an illness of depression, depressed persons conclude that "it's natural to be depressed in this situation".

5. The thought of having to take medication may be a symbol of being ill, may be overly feared, or may be rejected to avoid feeling controlled.

If the therapist can pinpoint the possible reasons with the person who has at least some serious desire to get better, it may be possible to work with the person to accept treatment. At the end of the day, however, unless the ill person in question is an immediate danger to self or others, everyone is

free to refuse treatment and this human right must be respected. If a person is only mildly ill, it is possible they will be more amenable to accept therapy if they get worse. For now I would try to accompany her to see a psychiatrist.

Doug Berger, M.D., Ph.D

The Meguro Counseling Center provides mental health care for individuals, couples, and families, in both English and Japanese.

www.megurocounseling.com

The discussions herein are meant as general information and advice only. Each person needs to make their own personal life decisions and to contact a mental health professional for consultation if deemed appropriate. If you have a question to ask the expert, send it to: info@tokyofamilies.net

Ask the Expert





About Douglas Berger, M.D., Ph.D.

Dr. Douglas Berger and his staff at the Meguro Counseling Center in the Shibuya-Ebisu area provide mental health care for individuals, couples, and families, in both English and Japanese. www.megurocounseling.com

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