

# DEPRESSION AS A SECONDARY DISEASE

Today we are speaking with Dr. Agnieszka Remlinger-Molenda about depression that accompanies neurodegenerative diseases.

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## **What are neurodegenerative diseases?**

Agnieszka Remlinger-Molenda: This term is used to describe a set of diseases that damage neurons in the human brain. Neurons are the building blocks of the nervous system, which consists of brain and spinal cord. They usually do not have the ability to regenerate and interchange, so they cannot be replaced by others if they are damaged or dead. This leads to neurodegeneration, i.e. destruction of these areas of the brain.

## **It means that such diseases are incurable.**

Yes, they are incurable and lead to a gradual degeneration and / or death of nerve cells and they very much weaken the body. The result of all that is declining mental ability (dementia occurs) or mobility problems (called ataxia).

## **Which neurodegenerative diseases are most common?**

Alzheimer's disease (a new case of this disease is diagnosed somewhere in the world every 4 seconds) and other types of dementia, Parkinson's disease along with other disorders associated with it, multiple sclerosis, amyotrophic lateral sclerosis, Huntington's disease (otherwise known as chorea), spinocerebellar ataxia, spinal muscular atrophy or prion disease (the so-called mad cow disease). Very often, these illnesses are accompanied by depression.

## **Does depression accelerate the development of neurodegenerative disease?**

The human body is a whole. Disorders or dysfunctions of one of the organs or systems lead to deregulation of others. Two diseases occurring at the same time always cause mutual deterioration, so it is worth treating depression, because then the course of the other disease will be milder.

**What is the cause of depression? Does it just as frequently affect other groups of patients?**

Due to a chronic, incurable disease and the restrictions resulting from it, psychological factors explaining the appearance of depression occur in patients. Remember that long-term stress which accompanies chronic illness, may be one of the causes of depression. Epidemiological studies indicate a more frequent occurrence of depression in the course of neurodegenerative diseases in comparison to its prevalence in the general population.

**Does depression always appear with these illnesses? Is the opposite situation possible - the patient first has depression, and later develops a neurodegenerative disease?**

In people who are mentally strong, resistant to stress - depression may not occur. Its occurrence in the course of neurodegenerative diseases is predisposed by personality traits. Sometimes the depressive picture of the patient develops into a neurodegenerative disease, other times it is the opposite - first such disease occurs and then depressive symptoms appear in its course.

**Is it more difficult to manage patients with depression?**

Of course - the treatment must take into account potential drug interactions. In addition, depression in patients with chronic diseases causes an additional aggravation of the underlying disease, frequently discourages the patient and deteriorates cooperation. It is worth mentioning that often, also the family of the patient needs help. Sometimes a support group is enough, another time co-treatment is needed. These are very difficult situations. The chronic stress, that I have already mentioned, also affects families of chronic patients.

**I think we all met someone suffering from depression. Can we discretely help them somehow?**

Some of the symptoms of depression are noticeable to the environment: lowered mood or sadness, presented verbally (you can hear it in the tone of voice) or non-verbally (facial expressions, attitude), problems with concentration and memory, in professional life - frequent mistakes, being late to work (resulting from sleep disorders). Irritability, bad-temperedness or psychomotor anxiety can also be a variation of depressive mood. We should try to convince this person to consult a specialist.

**Recently, more and more people are worried about memory problems. Does memory disorder always turn out to be caused by Alzheimer's disease or other neurological diseases leading to dementia, or can it be the result of depression?**

Each depression is accompanied by disorders of cognitive functions, i.e. memory, concentration and visual-spatial coordination. They may suggest dementia. A medical specialist during a detailed examination of patient's mental state, is able to exclude neurodegenerative diseases and apply appropriate treatment. What is important is that cognitive disorders in the course of depression disappear after treatment, because they are reversible. I therefore encourage to contact a neurologist, neuropsychologist or psychiatrist - sometimes it is necessary to contact several cooperating specialists who have the appropriate knowledge and tools to assess the patient's condition and apply appropriate therapies.

### **More and more often we hear about clinical trials concerning new drugs. Are there studies in the field of depression and neurodegenerative diseases?**

Depression is not a homogenous disease - there are numerous clinical trials on its types, as well as on new chemical molecules (drugs) with different, than previously known, mechanisms of action. The same applies to research on medicines for chronic autoimmune diseases and neurodegenerative diseases. In some cases, new drugs are being tested; in others, studies involve modification of doses of previously used preparations. It should be emphasized that participation in clinical trials is subject to many criteria, the most important of which is patient safety. It is free of charge.

### **Is it worth joining the study? And what can you gain by participating in such research?**

I think that it is definitely worth considering. First, you must dispel all doubts and become familiar with all aspects of participation. The decision about joining a clinical trial is made by the patient. It must be informed and autonomous. What can you gain? Sometimes, in some cases, participation in such study is the only available form of treatment.

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