

a series of fact sheets written  
by experts in the field of liver  
disease

## *Side Effect Management: Depression*

Lucinda K. Porter, RN

**IN HCV TREATMENT CLINICAL TRIALS,** 20% to 30% of patients reported depression as a side effect of treatment medications. Some health care professionals believe that this percentage is significantly higher. The range of depression may be from mild to severe. In clinical trials, 1% to 2% patients reported suicidal thoughts or attempts; 2% stopped treatment prematurely because of depression. The purpose of this fact sheet is to help those with HCV understand various aspects of depression in order to discuss them with their healthcare providers. Depression responds to medical treatment and support, especially with early intervention.

According to the National Institutes of Health Consensus statement on HCV infection, successful HCV treatment relies on staying on the prescribed dose of medications for the prescribed period of time. Side effects that disturb quality of life can interfere with this, so it is important to manage side effects early, aggressively, and appropriately.

If you are considering treatment, tell your physician if you have a current or past history of depression or psychiatric illness. It is especially important to report severe depression, hospitalization for any psychiatric illness, or any suicide attempts.

***Important Note: Interferon may cause or aggravate life-threatening neuropsychiatric disorders.***

### *Deciding Whether or Not to Use Antidepressant Medications*

Sometimes antidepressant medications can be used in conjunction with HCV treatment. Many patients state that antidepressants can make a huge difference in their quality of life while they are undergoing HCV treatment. Depression is not a

side effect that is immediately experienced. Often patients do not notice depression until 4 to 12 weeks, or even longer, into treatment. Additionally, it may take antidepressant medications as much as 2 to 8 weeks to become fully effective. It is for these reasons that patients need to decide if they should start antidepressant medication prior to treatment or start HCV treatment and then begin antidepressant medication if they think they need it. Since antidepressant medications can help with other medical complaints, such as fatigue, pain and insomnia, some doctors routinely start patients on antidepressant medications prior to initiating HCV treatment. Talk to your doctor about what would be best for your situation.

### *Symptoms of Depression*

The symptoms of HCV treatment-induced depression are similar to those seen in regular depression. Some symptoms of depression are: feeling sad, “down,” or “blue,” fatigue, irritability, mood swings, feeling apathetic or “empty”, inability to concentrate, change in appetite, and thoughts of self-harm or suicide. Patients with a history of depression may experience interferon-induced depression differently than they had in the past. For instance, a patient who previously felt withdrawn when depressed might experience feelings of anger and irritability during treatment.

***Important Note: If you have thoughts of suicide or hurting yourself or others, seek immediate professional help.***

### *Help for Depression*

If you notice any fatigue or mood changes, such as irritability, lack of pleasure, or signs of depression, talk to your doctor. Antidepressant medications are commonly prescribed to treat depression. These medications can dramatically improve the quality of life during treatment. Since it does take time for antidepressant medications to take effect, do not expect immediate results. Typically, antidepressant medications must be taken regularly for two to eight weeks before their full effect is felt, but some people notice improvement sooner.

When it becomes time to stop taking antidepressant medications, patients need slow tapering off while under medical supervision. Some patients wait a month or more after they have completed HCV treatment before they feel they are ready to stop taking antidepressants.

***Important Note: Never stop a medication without talking to your doctor.***

## *Side Effects of Antidepressant Medications*

There are many different types of antidepressant medications. Antidepressants can cause side effects that are usually mild. However, some side effects can be serious. Tell your medical provider about any side effects that are unusual, annoying or affect your activities. Common side effects of antidepressants may include: drowsiness, headaches, nausea, feeling agitated or jittery, and sexual problems. Sometimes a drug's side effects can actually work in a positive way. For instance, if you have insomnia, this may be improved by an antidepressant that is slightly sedating.

***Important Note: Those taking HCV or HIV protease inhibitors should avoid St. John's wort.***

All medications can cause allergic reactions. Tell your doctor about any allergies you might have. Antidepressants can also interact with certain drugs or other conditions. Inform your doctor about any over-the-counter or prescription medications, recreational drugs, or dietary supplements you are using, since these may affect how the antidepressant works. Finally, notify your doctor if you experience any unusual or worsening symptoms.

## *Self-Help*

The mind and the body are not separate or independent from each other. Your body affects your mind and your mind affects your body. Stress can weaken the immune system and make it harder to resist diseases. Feeling unwell can lead to increased fatigue and more depression. Breaking the cycle of depression may include a mind-body approach. There are ways you can help yourself during this time. The following suggestions may enhance your quality of life, but are not intended to replace medical care:

### **Support:**

Look for a support group, either for HCV or depression. Ask your family and friends for support. Avoid isolation.

### **Avoid or reduce stress:**

There are many types of stress management techniques. Yoga, meditation, and stress management classes are a few examples. Some employers, HMOs, and adult education services offer stress management classes.

### **Exercise:**

Try to be physically active a little bit every day. Even if you do not like to exercise, find a way to move your body. Walking, gardening, and dancing can be enjoyable ways to be active.

### **Sleep:**

Get at least 8 hours of sleep every night. Talk to your doctor if you have regular insomnia or other sleep problems.

### **Avoid alcohol and other substances:**

Alcohol, tobacco, excess caffeine and recreational drugs can cause or worsen depression and anxiety. Alcohol is a depressant and is incompatible with HCV. Tobacco and caffeine are stimulants and can cause increased anxiety.

### **Eat a healthy diet:**

Try to eat a low fat, high fiber diet. Eat a variety of foods that include fruit, vegetables, and whole grains.

### **Balance rest and activity:**

Schedule a daily rest period. Pace yourself, take breaks, plan ahead, and delegate.

### **Practice positive thinking:**

Listen to your internal thoughts. Try to replace negative thoughts with messages of hope and affirmation. Practice positive thinking even if you do not believe it. Over time, positive thinking can become a habit, and can help improve many aspects of your health.

### **Find ways to laugh and amuse yourself:**

Try to pick at least one pleasurable activity and find the time to do it often. Laughter may not be "the best medicine," but it sure helps.

Remember that HCV treatment is not forever. It will end and so will the side effects. Be as patient as you can, get support and simplify your life. Regardless of the final treatment outcome, you have the right to feel good about having endured the process. Trying your best is enough to claim a triumph.

***For more ideas on ways to manage depression, see the following hcspFACTsheets:***

- *Depression: Self-Help Tips*
- *HCV and Depression*
- *HCV Treatment and Depression: For Family and Friends*
- *Medical Treatment for Depression*
- *Mental Health: Depression*
- *Mental Health and HCV: Managing Depression*
- *Mental Health and HCV: Resources*

## *Mental Health Resources*

### **American Association of Suicidology**

[www.suicidology.org](http://www.suicidology.org)  
(800) 273-TALK (8255)

### **Canadian Mental Health Association**

[www.cmha.ca](http://www.cmha.ca)  
(613) 745-7750

### **Centre for Suicide Prevention (Canada)**

[www.suicideinfo.ca](http://www.suicideinfo.ca)  
(403) 245-3900

### **Depression and Bipolar Support Alliance (DBSA)**

[www.dbsalliance.org](http://www.dbsalliance.org)  
(800) 826-3632

### **Dr. Ivan's Depression Central**

[www.psycom.net/depression.central.html](http://www.psycom.net/depression.central.html)

### **Freedom from Fear**

[www.freedomfromfear.com](http://www.freedomfromfear.com)  
**(718) 351-1717**

### **The International Foundation for Research and Education on Depression (iFred)**

[www.ifred.org/](http://www.ifred.org/)  
(800) 784-2433  
En Espanol (877) 784-2432

### **Mental Health America**

[www.mentalhealthamerica.net](http://www.mentalhealthamerica.net)

### **National Alliance for the Mentally Ill (NAMI)**

[www.nami.org](http://www.nami.org)  
(800) 950-NAMI (6264)

### **National Institute of Mental Health**

[www.nimh.nih.gov](http://www.nimh.nih.gov)  
(301) 443-4513  
Toll Free: (866) 227 NIMH (6464) or (866) 615-6464

### **National Institute of Mental Health: Depression**

[www.nimh.nih.gov/publicat/depression.cfm](http://www.nimh.nih.gov/publicat/depression.cfm)

### **National Suicide Prevention Lifeline**

(800) SUICIDE or (800) 784-2433

### **Screening for Mental Health, INC.**

[www.mentalhealthscreening.org](http://www.mentalhealthscreening.org)

### **Suicide Awareness Voices of Education (SAVE)**

[www.save.org](http://www.save.org)  
Emergency Hotline: (800) 273-TALK (8255)

## **Substance Abuse and Mental Health Services Administration (SAMHSA)**

[www.samhsa.gov](http://www.samhsa.gov)  
(800) 789-2647  
To order publications: (877) SAMHSA-7  
or (877) 726-4727

*Disclaimer: The diagnosis and treatment of psychiatric and other medical disorders requires a trained medical professional. Information contained in this article is intended for educational purposes only. It should NOT be used as a substitute for professional diagnosis and treatment of any mental/psychiatric disorders. Please consult a medical professional if the information here leads you to believe you or someone you know may have a psychiatric or other medical illness.*

*Portions of this FactSheet are excerpts written by Lucinda Porter, RN and Eric Dieperink, MD which appeared in Coping with Depression and Hepatitis C published by the Hepatitis C Support Project. Permission to use granted by the authors.*

**For more information about hepatitis C, hepatitis B and HCV coinfections, please visit [www.hcvadvocate.org](http://www.hcvadvocate.org).**

## • *hcspFACTsheet* •

A publication of the Hepatitis C Support Project

### **Executive Director**

**Editor-in-Chief, HCSP Publications**  
Alan Franciscus

### **Design**

Paula Fener

### **Production**

C.D. Mazoff, PhD

### **Contact information:**

Hepatitis C Support Project  
PO Box 427037  
San Francisco, CA 94142-7037  
[alanfranciscus@hcvadvocate.org](mailto:alanfranciscus@hcvadvocate.org)

The information in this fact sheet is designed to help you understand and manage HCV and is not intended as medical advice. All persons with HCV should consult a medical practitioner for diagnosis and treatment of HCV.

This information is provided by the Hepatitis C Support Project • a nonprofit organization for HCV education, support and advocacy • © 2011 Hepatitis C Support Project • Reprint permission is granted and encouraged with credit to the Hepatitis C Support Project.



**HCV ADVOCATE**  
[www.hbvadvocate.org](http://www.hbvadvocate.org)