

A 16-year-old girl with depression

Commentary by:

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A woman brings in her teenage daughter for evaluation. For two months the girl has been quiet, without energy and having trouble with her schoolwork. Could she be depressed?

Case scenario

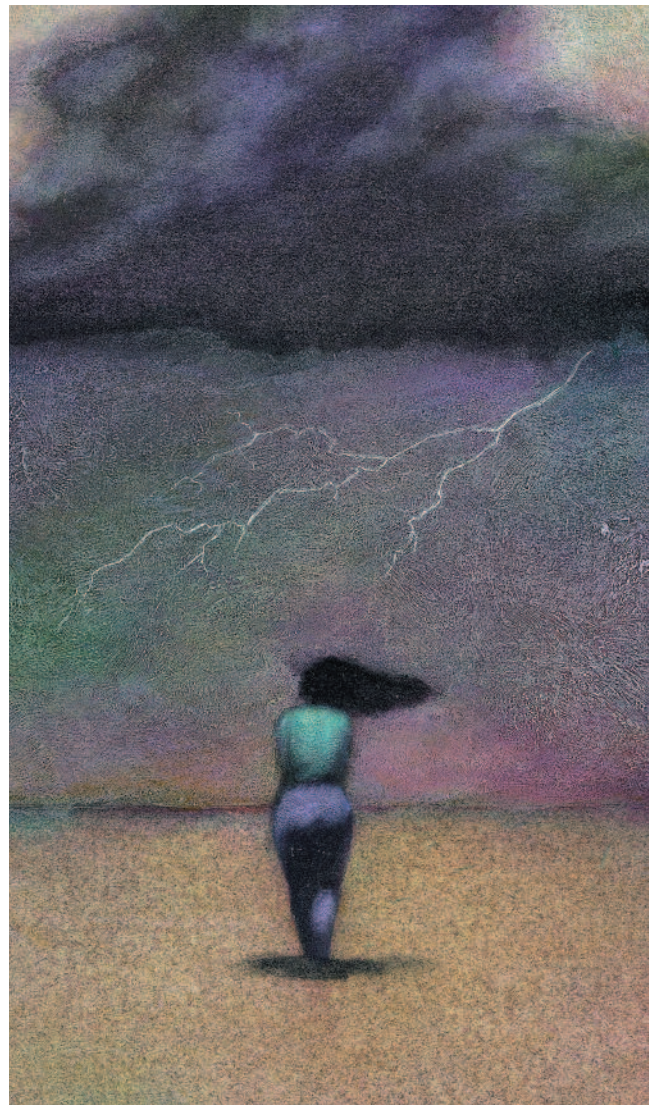
I have asked my patient Mrs Smith to take her 16-year-old daughter to see a psychiatrist. For two months the girl has been quiet, without energy and having an unusual amount of difficulty with her schoolwork. There are no significant problems in her family. I can find no physical cause and I wonder if she is depressed.

Commentary

This is a wise referral, for two reasons. The first is that depression is a common disorder and it quite often makes its first appearance in adolescence. Not only is it common and disabling, it is potentially dangerous. Although the suicide rate for males has quadrupled in the last 30 years, there has been no change in the female rate. Nevertheless, the highest number of deaths from suicide for both sexes is in the 23 to 24 year age group.

Putting aside the risk of suicide, depression appearing in adolescence has a tendency to recur, or to persist as a chronic dysphoria. Importantly, it is often missed, leading to years of life lived in inefficient drudgery.

The second reason for the referral being a wise one is that more often than not the mothers of depressed children are themselves depressed. In one recent study of 117 mothers bringing their offspring for evaluation, 36 (31%) of the mothers had a current psychiatric disorder.¹ Sixteen (14%) had major depression, 20 (17%) had panic disorder, and the same number had generalised anxiety disorder. Twenty-six (22%) of the mothers had suicidal ideation or intent. Only five of the 16



mothers with major depression were receiving any psychiatric treatment.

While we cannot assume that the results of surveying one population can be applied to all populations, the message is clear. Depression is common, commonly missed, and often not treated adequately when it is recognised. Since there is a strong genetic predisposition, its presence in one member of a family should lead to careful scrutiny of the others.

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Reference

1. Ferro T, Verdele H, Pierre F, Weissman MM. Screening for depression in mothers bringing their offspring for evaluation or treatment of depression. *Am J Psychiatry* 2000; 157: 375-379.

Dr Ellard is the Editor of Medicine Today.