

Depression A Holistic Consideration

There is no real way to tie down depression to one singular element. At one time or another most of us are going to find ourselves depressed about something. Sometimes it is an associative response to our environment. I know that when I see an area that is economically and physically depressed, I get a depression that almost seems palpable, that harkens back to certain associations from my childhood. Still there is much to be said about our physical state that would make a reaction of being depressed more predictable and understandable.

The person you are

In Chinese medicine, we find that people have a proclivity to certain behavioral tendencies that would represent a picture of their mind-body selves. For instance, if a person has SAD or Seasonal Affective Disorder during the winter it is quite likely that they have some kind of kidney deficiency. If a person is always looking regretfully at the lost past, grieving over the change, this has a lot to do with the lung. If a person is just over concerned about everything and taking too much on to care about, then this person would be a Stomach or Spleen type. If a person has to take charge of every situation and has an almost angry compulsion to get a lot of things done, then this person is largely controlled by the Liver. Of course the Heart has a lot to do with all our joys and sorrows in general and has a lot to do with conditions becoming manic.

Few people are strictly one type or another, and the explanations are not ever as cut and dried as in the preceding paragraph tries to make it, but the main point to be stressed here is that this emotional tendency is echoed in your physical being. I have written extensively about pains in the body and its relationship to the affliction of organ systems. It is important to also know that emotions of anger, fear, worry, grief etc. are not divorced from our physical being as well.

What is Depression?

I'm sure that if we were to try to tie down this nebulous concept with even a thousand adjectives it would not quite fit the bill for anyone. While the term depression, being a down state in medical literature, is just thought to be understood; a plethora of types of depression exists. For instance, *Bipolar* or *Manic* Depression would be a type of depression that is down and then suddenly completely up and possibly violent. Being in some state of funk when life is going badly is fairly normal for any one of us. What most people think of commonly with depression, is the dysfunction of this fairly persistent down state regardless of the rest of your life possibly being pretty good.

When little children moan and cry and throw fits we look immediately at factors such as diet: "Have they eaten?" or "That chocolate he ate at lunch did this!" and we always assume that they are tired or need a nap. When we get older, these physiological factors get more complex, but the resultant emotional changes can be similar.

What kind of chronic cases are there?

One of the most common types of depression involves the Liver and Kidneys. In the circulation of energy, the Liver gets its energy from the Kidneys. While I mentioned before that the kidneys can become taxed in the winter, the Liver can be taxed by the spring. A very tough emotional time through these seasons or just factors like poor diet or overwork can contribute to these deficiencies as well.

The sufficiency of both of these energies has a lot to do with our will. When these energies are strong we can assume authority for lots of difficult tasks and get them done. When they are deficient, for whatever purpose, emotional or physical, we can lose that will. If we are by nature a Liverish type, then this will becomes unrequited and we become disparaged or depressed.

I have seen many such depressions begin with a post-partum mother who has not recovered from the ardor of difficult childbirth, but is also not able to meet her high expectation of accomplishment in the family, home or workplace. In any case this is the person that is suddenly rendered incapable of doing what their mind tells them they must and can be made miserable by the vision of a former self now lost.

A Spleen or Stomach type will typically take on a lot. They think about everything and everyone and a lot of this is involved with worry. When things start to surmount them it is usually that their list gets too long and their vector of concern grows too large and they become defeated and overwhelmed. In this regard they are physically sick and part of their downhill slide involves the physical debasement of the digestive system in the interim. Many of these types of people can also fall into anxiety or panic attacks as once a thought gets going it becomes hard to stop and overwhelms them as it clouds their minds and perceptions.

Kidney deficient types get low and depressed in the winter as a matter of course as the winter taxes the kidneys generally. Moreover, the mark of a kidney deficient person is that they are subject to fears. They can be

shocked easily, and in a low grade constant sort of way fears can overwhelm them and make them closed in by a world that is always asking them to try new things. This is overwhelming to their lack of sense of adventure. This person can be often caught irrationally using the word *can't* to the frustration of others who try to get them to do something challenging or unfamiliar. This leads to a closed-in sense of retreat from life that can be depressing and make a person feel trapped.

The Lung type is regretful and somewhat grieved by loss. They are always depressed by the loss of how things "used to be." The death of someone close to them can throw them into such a feeling of grief that they almost can't breathe, and in fact often can wane away and die this way when a close partner has passed away. This unsuitability of the world of the present or the future can make the person feel unfit for the world they have to cope with.

As western medicine is coming around to the meeting of mind and body and in fact using the term *mind-body* more and more, one of the things they are studying most is the effect on the heart. Most of the study has been on the effect of heart attacks and the type A persona who suffers from a rather constant time-compressed stress. What they are finding in a lot of emotionally hostile individuals is that there is a high level of glucocorticoids in the blood stream that stimulate cortisol production and lead to a proclivity toward heart attacks. The fact is that they find high glucocorticoid levels in depressives as well and in both of these cases it is more the way one responds to stressors that are related to be the cause. The real point of these studies is that there is a direct physiological link to emotional turmoil that, at last, western science finds measurable and therefore scientific; more directly linking the mind and emotions to negative physiological phenomenon.

To each individual type of person the type of stressor one responds to relies on the type of person you are and whether you are healthy or not. If the person is balanced and healthy, the possibility that you're going to fall into a depression is less likely than if you are not, regardless of the outward stimulus that may normally bring it on. Counter to that, the aura of depression often falls on those whose proclivity toward imbalance is a physical presence that exacerbates the emotional self.

At our clinic, analyzing this balance and addressing both the emotional and physical parts of the bigger picture is what we are most noted for.

Let me add that as I read this article myself, it feels far too doctorial and removed to reflect sympathy and understanding to the person who is presently in the throes of a major depression. One of the biggest mistakes any practitioner can make is oversimplifying this very complex station in a person's life and trying to just explain it away or just *cheer them up*.

However, one of the most difficult problems can be that the depressive patient must see the depression as their problem and not everyone else's. They must make certain that it is their own initiative to create a new life and not just something they "owe" to concerned people around them. Many people ask me to help with someone else's depression for which I am helpless to do without the absolute full volition of the person who is depressed. The problem is both physical and emotional. It is a journey that is hard, painful and requires a lot of patience and willingness for new levels of self discovery.