

# Dysthymic Disorder

## When depression lingers

### **What is dysthymic disorder?**

Dysthymic disorder, or dysthymia, is a type of depression that lasts for at least two years. Some people suffer from dysthymia for years. The depression is usually mild or moderate, rather than severe. Most people with dysthymia cannot tell for sure when they first became depressed.

Symptoms of dysthymic disorder include a poor appetite or overeating, difficulty sleeping or sleeping too much, low energy, fatigue and feelings of hopelessness. But people with dysthymic disorder may have periods of normal mood that last up to two months. Family members and friends may not even know that their loved one is depressed. Even though this type of depression is mild, it may make it difficult for a person to function at home and at school or work.

### **When does dysthymic disorder begin?**

Dysthymia can begin in childhood or in adulthood. Like most types of depression, it appears to be more common in women. No one knows why depression is more common in women.

### **How common is dysthymic disorder?**

Dysthymic disorder is a fairly common type of depression. Up to 3 percent of people have dysthymia. From 5 to 15 percent of patients in a family doctor's office have dysthymia.

### **What causes dysthymic disorder?**

No one knows for sure what causes dysthymia. There may be some changes in the brain that involve a chemical called serotonin. Personality problems, medical problems and chronic life stresses may also play a role.

### **How is dysthymic disorder diagnosed?**

If you think you have dysthymia, discuss your concerns with your doctor. Your doctor will ask you questions to find out if you have depression and to identify the type of depression you have. Your doctor may ask you questions about your health and your symptoms, such as how well you're sleeping, if you feel tired all of the time, if you have trouble concentrating. Your doctor will also consider medical reasons that may cause you to feel depressed, such as problems with your thyroid or a medicine you may be taking.

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## **What is the treatment for dysthymic disorder?**

Dysthymic disorder can be treated with an antidepressant medicine. This type of drug relieves depression. Antidepressants are commonly prescribed, and they are safe. They do not create an artificial “high,” and they are not addicting.

If you are given an antidepressant, it may take a number of weeks or even several months before you and your doctor know whether the drug is helping you. It is important for you to take the medicine as it is prescribed. If the antidepressant drug helps you feel better, you may need to take this medicine for several years. In other words, continue to take the antidepressant drug even though you begin to feel better. If you stop taking the medicine, you may get depressed again.

## **Will I have to see a psychiatrist?**

You will probably not have to see a psychiatrist unless the medication is not working or you have problems taking the drugs that are usually prescribed for depression. Sometimes, in addition to taking an antidepressant medicine, patients are referred for psychotherapy to help them deal with specific problems. This type of therapy can be very helpful for some people. In general, the treatment of dysthymic disorder is adjusted to the person.

### **What can I do to help myself feel better?**

Talking to your doctor about how you’re feeling and getting treatment for the dysthymic disorder are the first steps to feeling better. Other ways to make yourself feel better are listed below:

- Get involved in activities that make you feel good or make you feel like you’ve accomplished something. For example, going to a movie, taking a drive on a pleasant day, going to a ball game and working in the garden.
- Eat well-balanced, healthy meals.
- Don’t use drugs or alcohol. Both can make depression worse.
- Exercise as much as you can. Exercising three times a week for 30 minutes to one hour is a good goal. Exercise can help lift your mood.

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This handout provides a general overview on this topic and may not apply to everyone. To find out if this handout applies to you and to get more information on this subject, talk to your family doctor.



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