

# **MEDIA ADVISORY**



## **Canadian Mental Health Association**

Alberta Division  
328 Capital Place, 9707 - 110 Street NW  
Edmonton, AB T5K 2L9

### **FOR IMMEDIATE RELEASE**

**Edmonton, Alberta, June 11, 2001—**

## **\$14.4 Billion: The Hidden Cost of Depression**

We have prepared the enclosed backgrounder in response to recent media interest surrounding the social and human cost of depression (Canadian Press, June 4, 2001: Cost of depression, study says, is \$14.4 Billion and (Few Depressed, Anxious Americans Seek Treatment: New York; Reuters Health, June 7, 2001). We are pleased to assist with the enclosed background information.

### **MEDIA BACKGROUNDER**

- Social and Economic Cost of Depression
- Depression – A Hidden Problem
- Concerns in the Business Community
- Perspectives of Those in the Mental Health Field
- Facts About Depression
- The Consequences of Undiagnosed / Untreated Depression
- Improving Access to Services
- Resource and Contact Information

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The issues raised in the study (Thomas Stephens and Natacha Joubert, 2001, The Economic Burden of Mental Health Problems in Canada, Chronic Diseases in Canada, 22(1), 18-23) cited in the Canadian Press story are important and we hope you will be able to inform the public about this often hidden problem.

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For information contact:

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Attachments

## **Media Backgrounder**

### **\$14.4 Billion - The Hidden Cost of Depression**

A recent Canadian Press story (June 4, 2001: Cost of depression, study says is \$14.4 Billion) reported on a Health Canada study that urges government to fundamentally change the way it tackles the issue.

In this study, the conservative cost of Depression on society is pegged at \$14.4 Billion per year. In other words this one illness has an economic impact on Canadians of approximately \$500 per capita per year. The full text of the study is available on the Internet at

[http://www.hc-sc.gc.ca/hpb/lcdc/publicat/cdic/cdic221/cd221d\\_e.html](http://www.hc-sc.gc.ca/hpb/lcdc/publicat/cdic/cdic221/cd221d_e.html)

With approximately 10% of Canada's population the impact on Alberta likely significantly exceeds \$1 billion.

#### **Depression remains a hidden problem**

In a related story released today the Reuter's Health Network (Few Depressed, Anxious Americans Seek Treatment, New York, Reuters Health, June 7, 2001) reported that "Fewer than 20% of the millions of American adults who have experienced clinical depression or anxiety have ever been treated for the disorders, according to data from a survey conducted by Roper Starch Worldwide and subsidized by drug company Wyeth-Ayerst." These results, from the *America's Mental Health Survey 2001*, were presented to the National Mental Health Association (NMHA) in Washington, D.C. on Wednesday.

There continues to be an unfortunate social stigma to depression. The same study reported that "many respondents felt a diagnosis of depression or anxiety is embarrassing. Forty-two percent of those with a formal diagnosis of depression or generalized anxiety disorder reported being embarrassed by their symptoms . . ."

#### **Concerns in the Business Community — Economic Costs of Depression**

Business leaders and executives have recognized the severity and extent of this problem. Depression, along with other mental health problems, results in a significant burden not only on individuals and families but also direct and lost productivity costs for industry.

In October 2000, *The Bottom Line* conference on the Impact of Mental Illness in the Workplace and Community, was held in Calgary. At this conference the *Business and Economic Roundtable on Mental Health*, chaired by Hon. Michael Wilson, Vice Chairman of RBC Dominion Securities, urged "corporate leaders to consider a CEO-led business plan for depression" and offered a 12-step "defeat depression" strategy for the workplace promoting healthier work environments and providing more available and effective mental health services. The goal of such a strategy would reduce workplace

stress, improve productivity and “reduce disability rates by 15 - 25 per cent a year by targeting mental health issues.”

## **Perspectives of those in the Mental Health Field**

Health and Mental Health leaders are unanimous in targeting depression as a leading health problem worldwide. According to the World Health Organization, “Major depression is ranked fourth among the 10 leading causes of the global burden of disease, which includes the developing world. By 2020, it will have jumped to the second place . . . “

The most recent government-issued *Report on the Health of Albertans* (2000), confirms that “globally mental illnesses make up 5 of the top 10 causes of disability, including the first two . . . depression is one of these. In 1997/1998 1,875 Albertans were hospitalized for depression.

Many deaths due to suicide are related to depression. The federal government’s report, *Toward a Healthy Future* (1999), looked at the impact of various conditions of the life expectancy of Canadians. Suicide was number three behind cancer and accidents and ahead of respiratory diseases, heart disease and stroke in its impact on reduced life expectancy. In Alberta the number of person-years of life lost due to suicide was 529/100,000 — higher than in any other province except Quebec and the territories. Based upon a population of approximately three million people this figure yields 15,870 years of life expectancy lost annually in Alberta due to this one factor alone.

A report by the Canadian Alliance on Mental Illness and Mental Health stated that “depression will be the single most expensive cause of loss of workplace productivity due to disability by 2020.” Their report goes on to state, “Today in Canada many individuals with mental illness are living lives of desperation, fear and pain. We know that Canadians would care if they were aware of the critical nature of the situation. Our governments are aware of the issues, but have not placed a high priority on mental illness and mental health.”

Edmonton psychiatrist Dr. Roger Bland, in his presentation to *The Bottom Line* conference, noted that depression is number one among ten leading causes of “years lived with disability” for both men and women in the developed world, ahead of illnesses such as diabetes or osteoarthritis. Two out of every five disabled people are disabled due to a mental illness. In his study of the prevalence of major depression in Edmonton, Dr. Bland found a lifetime prevalence rate of 9.6% (or over 90,000 individuals in the greater Edmonton area). Other international studies have found even higher incidence rates.

## **Facts about Depression**

Please see enclosed *Do You have Depression?* and *Quick Facts on Depression*, from McMaster University. Please also see [www.cmha.ab.ca](http://www.cmha.ab.ca) for further information about depression.

## **The Consequences of Undiagnosed/Untreated Depression**

People with depression must live with their feelings 24 hours a day. But it is in the workplace that they will try hardest to mask their illness. Fear of being reprimanded, dismissed or stigmatized for feeling “down,” and feelings of shame will prevent someone from seeking help.

Some people try to cope through alcohol and/or drug abuse. Unfortunately, too many people still believe that depression can be handled alone with a “stiff upper lip.” Unexplained “sick days” can make family and co-workers resentful, and may, in some workplaces, even result in dismissal. Once depression is recognized, help can make a difference for 80% of people who are affected, allowing them to get back to their regular activities.

The truth is, if depression is not treated, it can last for months or even years. A person can become so withdrawn they simply can't get out of bed. Feeling isolated from family, friends and co-workers and unable to seek help, 15% of people with severe depression commit suicide.

### **Improving Access to Services**

Depression can be effectively treated. Early detection can lead to better outcomes. About 80% of people recover fully from depression. The most common forms of treatment involve psychological counselling, medications or a combination of both.

Unfortunately, many individuals do not access needed treatment services. While increased public education will help, many health care providers and consumers also stress the need to make services more accessible and in some cases affordable. In Alberta, a coalition of mental health professional, consumer and advocacy groups (Alberta Alliance on Mental Illness and Mental Health) has called for the need to improve the mental health care available to Albertans.

George Lucki, a past-president of the Psychologists' Association of Alberta and Vice-Chair of the Alliance called for, "more accessible, affordable and comprehensive community services to address the unmet needs of Albertans experiencing depression." The Chair of this group, Dennis Anderson, expressed the consensus of the 14 organizations, that "the members of the Alliance share the vision of developing a consumer-focused, decentralized, integrated and comprehensive community-based system of mental health care, consistent with Best Practices in this field."

These perspectives were echoed by the Alberta Medical Representative in a September 2000 Resolution urging the Minister of Health and Wellness to develop "a unified system of mental health care delivery in the province of Alberta, with targeted funding that addresses the shortage of inpatient and community resources."

### **Resource and Contact Information**

For more information about depression and to access professional services individuals may contact:

- **Canadian Mental Health Association**

Alberta Division  
328 Capital Place, 9707 - 110 Street NW  
Edmonton, AB T5K 2L9  
Phone (780) 482-6576; Fax (780) 482-6348

or your local CMHA office.

- **The Alberta Mental Health Board**

PO Box 1360, 10025 Jasper Avenue  
Edmonton, AB T5J 2N3  
Phone: (780) 422-2233 or Public Information Line 1-877-303-AMHB (2642)



**DIRECT**

# DO YOU HAVE DEPRESSION?

*... if you do, you are not alone*

*These successful people all experienced depression or manic depression*

Haas Christian Anderson  
Buzz Aldrin  
Rosalind  
Irving Berlin  
Robert Burns  
Laurie R. King  
Dick Cavett  
Winston Churchill  
Eric Clapton  
Leonard Cohen  
Charles Dickens  
Emily Dickinson  
Patty Duke  
T.S. Eliot  
F. Scott Fitzgerald  
Connie Francis  
Peter Gabriel  
Judy Garland  
Vincent Van Gogh  
Charles Haley  
Stephen Hawking  
Ernest Hemingway  
Jimmy Hendrix  
John Keats  
Wylan Leigh  
Abraham Lincoln  
Michelangelo  
Marilyn Monroe  
Isaac Newton  
Edgar Allan Poe  
Cole Porter  
Charley Pride  
Robert Louis Stevenson  
James Taylor  
Peter Tchaikovsky  
Tennessee  
Dylan Thomas  
Mark Twain  
Ted Turner  
Mike Wallace  
Walt Whitman  
Tennessee Williams  
Virginia Woolf

One in four people will have a mood disorder, that is, depression or manic depression. Depression is a medical condition — it is common and it is treatable. Mood Disorders are believed to be caused by a "dysregulation" of certain chemicals that are found in the brain. These disorders often remain untreated. People don't recognize that the symptoms they are experiencing require treatment. Many refuse to seek help due to shame or stigma. When a proper diagnosis is made and when effective treatment advice is given and followed, most people get better.

A variety of proven and effective treatments are readily available. If you or someone you know is experiencing the following symptoms, please seek help. Start by talking with your family doctor.

## *Do you have Depression?*

- Have you lost interest in your favourite hobbies and sports or are you spending increased amounts of time on them, almost compulsively?
- Do you feel sad, often for no reason at all — or — very irritable?
- Have you lost enjoyment in spending time with family and friends?
- Have you lost your appetite — or — have been overeating, almost compulsively?
- Is it hard to get to sleep and your sleep is restless and broken — or — are you feeling so tired that you want to sleep all the time?
- Have you lost interest in sex — or — have become very preoccupied by it?
- Do you feel worthless, guilty, or that you are a burden to your family?
- Are you thinking about death or suicide or about harming yourself?
- Do you have trouble concentrating, making decisions?
- Do you feel extremely tired and have you lost all your energy?

## *Do you have Mania ?*

- Do you have persistent "highs" — or — persistent irritable moods?
- Do you feel you have boundless energy but have little need or desire to sleep?
- Do your thoughts race?
- Does your speech feel "pressured", like you can't get the words out fast enough?
- Are you making decisions too fast, often without realizing the dangerous or painful consequences involved?
- Has your interest in sex increased greatly?

People with Manic Depression (Bipolar Disorder) will experience symptoms of Mania and Depression.

If these symptoms have been persisting for **two weeks or more, daily**, or describe someone you know, please go to your family doctor for help. For additional information about mood disorders, you can contact our education centre:

**Depression and Anxiety Information Resource & Education Centre (Toll-free) (DIRECT)**  
Information Line: 1-888-557-5051 ext. 8000 Web Site: <http://www.fhs.mcmaster.ca/direct>

DIRECT is a McMaster University, Faculty of Health Sciences education and awareness program sponsored by unrestricted education grants from: Eli Lilly Canada, SmithKline Beecham Pharma, Wyeth-Ayerst Canada, Bristol Myers Squibb, Pfizer Canada, Ontario Ministry of Health and Long Term Care



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## **QUICK FACTS on Depression**

### ***What is Depression?***

Depression is a serious medical condition. It will continue to affect a person if not treated promptly and properly. Depression affects how people think, react and how they feel. It affects a person's relationships, appetite, sleep, interest in life, self-esteem, mood, and productivity at work or school. Depression is not "the blues." Feeling down or sad sometimes is normal. *If depression's symptoms persist for most of the day for two weeks or more — seek help!* Without treatment, the symptoms may remain for months or years.

### ***Who Gets Depression?***

Depression knows no economic, geographic, social or cultural boundaries. It affects men, women and children of all ages. One out of every four women and one out of eight men suffers a type of depression severe enough to need medical treatment. In children and teens, depressive symptoms are often mistaken for hyperactivity, behavioral problems (i.e. delinquency, vandalism) or for other physical complaints. In seniors, depression is often mistaken for senility, stroke or problems accepted as a consequence of aging.

### ***What Causes Depression?***

Research is ongoing, but, to date, no clear answer on what causes depression has been found. Depression is related to a "dysregulation" of the brain's chemistry, causing it to send "depressed" signals, even when the person has reason to feel content. For some, depression occurs because of other illnesses. For others, depression can result from a reaction to specific drugs and medications. A person's response to "stress" plays a large role in depression but it is not the whole story. Depression sometimes has a genetic component. It has also been seen in those who have nutrition problems. The most important thing to remember, however, is to **seek help even if you don't know why you are depressed or think you have no reason to be depressed. *Depression is not your fault.***

### ***How Much Does Depression Cost Us?***

Depression hurts individuals, family members, friends, organizations and the cost to all of us is high. The person with depression has feelings of deep sadness, hopelessness, emptiness, guilt,

poor self-esteem, and feelings of being a burden to family and friends. Nearly two thirds of all suicides are committed by people with depression. Five percent of the Canadian workforce has depression, and the cost, including job loss, lower productivity, absenteeism and health care cost associated with depression is more than \$3.5 billion CAD annually.

### ***Are Effective Treatments Available?***

Yes! The vast majority of those suffering with depression can be successfully treated! But they need to ask for help! ***Depression is no one's fault!*** Being ashamed to ask for help or being unable to recognize symptoms are the two greatest barriers to receiving successful treatment. If you recognize depressive or manic symptoms in yourself or someone else, **talk to your doctor right away!** Be persistent! There are many therapy options which have been proven to help you recover from depression. If one type of therapy does not work for you, don't be discouraged. Ask questions about your treatment and about support groups in your area.

To learn more about depression, ask your health care provider and contact our information and education centre:

**Depression and Anxiety Information Resource & Education Centre (Toll-free) (DIRECT)**  
Information Line: 1-888-557-5051 ext. 8000 Web Site: <http://www.fhs.mcmaster.ca/direct>

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