

The Wellness Express™

Jump on the train to good health

Issue 1, October 2011

Depression and Obesity – A Dangerous Combination

Presented by: Creative Healing

In North America, one in 20 people suffer from depression. In the US alone, physicians write 230 million anti-depressant prescriptions each year. More women than men are affected by depression, but this fact may be skewed because men are often less likely to seek professional help.

When it comes to obesity, you are probably already familiar with how it negatively affects your physical health - boosting the chances of heart disease, diabetes and arthritis. In this issue of Wellness Express™, we investigate the health consequences of depression and obesity.

Depression and Obesity – Conjoined Twins?

Does depression cause obesity? Or does obesity cause depression? According to medical researchers, the answer is “both”. One weight study author remarked that when they gain weight, people get depressed, and when they get depressed, these people have more trouble losing weight.¹

A study of middle-aged women found they were more often depressed if they were obese and more obese if they

were depressed. Weight gain is connected to increased caloric intake and less physical activity and these factors contribute to boosting the risk of developing depression.¹ In fact, research shows that a woman with a body mass index (BMI) of 30 or above boosts her chance of developing depression into the range of 50% to 150%.²

For many years, physicians were reluctant to place depressed obese patients on a weight loss program because doctors feared this would only make the depression worse. However, medical researchers now believe that fear is misguided. Recent studies show depressed patients can participate in weight loss programs without intensifying their symptoms.

Behavioral Medicine published a research article in 2010 that recommends depressed individuals should not be excluded from weight loss studies. Conducted by the Group Health Research Institute, the study recruited both depressed and non-depressed women with a BMI of 30 or higher to participate in a one year weight loss program.

Exercise of the Week

Crunches on Exercise Ball with Oblique Twist

Difficulty: Beginner to Moderate

(Consult your chiropractor before engaging in this or any other exercise)

Start: Lie on back over exercise ball so that lower portion of ribcage is positioned over center of ball. Let head rest on ball and relax hips. Keep knees wide apart and position arms across chest (easy), hands behind head with elbows out (moderate), or arms stretched out overhead (difficult).

Exercise: Engage inner abdominals first by bringing belly button inwards. Then, curl body forward on ball, keeping lower back in contact with ball at all times. As you curl forward, bring one shoulder/elbow across body in the direction of the opposite knee. Return to starting position. Alternate sides. Repeat 5-10 times each side.



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"We expected women with major depression to lose less weight, attend fewer sessions, eat more calories, and get less exercise than those without depression," commented lead researcher Evette Ludman, Ph.D. "We were surprised to find no significant differences between the women who had depression and those who did not have it. Instead, what made a difference was just showing up. Women who attended at least 12 sessions lost more weight (14 pounds at 6 months, and 11 pounds at 12 months) than did those who attended fewer sessions (4 pounds at both 6 and 12 months), regardless of whether they had depression. Being depressed did not lead them to attend fewer sessions or lose less weight. Because of our findings and the well-documented health risks of obesity, we think rigorous efforts should be taken to engage and retain all women in need of such services in intensive weight loss programs."³

Anti-Depressant Medication & Weight Problems

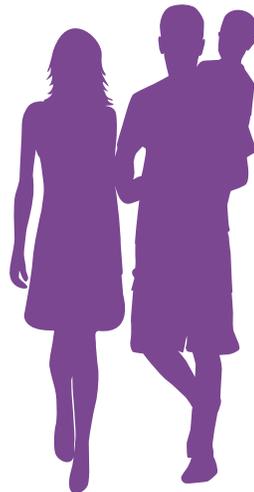
One of the side effects of anti-depressant drugs is weight gain. When on anti-depressants, about 25% of depression sufferers see their weight increase by at least 10 pounds. Research shows that weight gain can be tied to selective serotonin reuptake inhibitors (SSRI), tricyclics and MAO inhibitors types of anti-depressant drugs.⁴

Scientists are not sure why anti-depressants cause weight to rise. A possible theory is these medications impact the body's metabolism.

Another theory is patients who feel their depression lift find eating is more enjoyable, and subsequently increase their calorie intake.

Can you curb anti-depressant weight gain? There are certainly ways to help reduce the chances of putting on pounds while taking anti-depressants, although these methods do not work for everyone. You can talk to your physician about switching to a different medication, as some anti-depressants are more prone to cause weight gain than others. Also boost your amount of exercise and eat more nutritious food to lower the risk of weight increase.

What you should *not* do is stop taking your anti-depressant medications, try herbal remedies or go on a diet or exercise program without first consulting with a qualified healthcare professional. Remember, always inform your chiropractic physician of any medications and supplements you use.



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Quote to Inspire

"Even if you are on the right track, you'll get run over if you just sit there."

- Will Rogers

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