Suffering in silence: studies on screening for major depressive disorder in primary care
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Casus 1

The first patient (female, 41 years) divorced five years ago and she is raising two children, 15 and 13 years old. She struggles with many psychosocial problems. She told me that she had difficulties in raising the children. Both children were having problems with authority at home and at school. In addition, she had persistent conflicts with her ex-partner about the care for their children and how to solve the problems with authority. Apart from this, her financial capacity was very low; she was dependent of benefit and often struggling with paying off bills. Another problem was that her mother needed a lot of care from her because she was disabled due to chronic diabetes mellitus. She had no further social contacts to get social support.

She frequently attends her general practitioner for low back pain and to talk about her problems. Apart from this somatic complaint and social problems she suffers from loss of interest, agitation, loss of appetite, concentration problems and problems with sleeping.

Results of SCID-I interview: major depressive disorder and social phobic disorder

Her reaction to the diagnosis major depressive disorder:
‘It’s just a word you people have invented for people feeling like I do, and that’s what you call depression. They’ve just made up a name for it.’ (Interviewer: ‘So do I understand you correctly that it doesn’t help you?’) ‘That’s right, I don’t feel connected to that word at all. I could never imagine myself, saying, - I’m depressed - No, I just know for myself that I’ve not been feeling very well lately and this is caused by all the difficulties in my life.’
‘I don’t think pills or therapy from a psychiatrist will help me, I just have to deal with my problems.’