Major Depressive Disorder (MDD) from Standard efforts to improve health and alleviate poverty.

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Major Depressive Disorder

Major Depressive Disorder (MDD), also known as clinical depression, is a mental disorder characterised by persistent low mood, low self-esteem, and loss of interest or pleasure in normally pleasurable activities for at least two weeks. Those who are affected may also experience delusions or hallucinations on occasion. Introduced by a group of US clinicians in the mid-1970s, the term was adopted by the American Psychiatric Association in the 1980 version of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III) for this symptom cluster under mood disorders, and has since become widely used [1].

A person's reported experiences and a mental status examination are used to make a diagnosis of major depressive disorder. There is no laboratory test for the disorder, but testing to rule out physical causes may be performed,

However, testing may be performed to rule out physical conditions that cause similar symptoms. The most common age of onset is in one's twenties, with females being affected roughly twice as often as males. The disorder's course varies greatly, from a single episode lasting months to a lifelong disorder with recurrent major depressive episodes [2].

Those suffering from major depression are typically treated with psychotherapy and antidepressant medication. Medication appears to be effective, but the effect may be limited to the most severely depressed patients. In cases where there is associated self-neglect or a significant risk of harm to self or others, hospitalisation (which may be involuntary) may be required. If other treatments are ineffective, Electroconvulsive Therapy (ECT) may be considered. Major depressive disorder is thought to be caused by a combination of genetic, environmental, and psychological factors, with genetic risk accounting for approximately 40% of the risk. A family history of the condition, major life changes, certain medications, chronic health problems, and substance use disorders are all risk factors. It can have a negative impact on a person's personal life, work life, or education, as well as their sleeping, eating, and overall health. In 2017, approximately 163 million people (2% of the world's population) suffered from major depression. The percentage of people affected at some point in their lives ranges from 7% in Japan to 21% in France. The developed world has a higher life expectancy (15%) than the developing world (11%). The disorder is responsible for the second-most years [3].

Symptoms and signs

A person's family and personal relationships, work or school life, sleeping and eating habits and overall health are all negatively impacted by major depression. A person experiencing a major depressive episode usually has a low mood that pervades all aspects of life and an inability to enjoy previously enjoyable activities. Depressed people may be preoccupied with, or ruminate on, feelings of worthlessness, inappropriate guilt or regret, helplessness, or hopelessness. Other symptoms of depression include poor concentration and memory, withdrawal from social situations and activities, decreased sex drive, irritability, and suicidal thoughts. Insomnia is common; in the typical pattern, a person wakes up very early and is unable to sleep again. Oversleeping, or hypersomnia, can also occur. Some antidepressants may cause insomnia as well [4].

According to the World Health Organization's criteria for depression, a depressed person may report multiple physical symptoms such as fatigue, headaches, or digestive problems; physical complaints are the most common presenting problem in developing countries. Appetite frequently decreases, resulting in weight loss, though increased appetite and weight gain do occur on occasion. Agitation or lethargy may be noticed by family and friends. Older depressed people may experience cognitive symptoms of recent onset, such as forgetfulness and a noticeable slowing of movement [5].

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