TARGET MENTAL HEALTH
... and the facts are ...

Depression, trauma –
Physical disorders with psychological effects

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The MATRIX below demonstrates the powerful links between major depression and a wide range of chronic conditions which are now the number one public health challenges facing the world.

This chart reflects the unfolding impact of this phenomenon the costs of which have yet to be fully calculated and may emerge as the greatest single cost of mental ill health of all.

“There is much that is physical about mental illness, and much that is mental about physical illness” - American Psychiatric Association
**Global Shift**

The world is facing a major shift from infectious to non-communicable diseases as the major public health challenge of the next 30 years. Brain function and dysfunction is central to the complexity and ultimate effects of this transition.

This interferes with the productive capacity of our workforces at a time when 85% of all new jobs in the world economy demand cerebral not manual skills, creating what we call the brain-based economy.

**Physical Disorders with Deep Psychological Effects**

According to the largest-ever survey of US and Canadian workplaces commissioned with Great West Life, 18-25% of the working populations experiences depression each year.

This demonstrates that depression is heavily concentrated in the working population and 70% of adults diagnosed with depression live with their symptoms since childhood.

The brain-based dynamics, bodily effects and risk factors are becoming widely-known. In this light, we can see depression as a physical disorder with psychological effects.

There are major genetic and epigenetic components -- the latter referring to how our experiences in life and work influence how one’s genetic disposition is expressed.

Our mental collisions with our personal and working lives are a determinant of onset. One might see depression more like an injury than an illness.

Along those lines, PTSD is like a concussion from the inside out – in this case, a serious blow first to the brain and then to the skull. A concussion, from the inside out.

PTSD is a normal response to an abnormal event - abhorrence, fear, suffering, sustaining tragic or inhumane behaviour and events.

Those who suffer are not crazy. They are injured. They are not abnormal. The experience that traumatized them is abnormal. Their pain stems from their human capacity for horror and regret over the plight of others.

Severe trauma, emotional distress and depression are the closest thing we have to heart break. Mental disorders are not exclusively - or even mainly - ‘mental.’

These conditions have physical properties, physical origins, and physical and psychological effects.
The day will come when we will have a blood and saliva test for depression, or the risk thereof – an X-Ray in the form of functional MRIs.

In fact, science has already a blood test which can help determine who is vulnerable to psychosis.

The dawn of personalized treatment of mental disorders has already opened. One day, customized treatments, as one leading clinician put it, ‘will then actually treat what the patient has - where they have it.’

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