

Ordinary sounding expressions of teen angst may signal early depression

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While it's estimated at least one in 10 teens in the U.S. suffer from depression at some point, few will use the word "depressed" to describe negative emotions hanging over them. Instead, new research at the 2017 Pediatric Academic Societies Meeting in San Francisco suggests, they're likely to use terms such as "stressed," or "down," and other words that may sound like ordinary teen angst but could be a signal of more serious, pre-depressive symptoms.

Researchers will present the abstract, "Understanding teen expression of sadness in primary care: A qualitative exploration" on Sunday, May 7, at the Moscone West Convention Center. For the study, they analyzed a sample of screening interviews with 369 teens ages 13 and 18 at risk for depression who participated in the Promoting Adolescent Health Study (PATH), a large, randomized control trial funded by the National Institutes of Mental Health.

"Much of what a teen is feeling and experiencing is easy to attribute to the ups and downs of teen angst," said abstract co-author Daniela DeFrino, PhD, RN, an assistant professor of research in the University of Illinois at Chicago College of Medicine and College of Nursing. "But, sometimes, there is so much more under the surface that can lead to depression," she said.

For the PATH study, adolescents who reported feeling down irritable or hopeless during the past two weeks in private, written responses to two brief screening questions received a call from the study team. During the

call, researchers used validated measures to screen for those at risk for depression.

"Teens rarely stated they were depressed, but described bursts of feeling stressed and sad that often came and went," DeFrino said. For example, a teen might say, "I always find somehow to go back to stressful mode," DeFrino said, or, "I get really mad at people very easily. They don't understand why I'm upset. Sometimes I don't either."

Other common symptoms the teens in the study reported:

- Increased anger and irritability toward others.
- Loss of interest in activities they previously enjoyed.
- Marked difficulty falling and staying asleep, as well as sleeping too much.

Recruited from the Chicago and Boston areas, PATH study participants were 68 percent female, 21 percent Hispanic, 26 percent African-American and 43 percent white. More than half of the teens' mothers and fathers (60 percent and 54 percent, respectively) were college graduates.

DeFrino said the teens often noted school pressure related to homework and expectations to succeed as sources of stress and difficulty. Arguments with parents, verbal and emotional abuse, divorce, separation, neglect, sexual abuse and home relocation were among major reasons cited for worsening mood. Teens also often attributed new feelings of sadness to deaths from illness and suicides of family members or friends.

The researchers also noted that, unrelated to expressed feelings of depression, two-thirds of the teens had visited their primary healthcare providers for physical illnesses such as ulcers, migraines, stomach pains

and fatigue. These visits could offer an opportunity for a [health care provider](#) to identify feelings and check in with [mental health](#) concerns as well, DeFrino said.

"Teens may be experiencing a lot of internal turmoil and difficult life stresses that we can easily overlook if we don't probe with sensitive questioning and understanding," DeFrino said. "Reframing these [feelings](#) as outward symptoms of pre-depression by the primary care provider would allow for connection to and discussion about the importance of mental health with the teen and parent."

Dr. DeFrino will present the abstract, "Understanding [teen](#) expression of sadness in [primary care](#): A qualitative exploration," at the Mental Health/Substance Use poster session from 4:15 p.m. to 7:30 p.m.

More information: Understanding teen expression of sadness in primary care: A qualitative exploration, 2017 Pediatric Academic Societies Meeting.

Provided by American Academy of Pediatrics

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