

# Don't let depression keep you from exercising

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Exercise may be just as crucial to a depression patient's good health as finding an effective antidepressant.

A new study of nearly 18,000 participants found that those with high fitness at middle age were significantly less likely to die from [heart](#)

[disease](#) in later life, even if they were diagnosed with [depression](#).

The research—a collaboration between UT Southwestern and The Cooper Institute—underscores the multiple ways in which depression may ultimately impact health and mortality. It also highlights the importance of overcoming a common dilemma among patients: How does one cope with hopelessness and still find motivation to exercise?

"Maintaining a healthy dose of exercise is difficult, but it can be done. It just requires more effort and addressing unique barriers to regular exercise," says Dr. Madhukar Trivedi, co-author of the study and Director of the Center for Depression Research and Clinical Care, part of the Peter O'Donnell Jr. Brain Institute at UT Southwestern.

Dr. Madhukar Trivedi cites previous research showing that depressed patients can often perform about three-fourths of the exercise they're asked to do. He recommends patients take several steps to boost their chances of success:

- Set aside a consistent time to exercise every day, but do not get discouraged by stretches of inactivity. Resume activities as soon as possible.
- Keep a log to track progress.
- Vary the exercises to avoid monotony. Keep the workout interesting and fun.
- Exercise with a friend.
- Task someone with holding you accountable for maintaining the exercise regimen.

The study published in the *Journal of the American Medical Association Psychiatry* utilized a Cooper Institute database of participants who had their cardiorespiratory fitness measured at an average age of 50 years. Researchers used Medicare administrative data to establish correlations

between the participants' fitness at midlife to rates of depression and heart disease in older age. Among the findings, participants with high fitness were 56 percent less likely to eventually die from heart disease following a depression diagnosis.

Dr. Trivedi says the findings are just as relevant to younger age groups, in particular college-age adults who are just entering the workforce.

"This is the age where we typically see physical activity drop off because they're not involved in school activities and sports," Dr. Trivedi says.

"The earlier you maintain fitness, the better chance of preventing depression, which in the long run will help lower the risk of heart disease."

Depression has been linked to several other chronic medical conditions such as diabetes, obesity, and chronic kidney disease, which studies show can affect whether antidepressants are likely to help. For patients with these conditions, the more appropriate treatment may be exercise.

Dr. Trivedi says the reasons behind this may partly be connected to the general health effects of physical activity, including the fact that exercise decreases inflammation that may cause depression. By reducing inflammation, the risk for depression and heart disease are lowered.

"There is value to not starting a medication if it's not needed," says Dr. Trivedi, who's leading a national effort to establish biological tests for choosing antidepressants. "Being active and getting psychotherapy are sometimes the best prescription, especially in younger patients who don't have severe depression."

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Dr. Trivedi has organized large studies to further solidify the cause and effect among fitness, depression, and heart disease. One example is RAD, Resilience in Adolescent Development, a 10-year study that will enroll 1,500 participants who are at risk to develop depression but have not done so. The study's primary aim is to examine whether personal factors such as lifestyle and biology influence a teenager's ability to resist mood disorders. But researchers will also document fitness levels and track whether depression and heart issues arise in later years.

"There is enough evidence to show that the effect of low fitness on depression and heart disease is real," Dr. Trivedi says. "But further study is needed to establish the mechanism by which this effect happens."

Dr. Trivedi is a Professor of Psychiatry who holds the Betty Jo Hay Distinguished Chair in Mental Health and the Julie K. Hersh Chair for Depression Research and Clinical Care. He collaborated with Dr. Benjamin Willis of The Cooper Institute for the *JAMA Psychiatry* study.

"These new insights demonstrate the ongoing importance of fitness throughout the lifespan," says Dr. Willis, Director of Epidemiology at The Cooper Institute and lead author of the study. "Now we know that

the long-term benefits, and the connection between mind-body wellness, are more significant than we thought. We hope our study will highlight the role of [fitness](#) and [physical activity](#) in early prevention efforts by physicians in promoting healthy aging."

**More information:** *JAMA Psychiatry* (2018).  
[jamanetwork.com/journals/jamap...psychiatry.2018.1467](https://jamanetwork.com/journals/jamap...psychiatry.2018.1467)

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