

## Depression

We don't normally think of children being depressed, but depression knows no social, economic, gender, or age boundaries. There are many children with dysregulated brains who manifest symptoms of depression. Many children diagnosed with ADHD and other disorders are actually depressed, and if the depression is cleared, the attentional and behavioral problems disappear. Depression can manifest at any age, and if we rescue the child, we save the adult.

Often children do not demonstrate the typical signs we think of as depressive signals: instead, some children become more irritable and defiant. They are often angry about not feeling well and so they act out or show irritability or impulsivity. They get labeled as stubborn, disobedient, oppositional, or mean, when, in fact, they just feel lousy and are mad about it. Depression produces unhappy feelings and often severe emotional pain. No one wants a child to live in a chronic state of unhappiness. Brainwave training can help even with severe symptoms. If a child or an adult is on antidepressant medications when they come for neurofeedback, they are usually trained while they are on the medication. As the symptoms improve the medication is titrated down.

It has long been known that there is a diffused reduction in cerebral activity in depressive patients. Practically all known treatment modalities work to keep the brain more active. This is precisely what brainwave training does without negative side effects.

It is one thing for parents to reach the point that they cannot live with one another and finally divorce. It is, however, quite a different story when there is outright warfare and the children are used as a weapon against one parent or both. When parents are able to adjust in healthy ways to a divorce, the children will adjust as well. When the war goes on years after the divorce, however, the children suffer dreadful effects from their parent's neurotic behavior. Depression and anxiety are the most common things we see in children of dysfunctional parents.

Divorce is not the only reason for depression in children. The precipitating factor can be a number of things. There are a lot of dysfunctional families that somehow get along, yet some of them are over the top and are very disruptive to the life of a child. To list all the factors that have contributed to depression would be a very lengthy process. There are, however, some major factors that often trigger depression. These include economic difficulties, physical disabilities, being different in any way, illness in the family, death in the family, and any type of significant loss.

There are basically three types of depression seen by mental health professionals: reactive depression (exogenous), endogenous depression, and chronic low-grade depression. Reactive or exogenous depression is a result of some external stressor. It could be an injury, death in the family, or some other

great loss. If dealt with, this type of depression usually lifts fairly quickly. If it is not dealt with appropriately, it can manifest into a long-term depression. Endogenous depression is a different matter. Many people are depressed for no external reason. This type of depression is often more difficult to deal with and is usually long term. The last type of depression is a chronic low-grade depression called dysthymic disorder.

Situational depression is usually best dealt with through psychotherapy and some type of situational resolution. Endogenous depression and dysthymia, however, respond very well to brainwave training (neurotherapy). This sophisticated form of biofeedback training impacts the basic mechanism by which the brain controls physiological and mood states. Depression is a state of underarousal. By using the brainwave training, the person learns to regulate a normal state of arousal. With brainwave training, we see the symptoms of depression begin to normalize. For example, the person may begin to sleep normally, the quality of thought improves, and the person becomes more appropriately active, in general more functional. The normal range of behavior and affect begins to return. The return to normal happens quickly with brainwave training, which is in sharp contrast to years of therapy and sometimes countless drug trials.

At this time, it appears that brainwave biofeedback training is effective against depression regardless of how the person became depressed, that is, whether it is a genetic predisposition, from early childhood trauma, or the result of a deep emotional experience. The same finding seems to be true regardless of how long the tenure of the depression. Generally speaking, we usually find that, as the training proceeds, the patient no longer requires antidepressant medication, or at the very least, the medication can be reduced.

Brainwave training for depression is a process whereby we feed back to patients information about the way their brainwaves are functioning. By getting immediate feedback, they are able to learn how to control their various brainwave states. This is a learning process that helps patients establish self-control. After training, they have the ability to consciously change brainwave activity, which will reflect a change in behaviors and emotions. The patients' emotions are no longer at the mercy of all of the external events going on in their lives.

There is evidence that once the patient experiences a depressive episode, subsequent episodes are more likely to occur. Training the brainwaves to reduce the low cerebral activity has a beneficial effect, reducing the likelihood of recurrences. When we train young brains to produce healthy brainwave activity, we not only reduce the depression, we also improve the chances of a healthier and happier adulthood.