
How to Diagnose Major Depressive Episode

Last updated October 2023

To diagnose the presence of a major depressive episode, you have to establish that your patient has had a depressive mood state in addition to 5 out of 8 SIGECAPS for at least 2 weeks.

Sleep decrease

Interest decrease

Guilt

Energy decrease

Concentration decrease

Appetite decrease

Psychomotor retardation or agitation

Suicidality

Mood. “How has your mood been over the last 2 weeks?” “Have you felt so depressed that you felt like your entire life has been affected by your mood?”

Note that different people will subjectively experience a “depressed mood” in different ways. Some typical terms that will resonate with many depressed patients include: feeling sad, empty, irritable, discouraged, never happy, desperate. Some patients will feel a constant sense of “dread”, “nervousness” or “anxiety” but on probing they are suffering from major depression as opposed to an anxiety disorder.

Sleep. “Have you slept well or poorly over the last 2 weeks?” “Do you sleep too much or too little when you are depressed?”

Depressed patients may have insomnia or hypersomnia, though insomnia is more common. Insomnia may be described as sleepless nights, and it may include early morning awakening. Pay close attention to sleep habits because our meds are very good at improving them quickly. Insomnia is usually the first symptom to improve during an inpatient stay, typically on the first night.

Interest (loss of interest or pleasure). “Have you been able to enjoy doing anything over the last few weeks?”

Guilt, worthlessness, hopelessness. “How has your self esteem been? Do you feel that you are a good person? Do you still have hope? Have you felt guilty about things you’ve done or haven’t done?”

Energy. “How has your energy level been over the last couple of weeks?”

Concentration. “Have you been able to focus on things well? How has your concentration level been?”

Appetite. “Have you felt like eating? Have you lost weight lately?” “Have you been eating too much, just to feel good?”

Consider adding Ensure to the meals of patients who have lost a lot of weight.

Psychomotor retardation or agitation. This is usually diagnosed more by observation than by asking questions, but you can try questions like, “Have you felt like everything has become slowed down? Or have you felt unusually restless or agitated?”

Suicidality. “Have you had thoughts of wishing you were dead? Have you been thinking about ways to kill yourself?”

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