

THE BODILY IMPACT OF DEPRESSION AND ANXIETY

**Understanding How
Mental Health Affects Physical Health**

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AGENDA

- ☐ Description / Definition Depression
- ☐ Description / Definition Anxiety
- ☐ Understanding Somatoform Disorders
- ☐ Physical Symptoms of Depression & Anxiety
- ☐ Treatment Options

QUIZ- FIND DIFFERENCES



QUIZ- FIND DIFFERENCES



ANXIETY WITH DEPRESSION DEPRESSION WITH ANXIETY

Very Commonly Exist **Together**
Symptoms commonly cross-over.
Hard for find differences.



DEPRESSION

Depression is a mental health disorder characterized by **persistent** feelings of sadness, loss of interest in activities, and a range of other symptoms that **significantly** impact daily life.

Screening yearly is highly recommended.

More often than yearly screening is encouraged.

ANXIETY

Anxiety is often described as a feeling of fear, dread, and uneasiness that can arise in response to stressful situations or in general. **Significantly** impacting daily life.

- Screening yearly is highly recommended.
 - More often than yearly screening is encouraged.

COMMON REALITY

I think I'm afraid to be happy
because whenever I get too happy,
something bad always happens.

- Charlie Brown



“SOMATOFORM DISORDER”

- Physical symptoms NOT fully explained by a medical condition.
- Work-up can be costly and “unrewarding”.
- DSM IV → DSM V
- Somatic Symptom Disorder (SSD)

SOMATIC SYMPTOM DISORDER (SSD)

- One or more distressing **physical** symptoms
 - Pain, Fatigue, Gastrointestinal issues
- Excessive thoughts, feelings, or behaviors **related** to these symptoms:
 - **Disproportionate** thoughts about the seriousness of symptoms
 - **Persistent** health-related anxiety
 - **Excessive** time and energy devoted to health concerns

SOMATIC SYMPTOM DISORDER (SSD)

- **Not Malingering or Factitious**
- **Not faking:** The person genuinely **believes** and **feels** the symptoms.
- **Not intentionally produced:** Different from malingering (faking for personal gain) or factitious disorder (faking to assume the sick role).

RISK FACTORS

Depression

- Social Isolation
- **Medications**
- Military Personnel
- Having a disability
- **Medical conditions**
- Hormone Changes
- **Genetics**
- Low self-esteem
- **Life events**
- **Stress in life**
- **Substance use**
- **Trauma**

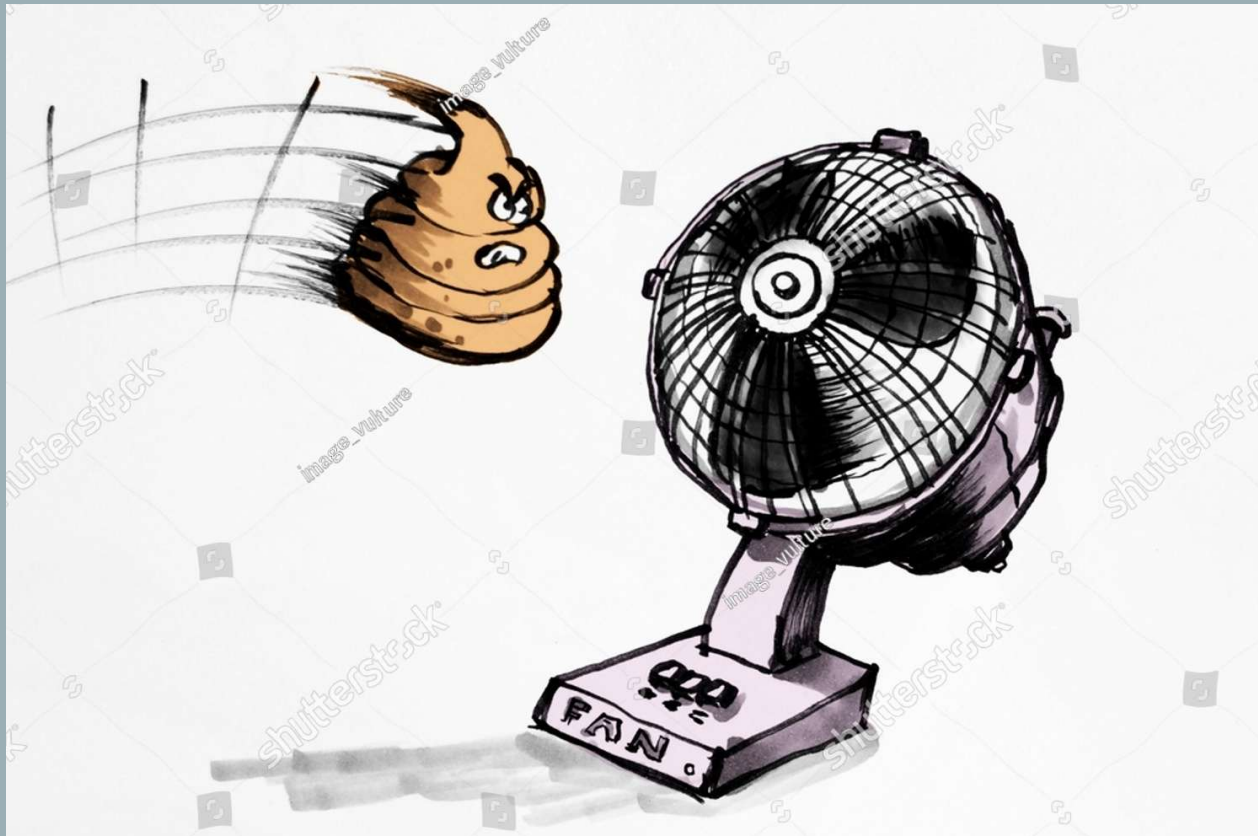
RISK FACTORS

Anxiety

- **Trauma**
- Shy personality
- Depression History
- Caffeine / Nicotine excess
- Arrhythmia history
- **Life events**
- Women
- **Substance use**
- **Genetics**
- **Medical Conditions**

Anyone and EVERYONE is at risk for these conditions at various times in life.

SIMPLY PUT
HOW YOU RESPOND TO LIFE HITTING
THE FAN MAY VARY AND RESULT IN
MENTAL HEALTH DISORDER AT
ANYTIME



Anyone and **EVERYONE** is at risk for these conditions
at various times in life.

SCREENING TOOLS DEPRESSION

Standardized
Tools

Patient Health Questionnaire – 2 (PHQ-2)

Patient Health Questionnaire – 9 (PHQ-9)

Beck Depression Inventory (BDI)

Geriatric Depression Scale (GDS)

Edinburgh Postnatal Depression Scale (EPDS)

Not a Formal Tool-SIGECAPS Quick Screen

SCREENING TOOLS DEPRESSION

PHQ-2 – in the **past 2 weeks**

- (1) little interest or pleasure in doing things
- (2) feeling down, depressed, or hopeless

Each question is scored on a scale of 0 to 3

0 = not at all

1 = several days

2 = more than half the days

3 = nearly every day

If score is 3 or more then + for initial screen

IF PHQ2 = >3 THEN PERFORM PHQ 9

1. Little interest or pleasure in doing things.
2. Feeling down, depressed, or hopeless.
3. Trouble falling or staying **asleep** or **sleeping** too much.
4. Feeling **tired** or having **little energy**.
5. Poor **appetite** or overeating.
6. Feeling bad about yourself, or that you are a failure or have let yourself or your family down.
7. **Trouble concentrating** on things, such as reading the newspaper or watching television.
8. **Moving or speaking** so slowly that other people could have noticed? Or, being so **fidgety** or **restless** that you have been moving a lot more than usual.
9. Thoughts that you would be better off dead or of hurting yourself in some way

Interpretation of Scores:

- 0-4: None-minimal depression.
- 5-9: Mild depression.
- 10-14: Moderate depression.
- 15-19: Moderately severe depression.
- 20-27: Severe depression.

S-I-G-E-C-A-P-S

In the past 2 weeks

- S: **Sleep** disturbances (insomnia or hypersomnia)
- I: Interest (diminished, also known as anhedonia – loss of pleasure in activities previously enjoyed)
- G: Guilt or feelings of worthlessness
- E: **Energy** (loss of energy or fatigue)
- C: **Concentration** difficulties or indecisiveness
- A: **Appetite changes** (decreased or increased, possibly with weight changes)
- P: **Psychomotor** changes (retardation or agitation – slowed-down movements or restlessness, observable by others)
- S: Suicidal thoughts (or suicidal ideation)

5+ = Depression Diagnosis

GENERALIZED ANXIETY DISORDER 7 (GAD-7)

In the past 2 weeks

1. Feeling nervous, anxious or on edge?
 2. Not being able to stop or control worrying?
 3. Worrying too much about different things?
 4. Trouble **relaxing**?
 5. Being so **restless** that it is hard to sit still?
 6. Becoming easily annoyed or irritable?
 7. Feeling afraid as if something awful might happen?
- (0) Not at all
 - (1) Several days
 - (2) More than half the days
 - (3) Nearly every day

- Score 0-4: Minimal Anxiety. May not require treatment.
- Score 5-9: Mild Anxiety. May respond to lifestyle changes or counseling.
- Score 10-14: Moderate Anxiety. May need therapy or medication.
- Score 15-21: Severe Anxiety. Often requires comprehensive treatment.

SOMATOFORM DISORDER SCREENING

PHQ 15 – symptoms in the past 4 weeks

1. Stomach pain
2. Back pain
3. Pain in your arms, legs, or joints (knees, hips, etc.)
4. Menstrual cramps or other problems with your periods
5. Headaches
6. Dizziness
7. Feeling your heart race
8. Shortness of breath
9. Pain or problems during sexual intercourse: (for adults)
10. Constipation, loose bowels, or diarrhea
11. Nausea, gas, or indigestion
12. Feeling tired or having low energy- **last 2 weeks**
13. Trouble sleeping- **last 2 weeks**
14. Chest pain
15. Fainting spells

DEPRESSION AND ANXIETY



DEPRESSION AND
ANXIETY EXTEND
BEYOND MENTAL
SYMPTOMS.

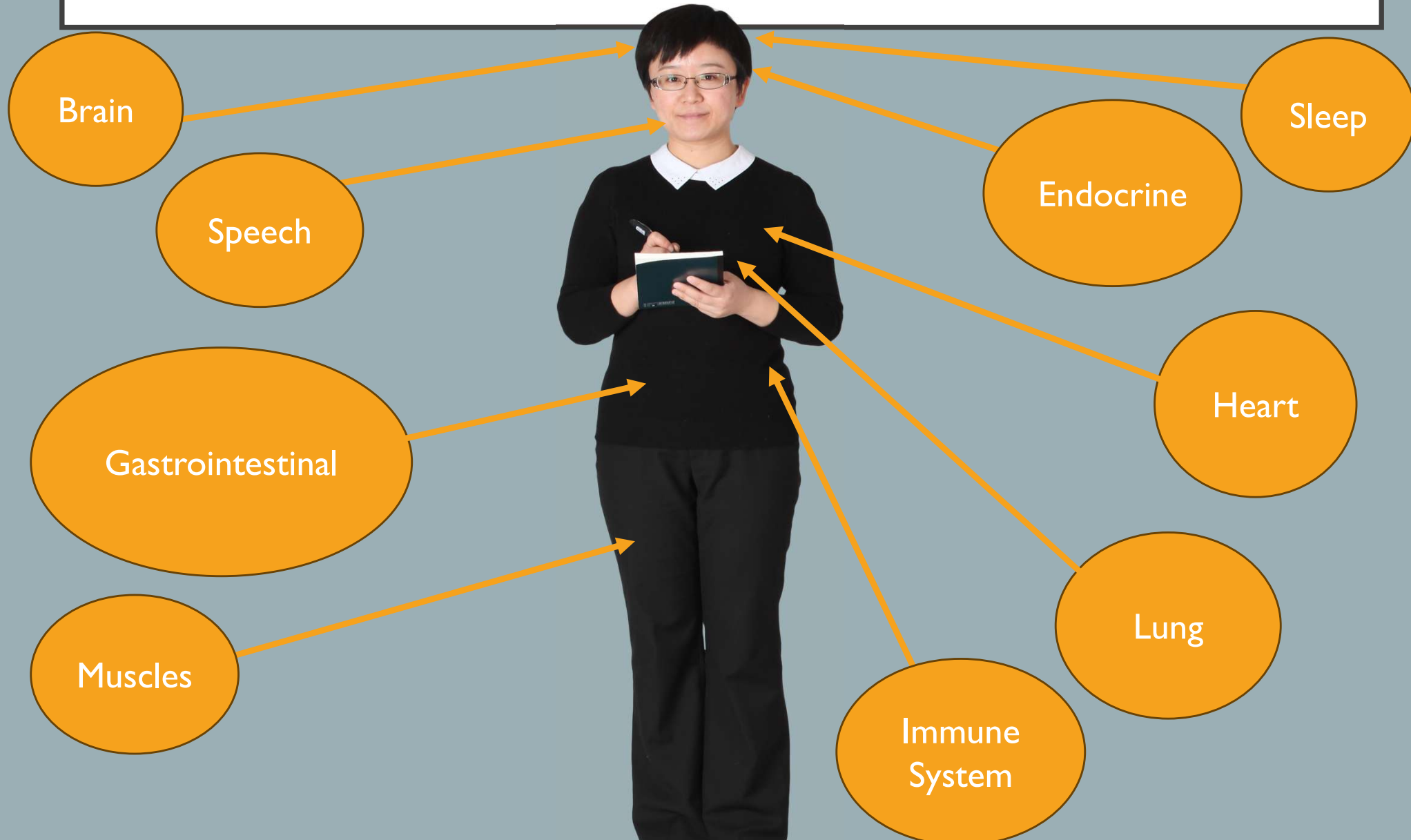


THEY CAUSE
SIGNIFICANT
PHYSICAL
EFFECTS ACROSS
BODY SYSTEMS.



UNDERSTANDING
THESE IMPACTS IS
CRUCIAL TO
COMPREHENSIVE
CARE.

DEPRESSION / ANXIETY BEYOND EMOTIONS



BRAIN AND NERVOUS SYSTEM

Neurotransmitter imbalances: Serotonin, Dopamine, Norepinephrine



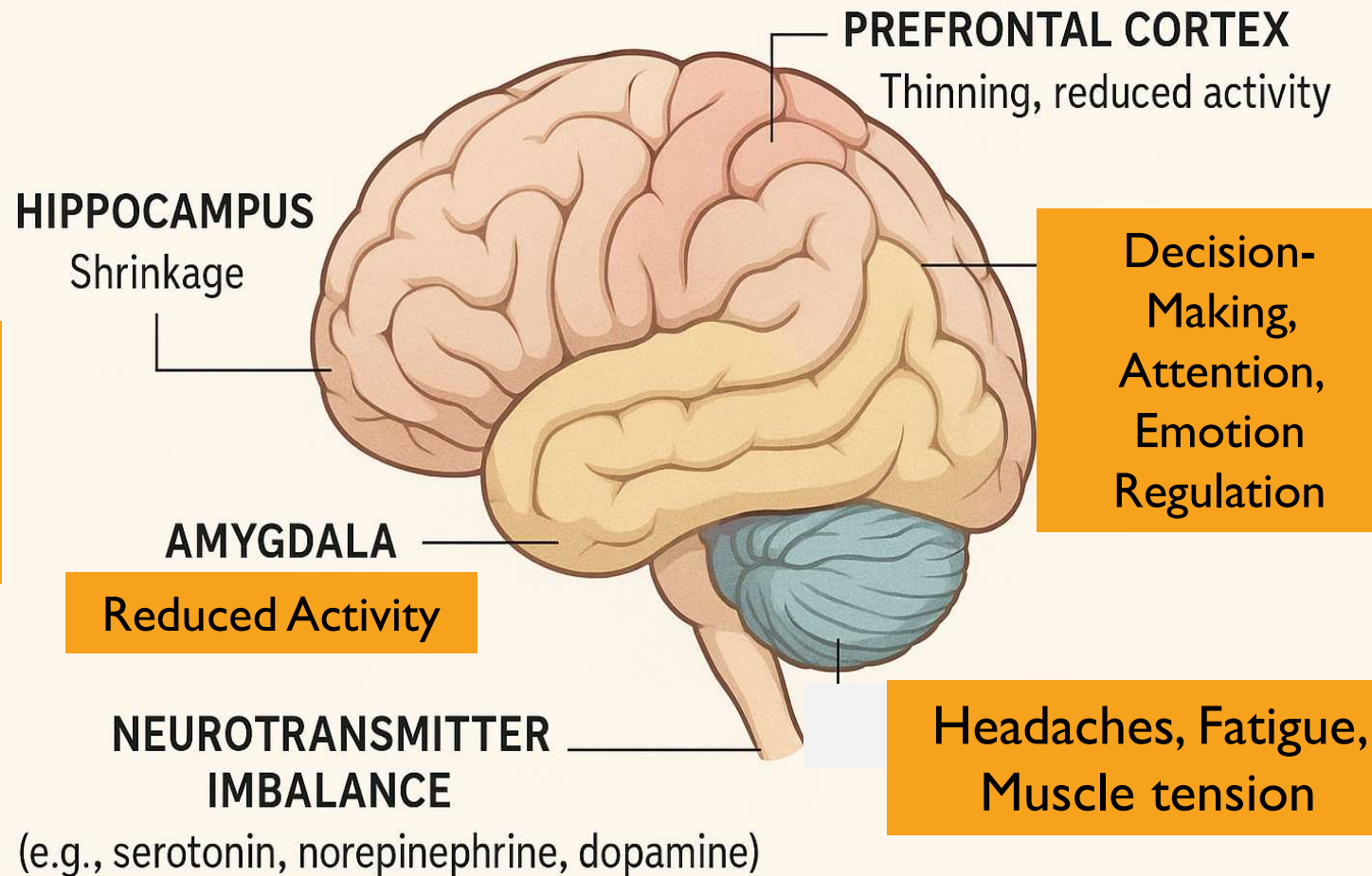
- Impacting mood sleep
- Digestion
- Regulating mood
- Memory
- Breathing
- Sexual function
- Blood clotting
- Bone health

Movement & Motivation

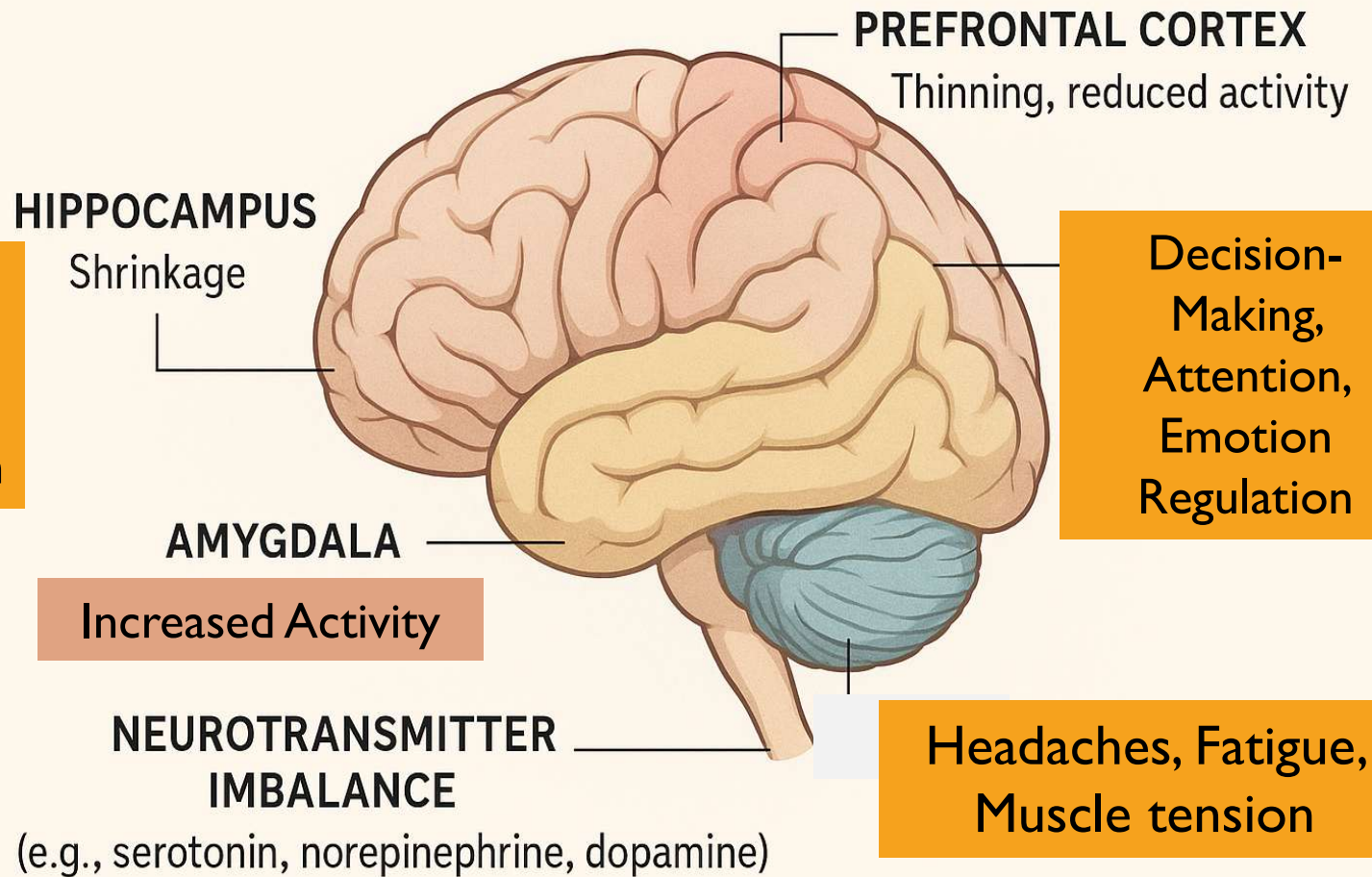


Increase heart rate
Increased blood pressure
Energy
Enhance focus
Alertness

PHYSICAL EFFECTS OF DEPRESSION



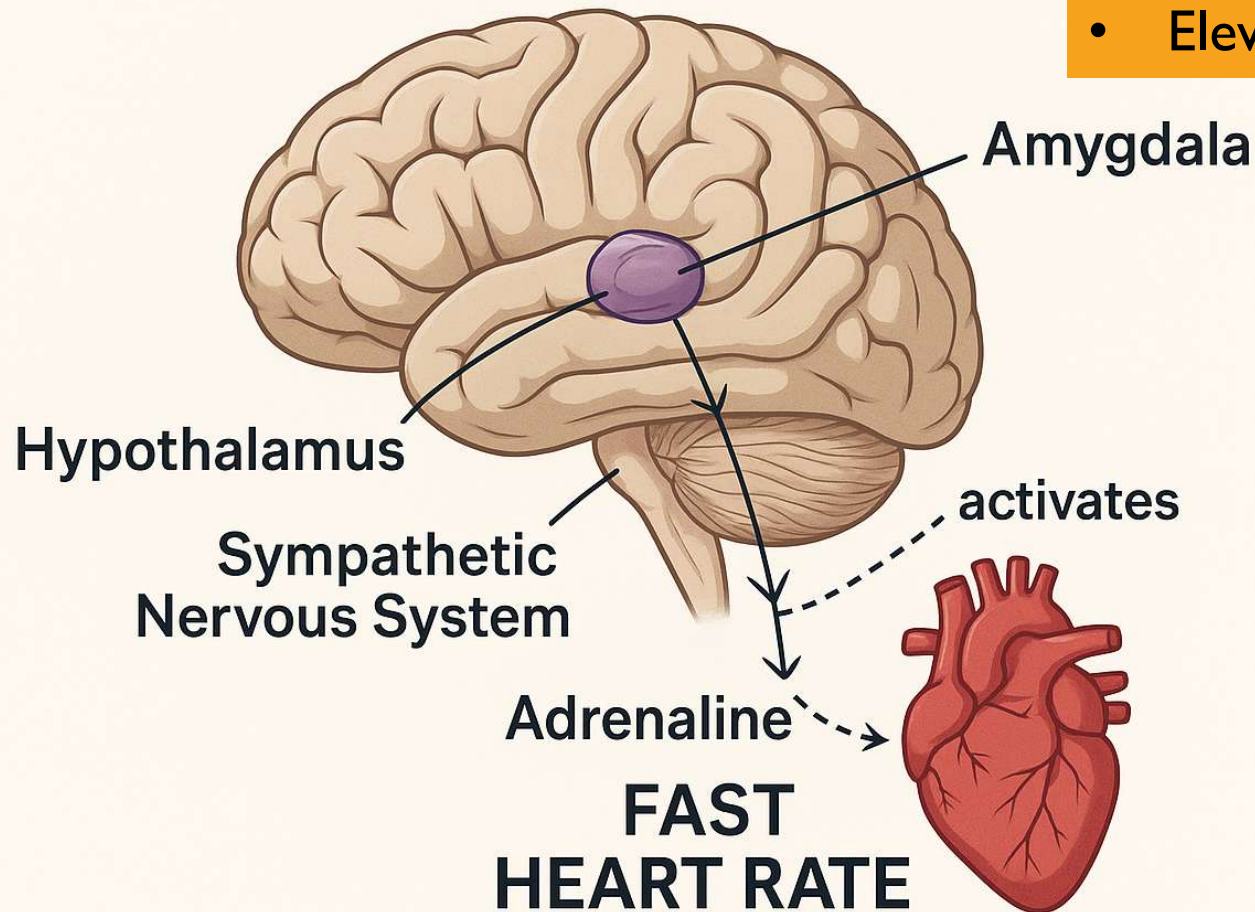
PHYSICAL EFFECTS OF ANXIETY



'FIGHT OR FLIGHT' RESPONSE

ANXIETY

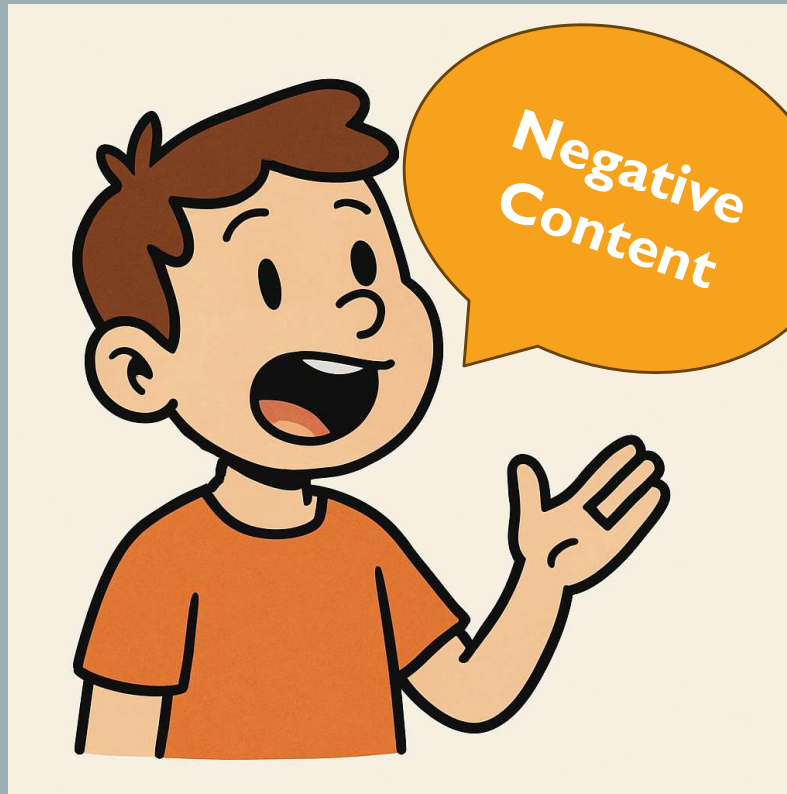
- Increase heart rate
- Constrict blood vessels
- Elevate cortisol levels



SPEECH & DEPRESSION

Slowed Speech
(Psychomotor
Retardation)

Impaired
Fluency and
Word-
Finding



Negative
Content

Reduced
Volume or
Monotone

Short or
Minimal
Responses

Social Withdrawal

SPEECH & ANXIETY

Increased
Use of Filler
Words (um)

Word-
Finding
Difficulties



Stammering
or
Stuttering

Fast or
Pressured
Speech

Voice
Tremors or
Shaky Voice

Dry Mouth
or Throat
Tightness

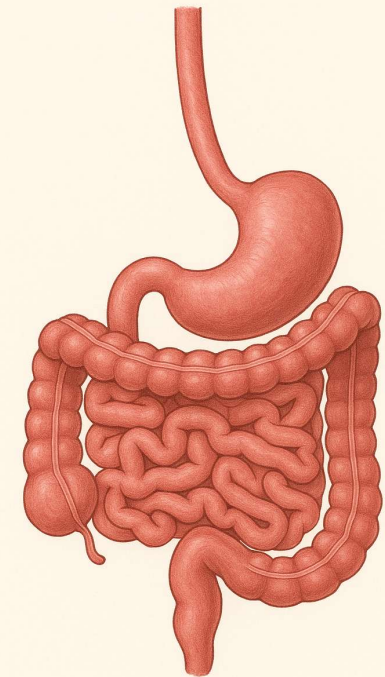
Depression

GASTROINTESTINAL ISSUES

Anxiety

- Strong gut-brain connection

- Nausea
- Diarrhea
- Constipation
- Irritable Bowel Syndrome (IBS)
- Impaired Digestion
- Abdominal Pain or Discomfort
- Poor Appetite
- Binge Eating
- Nutritional Deficiencies
- Weight Changes



GI TRACT

Depression

SLEEP DISRUPTION

Anxiety

Insomnia & Hypersomnia common in both disorders.

Depression is associated with both insomnia and hypersomnia



Anxiety may lead to insomnia, racing thoughts, and difficulty staying asleep



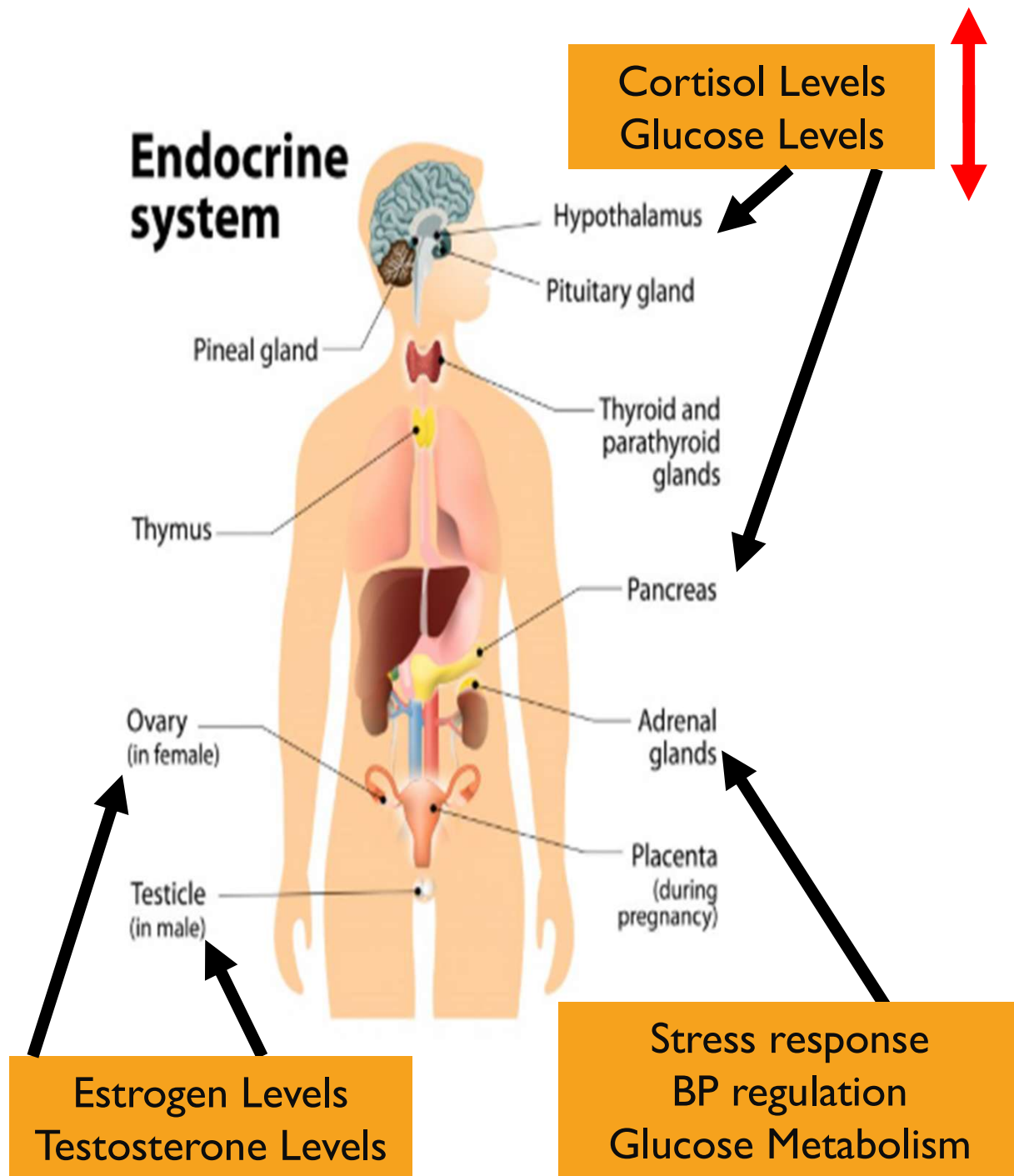
Poor sleep → exacerbates fatigue, impairs cognitive function, healing, decision making, and mood changes

Depression

ENDOCRINE SYSTEM

Anxiety

Endocrine system



Short-term

CARDIOVASCULAR SYSTEM

Long-term

Both Depression and Anxiety are associated with elevated risks for heart disease.

Depression

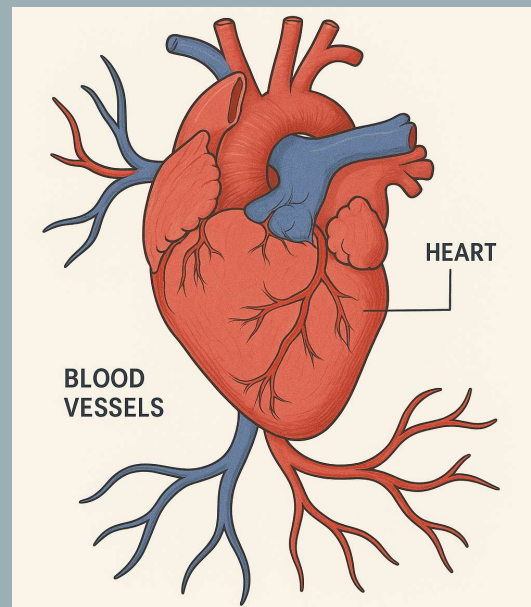
Persistent inflammation contributes to hardening of the arteries leading to atherosclerosis.

Anxiety

Elevated heart rate and blood pressure.

Palpitations, chest pain, or a racing heartbeat, symptoms that mimic or exacerbate heart problems.

Persistent increases in heart rate and blood pressure.



Damage blood vessels and increase the risk of heart attacks and strokes.

DEPRESSION

LUNGS

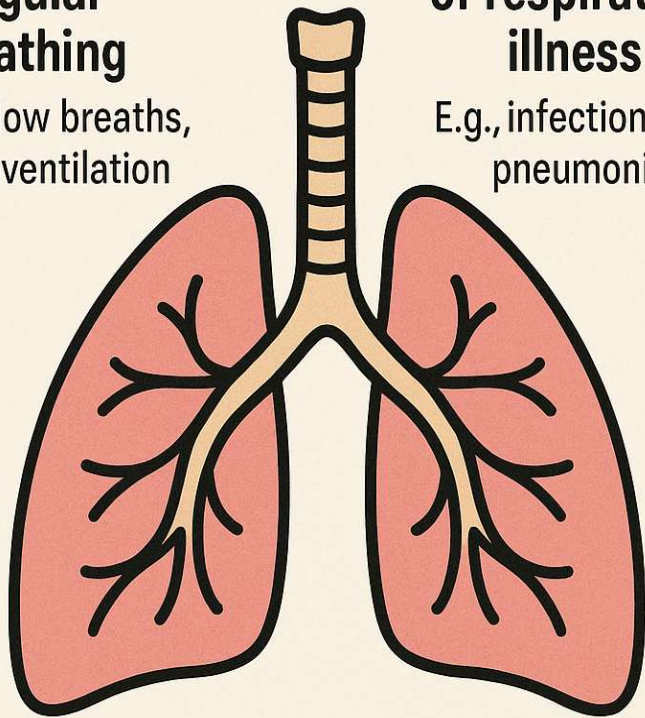
ANXIETY

Slower or irregular breathing

Shallow breaths, hypoventilation

Increased risk of respiratory illness

E.g., infections like pneumonia



Weakened respiratory muscles

Reduced lung expansion

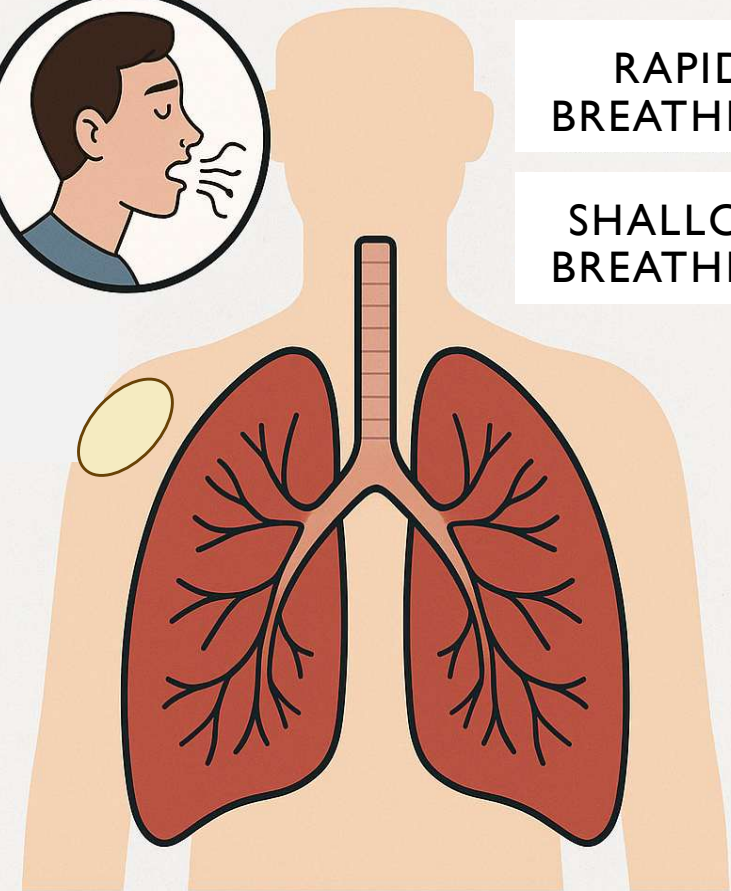
Worsening of pre-existing lung conditions

Worsened symptoms of asthma, COPD



RAPID BREATHING

SHALLOW BREATHING



- Sensation of Breathlessness

- Increased Awareness

- Chest Tightness

Depression

IMMUNE SYSTEM DYSFUNCTION

Anxiety

Prolonged stress and mood disorders can weaken the immune system.

Chronic Cortisol
Elevation

Increased Inflammation



Suppresses immune response

Greater susceptibility to illness

Slower recovery time

Sicker more often and longer

Depression

MUSCULOSKELETAL EFFECTS

Anxiety

- Muscle tension in neck, back, shoulders
- Chronic pain, stiffness and fatigue
- Psychomotor retardation
- Low exercise interest



Feeding into the emotional cycle of depression



LAST
BUT NOT LEAST

Depression

FATIGUE

Anxiety

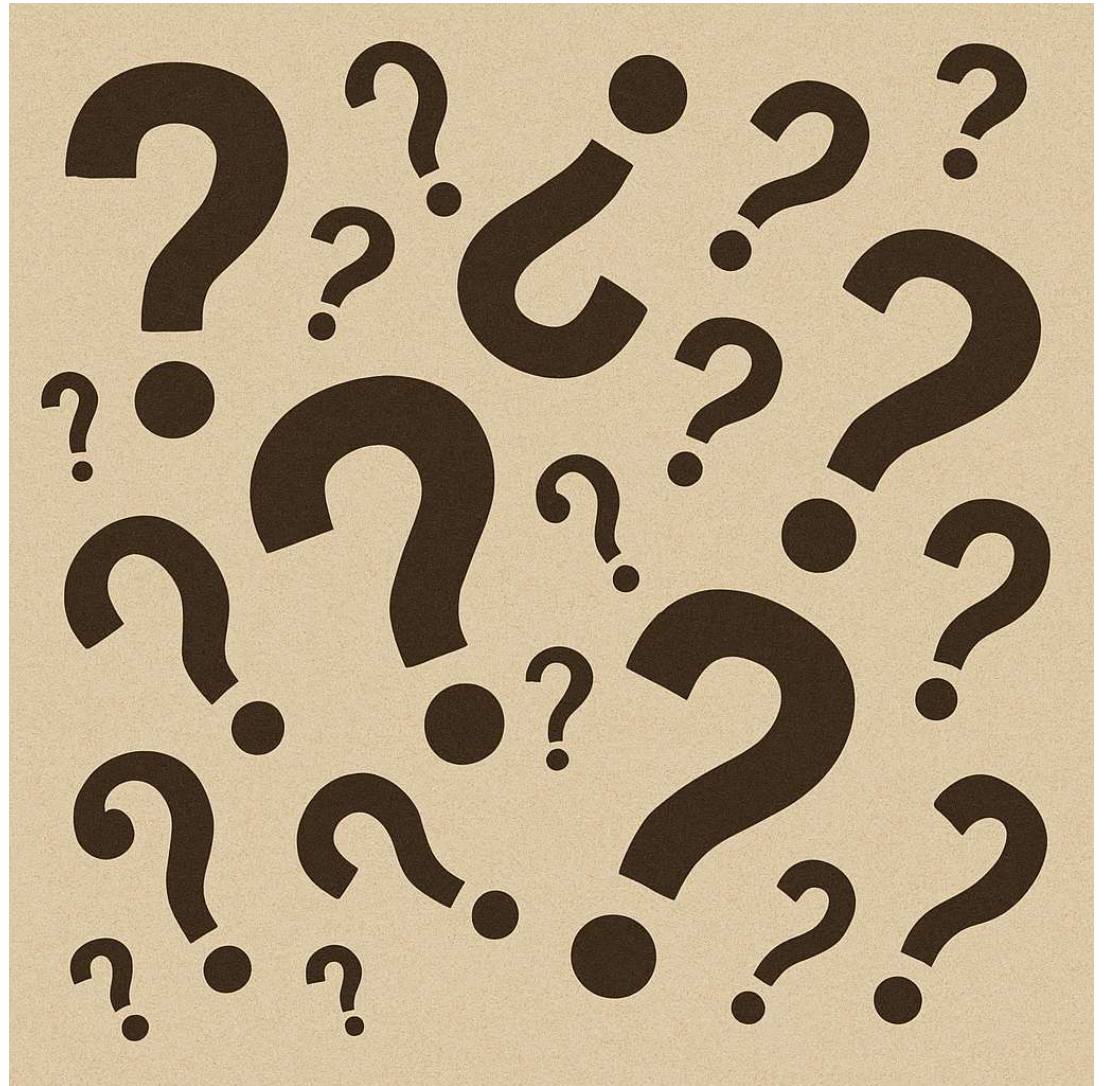
Fatigue exacerbates emotional and physical symptoms.

- Lack Motivation
- Delayed decision-making
- Lack of exercise
- Loss interest
- Inability chores
- Inability to work
- Poor focus
- Decreased social activity → isolation



Can be the **ONLY** symptom present.

NOW
WHAT
DO WE
DO
ABOUT
IT??



CHRONIC ILLNESS APPROACH

- Depression & Anxiety

- Type II Diabetes

APPROACH THE SAME WAY

ALL-INCLUSIVE APPROACH
NOT JUST MEDICATION

INITIAL WORKUP

- Assess History- **LISTEN**
- Assess Family History
- Assess Risks
- Physical examination

Tests-examples

If fast heart rate → cardiac workup

If headaches → lab tests to start

If pain → localized- maybe Xray

TREATMENTS

Symptom Management

Mental Health Management



#1 TREATMENT – A MUST

Reduces
Pain

Improves
sleep

Improves
energy
level



Improves
Digestion

Reduces
Fatigue

Reduces
cardiovascular
risks

START SLOW- 10 MINUTES WALKING

SELECTING MEDICATION

- ☐ Assess **whole** patient
- ☐ Assess **triggers**
- ☐ Assess **side effect** potential
- ☐ Offer choices, **if possible**
- ☐ Aware of **cost**
- ☐ Assess **compliance**
- ☐ Educate patient



Daily medication works **BEST** i.e., SSRIs & SNRIs
Always start LOW and SLOW

RECOMMENDATIONS

In addition to medications or as initial solo treatment option.



Individual
Therapy

Group Therapy



Meditation

Yoga



Walking

Music



Eating Healthy

Mindfulness

ENCOURAGE HOBBIES
PUZZLES, READING, MUSIC PLAYLISTS, GARDENING,
INSTRUMENT, & PAINTING.

DIETARY SELECTIONS



EXAMPLE--MUSIC PLAYLISTS

- Songs that empower you
- Songs that block worries
- Songs that make you smile
- Songs that make you MOVE
- Songs NOT linked to anyone



- Have a Nice Day
- It's My Life
- Tubthumping- I get knocked down

- Eye of the Tiger
- I Will Survive
- Hold on

FOLLOW-UP RECOMMENDATIONS

Common Practice

- Initially in 30-45 days especially if medication started.
- Every 3 months for 1st year.
- Every 6 months Year 2.

Assess:

1. Symptom status
2. Medication side effects and Compliance issues
3. Assess and necessary dose adjustments
4. Assess need for add-on medications
5. Discuss exercise, hobbies, counseling, status etc.

FOLLOW-UP RECOMMENDATIONS

Symptom Tracker

Identify TOP 3 Symptoms
Rate Scale 1-5 (5 Extreme)

Date	Insomnia	Crying Often	Pain in neck region
04/20/2025	4	5	4
05/20/2025	4	4	4
06/22/2025	2	3	3

REMINDER
—
PERMISSION
GRANTED

Not every bad day =
Depression or Anxiety
worsening.

You are **ALLOWED** to
have a bad day.

You are **ALLOWED** to
be sad and cry.

You are **ALLOWED** to
have a reaction to events.

You are **ALLOWED** to
have emotions.

CONCLUSION



DEPRESSION AND
ANXIETY IMPACT
NEARLY EVERY
BODILY SYSTEM.



HOLISTIC
TREATMENT
SHOULD ADDRESS
BOTH MIND & BODY.



INTEGRATED CARE
IMPROVES
OUTCOMES &
QUALITY OF LIFE.

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THANK YOU

Questions?

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