# Grief

**rief** (bereavement) is the emotional and physical response to the death of a loved one. Grief is associated with a wide range of emotions, including sadness, anger, guilt, and despair. Each individual may experience a different set of specific emotions, but, in general, these emotions diminish as time passes and with support from family and friends. The June 1, 2005, issue of *JAMA* includes an article evaluating a new type of **psychotherapy** (talk therapy) developed specifically to treat people with complicated grief.

### **ABNORMAL GRIEF**

Sometimes grief progresses from an emotionally painful but normal experience to a disorder requiring additional evaluation and treatment.

- Complicated grief may be present when the emotions are particularly long-lasting or severe and include inability to accept the loved one's death, persistent thoughts regarding the death, and preoccupation with thoughts about the loved one.
- Major depressive disorder should be considered when the duration of grief lasts more than 2 months and is associated with persistent feelings of guilt (other than those associated with the loved one's death), preoccupation with thoughts about death (other than the loved one's), feelings of worthlessness, psychomotor retardation (the slowing down of normal movements), and the inability to perform daily activities.
- Posttraumatic stress disorder may be present if the death occurred in a violent or traumatic manner, particularly if the patient also witnessed it. In these cases, the person has recurrent disturbing recollections of the death, avoidance of situations associated with the death, and increased arousal (activation), such as difficulty sleeping, difficulty concentrating, and anger outbursts.

### TREATMENT

Optimal treatment for abnormal grief depends on the specific condition (see above) and the individual's symptoms. Treatment should be based on an evaluation by your doctor, with possible referral to a **psychiatrist** (a medical doctor with specialized training in the treatment of mental disorders). In all cases, maintaining good general health through exercise, healthful diet, adequate sleep, and avoidance of alcohol and illegal drugs is important during the grieving process.

- Psychotherapy sessions with a psychiatrist or a psychologist (a professional trained in the nonmedical treatment of mental disorders)—during these sessions, the individual has an opportunity to discuss feelings of loss and learn ways to cope with the associated emotions.
- Mutual support groups—some persons may find it helpful to share their feelings with others who are having similar experiences.
- Medications—antidepressant medication may be prescribed to help alleviate some of the symptoms, particularly if a major depressive disorder is diagnosed. Short-term medication for sleep may also be helpful.



### FOR MORE INFORMATION

- National Mental Health Association 800/969-NMHA www.nmha.org
- National Institute of Mental Health 866/615-6464 www.nimh.nih.gov
- American Psychiatric Association 703/907-7300 www.psych.org

## INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page link on JAMA's Web site at www.jama.com. Patient Pages on depression were published in the June 18, 2003, and September 27, 2000, issues; and a Patient Page on posttraumatic stress disorder was published in the August 1, 2001, issue.

Sources: National Mental Health Association, American Psychiatric Association

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