



Living With Liver Disease

Depression

In the language of clinical psychology, depression is a syndrome: a cluster of emotional, physical and behavioral symptoms characterized by sadness, low self-esteem, loss of pleasure and, sometimes, difficulty functioning. If these problems persist over time, cause real suffering, and interfere with the business and pleasure of daily life, you may have a clinical depression.

In everyday conversation, people say they are depressed when they are feeling unhappy, down, blue, sad or hopeless. Living with a chronic health condition such as hepatitis or liver disease can be stressful and can lead to or exacerbate such feelings, especially when symptoms like fatigue are thrown into the mix.

If the feelings of depression are overwhelming or persistent, you may benefit from seeing a mental health professional, such as a social worker, psychologist or psychiatrist. Professional intervention can reduce suffering and improve your quality of life.

Suicidal thoughts or attempts are one of the most serious symptoms of depression. If you or someone you love is suicidal, you should take the matter very seriously and seek help immediately. A good first step can be calling the national suicide prevention hotline at 1.800.273.TALK (1.800.273.8255). You can also go to your local emergency room and tell them you are suicidal; they can keep you safe.

In the past, treatment for hepatitis C using peginterferon often caused depression. Fortunately, the newest drugs, known as direct-acting antivirals (DAAs), have radically changed the treatment landscape. These treatments are usually interferon-free, and in most cases, ribavirin-free. Ribavirin may cause mood swings, including depression. However, ribavirin is seldom used, and treatment with the newest DAAs has been a game-changer. In addition to lower risk of depression, the side effects tend to be much milder and treatment lengths are much shorter (usually around 12 weeks).

Before you begin a treatment regimen that includes interferon, it is vital to communicate with your clinician and possibly a mental health professional about any history of depression or other mental

illness you may have experienced. You should keep in close contact with such caretakers while you are on treatment and communicate any feelings of depression you may have, in particular if you have suicidal thoughts.

Before starting treatment for hepatitis or liver disease, tell your medical provider about any herbs, supplements, or drugs who are taking to avoid interactions with other medications. For instance, St. John's wort should not be taken if you are also taking Daklinza, Harvoni, Sovaldi or other DAAs.

Last Reviewed: June 29, 2023

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<http://beta.docker.hepmag.com/basics/liver-health/depression>