Dealing with your mental health, anxiety and depression
if you have a long-term lung condition

Living with a long-term lung condition can affect your life in lots of ways. You’ll have physical symptoms, like getting out of breath and feeling tired. But lung diseases can also affect your mood, and how you cope.

You’re not alone. Many people with a long-term lung condition feel anxious. Some people also have low mood or symptoms of depression. It’s very common to experience anxiety and depression together.

Anxiety and depression are different.

Symptoms of anxiety often occur with breathlessness, which can be frightening. Being anxious can make all of us feel out of breath. And if you live with a long-term lung condition, your main symptom may be getting short of breath. Being anxious makes this feeling worse and you may panic.

Symptoms such as coughing and breathlessness, may cause you to stay at home more and avoid physical activity. You might not sleep as well, and lose interest in your usual activities. You may feel that your breathing problems have stopped you doing what you love. This can leave you feeling angry, disheartened or hopeless. These emotions can be symptoms of depression.

People often experience symptoms of anxiety and depression at the same time. That, in turn, can make your lung condition worse.

“At the moment, depression and anxiety have taken hold of me as a result of a recent hospital admission while in recovery from a previous one and then pneumonia which has knocked me back and inflamed my lungs and throat and made me even more housebound and weak.”

Julie

But treatment is available to help support your wellbeing. Remember that many other people have experienced anxiety and depression and have recovered from them. They are both very normal reactions to living with a long-term lung condition.
Dealing with anxiety

**What is anxiety?**

Anxiety is a word we use to describe our feelings of unease, worry and fear.

Everyone experiences anxiety at some time. It’s a normal reaction to something we think is a threat or danger to us. We might feel tense, nervous or fearful in difficult situations, like taking an exam, moving house, having an interview or going into hospital.

These feelings usually go away. And – sometimes - feeling anxious can be helpful, making us more alert and improving our performance. But if these anxious feelings are very strong, or last for a long time, they can be overwhelming.

**What causes anxiety?**

Lots of things can cause anxiety, and anxiety affects different people in different ways. You may:

- be a natural worrier
- have experienced a distressing event in the past that makes you feel anxious and insecure
- have faced bereavements, redundancy or divorce
- feel stressed at home or work

Your physical health can also impact your mental wellbeing, especially if you are living with a long-term condition. You might get anxious if you don't feel in control of your condition. A stressful event like becoming breathless, having a chest infection or a stay in hospital might make you worry too.

"I'm anxious about being infected and what that means for me. If someone sneezes near me, or coughs, I flinch and become anxious of what that means if I get an infection - potentially hospital or another housebound period or both. If someone smokes my breath is taken away and my lungs close up so I am anxious when I see smokers on the streets"

   **Julie**

Living with a long-term lung condition can give you symptoms that make you feel anxious. Sometimes, symptoms like tightness in your chest or getting very tired easily are similar to feelings of anxiety.

"A recurrent anxiety situation for me: coming out of a warm environment to face cold weather and sudden extreme breathlessness to the point of wondering how I will be able to get home...The shock is akin to respiratory arrest - frightening to a point which does not correlate with severity of lung disease."

   **Fran**
Sometimes you might not know why you feel anxious at all and there may be no clear reason. If you don’t understand why you’re anxious, you can get in a downward spiral. You get anxious about feeling anxious, and so get even more anxious.

**What are the symptoms of anxiety?**
Anxiety can affect our body, thoughts and feelings in different ways. But our thoughts, feelings and behaviour are linked, and can create a vicious circle:
<table>
<thead>
<tr>
<th>What can happen to our bodies (physical symptoms)</th>
<th>Thoughts and feelings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faster, shallower breathing</td>
<td>Fearing the worst</td>
</tr>
<tr>
<td>Feeling sick</td>
<td>Feeling tense, nervous and on edge</td>
</tr>
<tr>
<td>Tightness or pain in the chest</td>
<td>You may feel worried that there is something wrong with your lungs or heart</td>
</tr>
<tr>
<td>Pins and needles in toes or fingers</td>
<td>Dwelling on negative experiences or thinking over a situation again and again</td>
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<td>Feeling faint or dizzy</td>
<td>Feeling numb</td>
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<tr>
<td>Tense muscles and headaches</td>
<td>Feeling restless</td>
</tr>
<tr>
<td>Sweating</td>
<td>Feeling unable to concentrate</td>
</tr>
<tr>
<td>Fast, thumping or irregular heart beat</td>
<td></td>
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<tr>
<td>Raised blood pressure</td>
<td></td>
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<tr>
<td>Difficulty sleeping</td>
<td></td>
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<tr>
<td>Needing the toilet more frequently</td>
<td></td>
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<tr>
<td>Churning in the pit of the stomach</td>
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**Panic attacks**

Some people have panic attacks. They can be regular, or occur once and never again. Panic attacks are when your body’s normal response to fear, stress or excitement is exaggerated, and you get a rapid build-up of physical responses. You might panic if a flare-up of your symptoms includes feeling a lot more breathless than usual. Your anxiety will, in turn, make you feel even more breathless.

The physical symptoms of a panic attack are caused by your body going into fight or flight mode. As your body tries to take in more oxygen, your breathing quickens. Your body also responds making your heart beat faster and you tense up.
So during an attack, you might feel you can’t breathe and:
• your heart pounds
• you feel faint
• you sweat
• you feel sick
• your limbs feel shaky
• you feel you’re not connected to your body

During an attack, people can often over-breathe or hyperventilate. This can make your breathlessness feel even worse. Learning and using breathing techniques can help.

How can I manage my anxiety?

Breathing techniques
Depending on what lung condition you have, there are different techniques. So it’s a good idea to speak to a physiotherapist to find out the best techniques for you. If you don’t already have one, ask for a referral.

As you try these techniques, stay calm and relaxed. This will help you breathe without using so much energy. It also helps keep the small tubes in your airways open. If you support your shoulders and arms in a relaxed way, your shoulder and neck muscles can work more efficiently. Tensing these muscles uses more oxygen and may increase your breathlessness.

Find out about:
Breathing control and breathing techniques at blf.org.uk/breathlessness/how-to-manage-breathlessness

“I was lucky to be invited to join a course of mindful breathing exercises which had excellent results for everyone who took part. Focusing on the breath as something to cherish and nurture is the best antidote to anxiety and low mood.”

Fran

Talk
Talking to someone you trust about your anxiety can help. You could:

• talk to someone close to you – a friend or a member of your family
• talk to someone with a similar lung condition at one of our Breathe Easy support groups, exercise groups, singing groups or on a PR course
• talk to your GP or practice nurse
“Regular links to others with a lung condition like mine in a patient support group is a huge resource for good. If you had seen us all at our recent Christmas lunch, the warmth, friendship, humour and understanding in the group would have been obvious. And the importance of frequent communication, including by email and Skype, with friends and family cannot be underestimated.”

Diz

**Keep active and exercise**

In an attempt to cope with breathlessness, some people become less active. But if you reduce your levels of activity, you can actually make your breathlessness worse in the long term. Choosing to make yourself **moderately breathless by being active** is actually good for your lungs and won’t harm you. In fact, keeping active builds up fitness in your muscles, and can improve your breathing and general health.

Keeping active will help to take your mind off your anxious thoughts. It will also help to keep you fit and can help you to sleep better. Exercise can help to reduce feelings of stress and tension.

“I like to keep myself busy, either in the garden or the man shed, walking as a regular pastime, and even expanding on my twice weekly exercise routine with the Breathe Easy group.”

Garry

You can also keep active by going to a pulmonary rehabilitation course, which combines both information and physical exercise and covers ways you can cope with feeling anxious and short of breath. It has been proven that pulmonary rehabilitation improves not only your fitness, but also your mental wellbeing. Ask your health care professional to refer you to your nearest programme.

**Keep a diary**

You may find keeping a note of what happens each time you get anxious or have a panic attack can help you spot patterns and triggers. You could also make a note of times when you’re able to manage your anxiety successfully.

You could use our [record of your mood form](#).

“Writing things down is always a good way to cope.”

Pat
Learn to relax

Relaxation is a way to stop anxiety once you spot early signs of tension. It involves being quiet, relaxing the muscles in your body, breathing slowly and deeply, and clearing your mind. Relaxation is a skill and, like any other, it takes time to learn.

There are many ways to relax. Some people can relax by exercising, listening to music, watching TV or reading a book. Other people use relaxation techniques and follow a set of exercises. You could do this on your own, or you could join a relaxation or yoga class. There are also lots of books and apps that could help you.

Try mindfulness

Mindfulness is a form of meditation that involves giving your full attention to what is happening in the present moment. Studies show that practising mindfulness can help reduce worry and anxiety.

It involves observing what is happening in your body, mind or surroundings in a non-judgmental way. It’s a way of approaching your thoughts and feelings so you become more aware of them and react differently to them.

You can learn about and practise mindfulness by joining a group, finding one-to-one help, using an online course or app or finding a self-help book.

“I do suffer from bouts of anxiety: making use of CBT approaches is helpful; so is keeping busy to ward off worries and allowing myself set worry times, and cognitive behavioural therapy. I find mindfulness, aromatherapy and facials relaxing. Walking too, but this can be difficult at times now.”

Margaret

Eat a healthy diet

You may find it easier to relax if you avoid stimulants such as coffee and alcohol. Some people also find eating a healthy diet also helps them manage anxiety better.
What treatment can I get for anxiety?
Before you go to see your health care professional, it may help to think about these questions, and take your answers with you:

Over the last two weeks, how often have you been bothered by the following problems? (Make a note of your answers)

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Besides pulmonary rehabilitation, your health care professional may offer:

- **talking treatments or counselling or therapy.** The most common one is cognitive behaviour therapy (CBT), because research suggests it can help people, including those living with a long-term lung condition.
- **self-help resources.** These have been developed by health care professionals for you to use by yourself. Have a look at NHS Choices Moodzone.
- **medication.** Your GP may prescribe antidepressants or other medication. But health care guidelines are that your health care professional should offer you other treatments first.

“As my health had deteriorated over the years, depression and anxiety have sat alongside each new diagnosis or change to health. I’ve been lucky and have had very supportive GPs and consultants who have referred me to NHS counselling. Over the years, I’ve had one-to-one and group sessions. The past two years have been hard as I’ve deteriorated a lot: my life has changed considerably and I can’t work as I could. For the first time I’ve taken anti-depressants in addition to talking therapy. The combination of medication and therapy seem to be helping, especially in relation to anxiety.”

Julie
Dealing with depression

What is depression?
Depression is a low mood that lasts for a long time, and affects your everyday life. It’s common – it affects nearly one in six people in the UK.

Having a long-term lung condition can be difficult to cope with. In some people, this can lead to depression.

In its mildest form, depression can mean being in low spirits. You may be able to continue leading your normal life, but everything may seem harder and less worthwhile. But at its most severe, people with depression might give up the will to live.

What causes depression?
Depression may have no obvious cause, or it can be set off for a variety of reasons, such as:
• long-term health problems, such as living with a lung condition
• difficult things that have happened in the past
• difficult events such as losing your job, the end of a relationship, bereavement or family problems
• other mental health problems such as anxiety
• side effects of medication
• alcohol

If someone already has depression, having a long-term lung condition may make their depression worse.

“I have suffered from depression in the past related to divorce. Hopelessness, debilitating grief and sadness are my main memories of an awful time. When I knew I was recovering, it felt like the sun had come out again after a very dark two years. I recovered completely and got back to work.

I’ve not experienced depression since and am not subject to low mood nowadays.”

Diz
What are the symptoms of depression?

The main symptoms of depression are losing pleasure in things that you once enjoyed and losing interest in people and your usual activities.

If you are depressed you will typically experience lots of negative thoughts as well as feelings of guilt and worthlessness. You may often criticise yourself and lack confidence.

<table>
<thead>
<tr>
<th>How we can feel</th>
<th>How we can behave</th>
</tr>
</thead>
<tbody>
<tr>
<td>Down, upset, sad and tearful</td>
<td>Avoiding social events and activities you usually enjoy</td>
</tr>
<tr>
<td>Restless or irritable and tired</td>
<td>Finding it difficult to speak or think clearly</td>
</tr>
<tr>
<td>Guilty, worthless and down on yourself</td>
<td>Difficulty remembering or concentrating on things</td>
</tr>
<tr>
<td>Empty and numb</td>
<td>Difficulty sleeping or sleeping too much</td>
</tr>
<tr>
<td>Isolated and unable to relate to people</td>
<td>Feeling more tired and having less energy than you usually do</td>
</tr>
<tr>
<td>Finding no pleasure in life or things you usually enjoy</td>
<td>Loss of appetite and losing weight, or eating too much and putting on weight</td>
</tr>
<tr>
<td>No self-confidence or self-esteem</td>
<td>Losing interest in sex; avoiding situations</td>
</tr>
<tr>
<td>Hopeless and despairing</td>
<td>Moving very slowly, or being restless</td>
</tr>
<tr>
<td>Suicidal</td>
<td>Self-harming and suicidal behaviour</td>
</tr>
</tbody>
</table>

People may have a single episode of depression but about half of people will have more episodes. Most people will feel better within four to six months of an episode of depression, while others have symptoms for much longer.

How can I manage my depression?

When you experience depression, it can be hard to find the energy to look after yourself, especially if you are living with a long-term lung condition too. But there are lots of things you can try to fight depression.

Keep active and exercise

Staying active and exercising is key if you’re depressed.

Try to keep active. This could be housework, walking to a local shop or any part of your normal routine. Try to get outside, perhaps for a short, slow walk. This will help you to keep physically fit, and you may sleep better. It can help take your mind off painful thoughts which make you more depressed.

“I was diagnosed over 15 years ago with severe COPD but my mood is only rarely depressed because of that. Maybe because I have always been a really active person both mentally and physically. I walk every day as fast as I can for about 20 minutes and try to be out and about as much as possible. I have lots of mental activity as well – I’m very interested in cosmology, number theory and other things of scientific interest. I also play bridge, do tai chi and, above all, singing for breathing which is absolutely brilliant.”

John T
Research has shown that pulmonary rehabilitation improves not only your fitness, but also your mental wellbeing. This course of information and physical exercise will cover ways you can cope with low mood. Ask your health care professional to refer you to your closest programme.

**Connect with other people**

Talk to your friends and family about how you feel. Be open and honest, write down how you feel and ask family members to help you notice changes in your mood. For example record when you get irritable or angry, as well as the times when you avoid doing things you normally would enjoy. But also when you’re having a good day!

Join a support group. This is a great way to meet people who are going through similar things and share tips. Visit [blf.org.uk/support-in-your-area](http://blf.org.uk/support-in-your-area) or call our helpline to find a Breathe Easy group near you.

If you don’t feel up to seeing people in person, send a text or email to keep in touch with friends and family. Or you could use online support. For example you could join our web community – have a look at [blf.org.uk/web-community](http://blf.org.uk/web-community).

“The importance of frequent communication, including by email and Skype, with friends and family cannot be underestimated”

Diz

**Look after yourself**

- **Eat well**: Try to eat a healthy, balanced diet, even though you may not always feel like eating. **Eat small meals more often** rather than three big meals. This can be much more comfortable for people with a lung condition.

- **Avoid alcohol**: Resist the temptation to drown your sorrows with excessive drinking. Alcohol makes depression worse. It may make you feel better for a few hours, but you’ll feel worse afterwards.

- **Get good sleep**: This will help to improve your mood and boost your energy levels. Have a look at [MIND’s tips and ideas](http://minds.org.uk) to help you have a good night.

**Notice what helps your mood**

Make a list of activities, people and places that make you feel happy or feel good.

Try to do something on the list you enjoy:

- arrange to meet friends
- ask a friend to visit you for a coffee
- phone someone you haven’t seen for a while
- cook a simple meal

Starting a new hobby can also be a good way to meet people, focus your mind and have some fun. Trying something new, like learning a new skill or trying new food can help boost your mood and break unhelpful patterns of thinking and behaviour.
Try these recommendations from others living with a lung condition:

“Tai chi – taking part in things to connect the body and mind help. Tai chi helps breathing too!”

“Take part in nature projects like 30dayswild – helps to reconnect you to the present.”

“Seek out things you love – I go to art, exhibitions and visit old friends. I try to always have things to look forward to.”

“Do what you enjoy – music, theatre, cinema, reading, cooking, walking.”

“Join a club. We go on outings and holidays with our retirement club.”

“Singing! With a choir is great, but round the house or in the bath will do!”

“Make phone calls and have friends round for coffee.”

Treat yourself
When you’re feeling down, it can be hard to feel good about yourself. Commit to do at least one positive thing for yourself every day.

This could be
- taking the time for a long bath
- spending time with a pet
- reading your favourite book
- doing a crossword or sudoku puzzle

Do you feel best at lunchtime, first thing or are you a night owl? Try to plan something then.

Learn to relax
You can help yourself relax using simple techniques like having a bath or making a warm milky drink. Take time out. It’s good to spend some time on yourself.

Keep a mood diary
This can help you keep track of changes in your mood. It can also help you notice if any activities, people or places make you feel better or worse.
You could use our record of your mood form.

“Keep a journal - not necessarily for daily entries but to note the better and not so good. It can be useful to look back on.”

Sue
Try self-help

These are resources that have been developed by health care professionals for you to use by yourself. Answer a **NHS Choices questionnaire** for some recommendations to suit you at: [nhs.uk/conditions/stress-anxiety-depression/mood-self-assessment/](nhs.uk/conditions/stress-anxiety-depression/mood-self-assessment/)

**Challenge your thinking**

If you’re depressed, you tend to have lots of negative thoughts. The trick is to alter how you respond. They’re often called automatic negative thoughts as you don’t plan to have them – they just pop into your head without you thinking.

Breaking the cycle involves:
- noticing when you have these automatic negative thoughts
- looking at the evidence for and against them
- finding ways to alter these to more realistic thoughts

Try this:

Write down what is making you feel depressed.

Now write down your thoughts about it. For example “I should never have started smoking”, “I have never been able to do that without help”, “I don’t look ill - they’ll think I’m trying it on”.

Now it’s time to question the automatic thoughts you wrote down. So write down any facts or experiences that support or contradict your automatic thoughts.

Ask yourself:
- **What evidence have I got to support that?** You may be exaggerating something bad or only looking at part of the picture or making assumptions.
- **Is there another way of thinking about this?**
- **What would anyone I look up to say to themselves in this situation?**
- **What would I say to them if they were thinking the same thing?**
- **How could I look at this situation so that I would feel less depressed?** Is this view as reasonable as what I was thinking in the first place?

Try to think of alternatives to your negative thoughts and write them down.

Keep working at writing down your thoughts and arguing with them. This is a new way of thinking and you’ll need to practise.
What treatment can I get for depression?

Before you go to see your health care professional, it may help to think about these questions, and take your answers with you:

Over the last two weeks, how often have you been bothered by the following problems? (Make a note of your answers)

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The sort of treatment you're offered will depend on how much your symptoms are affecting you and what sort of treatment you find helps you. The main treatments are talking treatments and medication.

Your health care professional may offer you:

- **Pulmonary rehabilitation** or another group exercise class
- Peer group support like our **Breathe Easy groups**
- Cognitive behavioural therapy (CBT)
- An antidepressant medication

If people have severe depression and are at risk of harming themselves, they may be referred to a specialist mental health service.

**Cognitive behavioural therapy or CBT**

CBT is based on the idea that the way we feel is affected by our thoughts and beliefs and how we behave.

People with depression tend to have negative thoughts, which can lead to negative behaviour. For example:

“I'm a failure” -> I stop doing things that I used to enjoy

“It's hopeless” -> I stop trying to do anything to make things better

This turns into a vicious cycle.
CBT aims to break this cycle. It encourages people to think about their problems and find ways to tackle them. It looks at unhelpful thoughts they may have or perhaps what they are doing (their behaviour). This helps them to identify negative thoughts or behaviour and develop ways to counteract them.

Your health care professional may offer you CBT on your own or with a group of other people. These sessions may happen over six to eight, or longer. Your health care professional should support you and review your progress.

You may be given an online course or a book or self-help manual, to work through. A health care professional will provide support and check progress either face-to-face or by phone. It’s usually about 6 sessions over about 12 weeks.

**ACT**

Acceptance and commitment therapy (ACT) is a form of therapy that uses techniques such as mindfulness and acceptance to help you through difficulties. Using ACT, therapists aim to change how you experience negative thoughts and feelings. You are taught methods to reduce the impact of these thoughts, so that if they reoccur you don’t experience them in the same negative way. There is still limited evidence supporting the use of new therapies such as ACT, but many therapists are already using these techniques to help their patients.
“Learning to adapt to life changes is one of the key aspects of counselling.

The depression that kicks in - of feeling worthless and angry at the body that won’t do what you want to, or could do, or look as it used to - is a battle and a constant fight. So too is the realisation that life has changed. You have to accept it, and so do those around you.

One thing I’m constantly learning is, acceptance helps us with how we communicate our limitations or what’s changed to those around us. It also helps us see solutions and break down barriers.”

Julie

Medication for depression
You may be offered a medication called an antidepressant either on its own or as well as a talking treatment.

Your health care professional should discuss which antidepressant is most suitable for you. They should take into account your long-term condition and any potential side effects the drugs may have. Some antidepressants cannot be taken alongside certain medication. Your doctor should talk through the risks and benefits of particular types and monitor you carefully.

You should usually be offered a type of antidepressant called a selective serotonin reuptake inhibitor or SSRI. Ones called citalopram and sertraline are less likely to affect any other medication you are taking.

Antidepressants do not start to work immediately - you won’t feel the benefits as soon as you start taking them. Doctors tend to start people on low doses.

If you don’t notice a difference in four to six weeks, your doctor may consider increasing the dose a little bit, or changing you to another medication.

Getting the right antidepressant and the right dose can take a bit of experimentation - be patient. Discuss any side effects with your doctor.

More information and support

Action Mental Health
amh.org.uk
Works to improve people’s mental health and wellbeing in Northern Ireland.

Anxiety UK
08444 775 774
anxietyuk.org.uk
Information and support for anxiety.

British Psychological Society
Bps.org.uk
Find a psychologist or read more about mental health.

Get self help.co.uk
getselfhelp.co.uk/
CBT self-help and therapy resources.
Get in touch with us to find support near you.

Helpline: 03000 030 555
Monday to Friday, 9am-5pm
Ringing our helpline never costs more than a local call and is usually free, even from a mobile.

helpline@blf.org.uk blf.org.uk

Hafal
hafal.org
Works in Wales with people recovering from serious mental illness and their families.

Journeys
gofal.org.uk/journeys
Guided self-help for depression available in Welsh.

Mental Health Foundation
mentalhealth.org.uk
Information on mental health.

MIND
Mind.org.uk
0300 123 3393
Information on mental health as well as support.

NHS Moodzone
nhs.uk/conditions/stress-anxiety-depression/
Self-help resource that includes a mood self-assessment

No Panic
0844 967 4848
nopanic.org.uk
Information and support for anxiety and panic attacks.

Relate
0300 100 1234 (for information on their services)
relate.org.uk
Relationship support, including families and parenting.

Samaritans
116 123
samaritans.org.uk
Helpline emotional support.

SANE
Support, information and guidance for people affected by mental illness, families and carers.
SANEline: 0300 304 7000 (daily, 4.30-10.30pm)
sane.org.uk/support

SAMH
0141 530 1000
samh.org.uk
The Scottish association for mental health operates services across communities in Scotland.

Phone apps:
Headspace
headspace.com/headspace-meditation-app
Guided meditation and mindfulness.

T2 Mood Tracker
www.moodtracker.com
Helps you track your emotional experience over time and share this with your health care professional.

actcompanion
actcompanion.com
The acceptance and commitment therapy companion app, based on the book, The Happiness Trap.

Books:
Russ Harris: The Happiness Trap
A mindfulness-based programme for overcoming stress, anxiety and depression.

Vidyamala Burch and Danny Penman: Mindfulness for health
A guide to relieving pain, reducing stress and restoring wellbeing.