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The diagnosis of depression appears recently in psychiatry history. It is in the early fifties when appeared in diagnosis summaries. Before, depression was understood as a regular symptom in the exploration, which was commonly observed under the use of other diagnosis like maniac-depressive disorder, schizophrenia, neurosis and hysteria.

Depression as diagnosis label in our daily clinical work is much more used in women than in men. There is a wide group of syndromes attached to reproductive woman life like premenstrual syndrome, puerperal psychosis and climacteric depression that finally contributes to different intensities of the depressive spectrum. Also women are the first consumers of antidepressant drugs in our culture. In men, many factors like alcoholism and cultural construction of masculinity based in inhibit emotional expression, explain that the prevalence of depression is less than in women.

In our work, we want to question why a diagnosis appears in one historical moment and why it is more applied to women than men, which are the factors involved in this process; therefore we wonder which elements of the performative discourse are shaping this diagnosis finally come real in clinical work.

To illustrate this, we will challenged the current data from a theoretic framework with different points of view as gender studies, science history and discourse philosophy.