

KUKUTHINI UKUDAKUMBA?

Yindalo ukuziva ukhedamile okanye unomoya ophantsi ngamanye amaxesha. Yinto eqhelekileyo eyinxalenye yobomi bemihla ngemihla. Xa umntu eziva ekhedamile okanye eneemvakalelo ezimbi eziphazamisana nendlela aqhele ukusebenza ngayo ezihlala ixesha elimalunga neeveki ezimbini, usenokuba uphethwe kukudakumba. Uphawu lokuqala lokudakumba luthanda ukuba lutshintsho ekuziphatheni okuqhelekileyo komntu.

Iimpawu eziqhelekileyo zokudakumba zezi:

- isimo apho usoloko uziva ulusizi, unxunguphele, okanye uziva “ulilize”
- ukungabi namdla okanye ukungazonwabeli izinto obuzithanda nezinto obuzenza obuqhele ukuzonwabela, kuquka nokwabelana ngesondo
- ukuziva ungenathemba nokuthanda ukubona ububi kuyo yonke into
- ukuziva unobutyala, ungenaxabiso, ungakwazi kuzinceda, uzisola
- ukungabi nakho ukulala ubuthongo, ukuvuka ngentseni, okanye ukulala kakhulu.
- ukwehla ekucaceleni ukutya okanye/ ukwehla esiqwini, okanye ukutya kakhulu nokutyeba
- ukungabi namandla, ukudinwa, nokuziva uphelelwe ngamandla
- ukungqunga, ukuba nobucaphucaphu, ukuba nobutshaba
- ukuba nzima ukuzikisa ingqondo, ukukhumbula, nokuthatha izigqibo
- iimpawu ezisemzimbeni ezizingisayo ezifana nentloko ebuhlungu, iingxaki zokwetyisa, neentlungu ezihlala zikho
- ukucinga ngokufa okanye ngokuzibulala, iinzame zokuzibulala

Kubalulekile ukuqaphela ukuba abantu abahlukeneyo bakuva ukudakumba ngeendlela ezahlukeneyo (umz. abantwana banokubonakalisa iingxaki zokuziphatha okungaqhelekanga). Kwabanye abantu ukudakumba akuphawulwa kangako yimo elusizi, koko kuphawulwa kukwanda kwesicaphu-caphu, iintlungu ezintsusa ingacacanga, okanye ezinye iimpawu.

IINTLOBO EZAHLUKENEYO ZOKUDAKUMBA

Kufumaneka iintlobo ezahlukeneyo zokudakumba, ezizezi:

- I Major depressive disorder (MDD): Ixesha lokudakumba okunzima xa inkoliso yeempawu zokudakumba ikho.
- I Dysthymia: Ezinye iimpawu zokudakumba zibakho ixesha elide.
- I Bipolar: Le ngxaki iphawulwa ngamaxesha atshintshanayo okudakumba kakhulu alandelwa kukudlamka ngokugqithisileyo. Olu hlobo lokudakumba lukwaziwa ngokuba “manic -depression”.
- Seasonal affective disorder: Ukudakumba kusenokwenzeka kuphela ngexesha elithile lonyaka, kuthanda ukwenzeka ebusika okanye ekwindla.
- Post-natal depression: Ukuziva ulusizi, unxunguphele, unobucaphu-caphu, unoloyiko lokuba akuzi



kukwazi ukumelana neemeko emva kokufumana umntwana.

NGABANTU ABANJANI ABAPHATHWA KUKUDAKUMBA?

Ukudakumba kukuphazamiseka kwempilo okuchaphazela abantu bazo zozibini izini, abantu abadala nabantu abatsha nazo zonke iintlanga, zonke izizwe nazo zonke iindidi zobume zoluntu. Malunga ne-10% yabantu jikelele iza kuba nengxaki yesigulo sokudakumba kuwo nawuphi na unyaka. Amabhinqa aphindwe kubini kunamadoda ukuba neempawu zokudakumba.

UNOBANGELA WOKUDAKUMBA

Iimeko ezininzi ezahlukeneyo zinokuba negalelo ekuqaliseni ukudakumba. Kumaxesha amaninzi, iba yindibaniselo yezi meko ethanda ukudlala indima ekuxhokoxeni isifo sokudakumba:

- Ukuba sesichengeni sokudakumba kungathi ubuncinane kubangelwe yimfuzo ngenxenywe.
- Ubume bengqondo neemeko zokusingqongileyo, ezifana nokwanda koxinzelelo lwengqondo okanye ukulahlekelwa zizinto zakho.
- Iimeko zempilo ezifana neengxaki zedlala lengqula, ukufa icala, umhlaza, nesifo esibizwa Cushing's disease.
- Amanye amayeza, afana neesteroyidi, awokuthintela ukuzala neepilisi zehayihayi.
- Ukutshintsha kwesifundo senzukululwazi ngokusebenza kwemithambo-luvo: Iimpawu zokudakumba zancedakala ngamachiza, afana ne serotonin ne/okanye noradrenaline, asenokuba nezinga elitshintshayo ebuchotsheni.

UNYANGO

Njengezinye izigulo, ukudakumba kuyanyangeka. Kwinkoliso yeemeko olona nyango lungcono lokudakumba yindibaniselo yamayeza nonyango lokuthetha ngeengxaki onazo (talk therapy). Amachiza alwa ukudakumba akarhurhisi okanye awenzi ukuba uwaqhele, kwaye angasetyenziswa ngaphandle kobungozi ixesha elide. Kukho iintlobo ezahlukeneyo zamachiza alwa ukudakumba kwaye ichiza ngalinye linganemiphumela emibi eyahlukeneyo, efana nesizaphu-zaphu, ukubona luzizi, ukozela, ukoma umlomo, neengxaki zesondo.

I Benzodiazepines (amachiza anyanga ukuxhalaba, ukudakumba kwakunye nokunye namayeza azolisayo) ngamanye amaxesha asenokumiselwa ukuba asetyenziswe ixesha elifutshane ukulawula iimpawu zoxunguphalo ezithanda ukuhamba nokudakumba. Ezi zenza ubungozi bokuba umntu azibone sele exhomekeke kuzo.

Olunye utshintsho oluhle lungabonakala kwangoko, kodwa eyona nzuzo ibonakalayo yonyango lokusebenzisa amayeza ingakungona ibonakalayo emva kweeveki okanye kweenyanga. Amayeza kufuneka asetyenziswe rhoqo, ngokomyalelo neengcebiso zogqirha wakho. Amayeza akufuneki ayekwe okanye kusetyenziswe amanye endaweni yawo ngaphandle kokuba udibane kwangaphambili nogqirha wakho kuqala.

Unyango lwengqondo ngokuthetha-thethana lungakunceda uziqonde, utshintshe iingcinga neemvakalelo ezimbi, ufunde iindlela ezintsha zokuziphatha kwaye umelane neemeko zobomi. Ukuthetha ngeemvakalelo zakho nangokudakumba nengcali eeqeshiweyo kunganceda ukunciphisa iimpawu.



Iindlela zokunyanga izifo zengqondo ngaphandle kwamayeza ezizezona zisetyenziswa kakhulu ukunyanga ukudakumba lunyango olugqalisela ukuqonda nokuziphatha kwesigulana (iCBT), unyango olugqalisela unxulumano lwakho nabanye abantu kungasetyenziswa mayeza, nonyango lokutshintsha kwengqondo kungasetyenziswa mayeza. Ukuzibandakanya neqela elixhasanayo, ukusebenzisa iindlela zokuphumla, ukuzilolonga, nokwenza iinguqu ebomini bakho kukhankanywe ngabaphandi ukuba yinto eluncedo ekulawuleni ukudakumba.

UNGENZA NTONI KWAYE UNGAYA PHI NA UKUZE UFUMANE UNCEDO?

Uninzi lwabantu abaphethwe kukudakumba bayancedakala kakuhle kunyango. Inyathelo lokuqala ekulweni ukudakumba kukuxoxa ngeempawu onazo nengcaphephe enamava, njengogqirha wosapho lwakho kwikliniki esekuhlaleni okanye kwisibhedlele sasemini.

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