

# DEPRESSION AND OLDER ADULTS

Depression and its debilitating consequences can strike anyone. However, for older adults, depression can be an especially difficult problem. A range of biological, psychological, and social changes may occur in older adults that place them increasingly at risk for late onset depression. Although many people, including many physicians, believe depression is a natural part of aging, **depression is not a normal part of aging. Further, when depression occurs, it responds well to treatment.**

## DEPRESSION IN MISSOURI

- ▼ The 2006 *Missouri Senior Report* notes that 6% of Missourians receiving in-home long-term care may suffer from major depression, while 19% may suffer from lesser depression, of which 40% were persistently depressed over one year. Older persons in nursing facilities experience drastically higher rates of depression.
- ▼ 75% of depressed older adults do not receive appropriate treatment, while 80% of nursing home residents fail to receive appropriate treatment.
- ▼ Suicide by older adults is often associated with depression, and is a major mental health concern in Missouri. Seniors commit a disproportional number of suicides for their numbers in the population. Males are especially at risk for suicide. The rate for males in Missouri aged 65-74 is 28.4 per 100,000; climbing to 38.2 for males 74-84; and peaking at 44.8 for those 85 years or older (aggregate data, 2002-2006).

## CONSEQUENCES OF LATE ONSET DEPRESSION

The following consequences underscore the public health burden and waste of human lives and resources that depression causes in our aging society.

- ▼ Diminishes the quality of life for the senior, as well as for friends and loved ones
- ▼ Depression increases the risk of substance abuse and substance abuse increases the risk of depression
- ▼ Depressed seniors are up to 3 times more likely to fall than those without depression
- ▼ Increased visits to emergency rooms and hospitalizations
- ▼ Unnecessary or premature nursing facility placement
- ▼ Increased medical costs
- ▼ Increased caregiver stress
- ▼ Decreased ability to plan and control thoughts
- ▼ Increased coronary heart disease (CHD) and increased mortality from CHD
- ▼ Increases by up to 60% the likelihood of developing type 2 diabetes
- ▼ Increased mortality
- ▼ Increased risk of suicide

## RISK FACTORS FOR LATE ONSET DEPRESSION

There is no single cause of depression, but the more risk factors an older adult has, the more friends, family, health care professionals, and others should actively screen for signs of depression. These risk factors include:

- ▼ Multiple chronic illnesses, including cancer, Parkinson's disease, heart disease, stroke, Alzheimer's disease
- ▼ Social isolation. Depression both contributes to and results from social isolation
- ▼ Alcohol or drug abuse (including prescription and over-the-counter drugs)
- ▼ Lack of mobility
- ▼ Pain
- ▼ Some prescription medications

## SIGNS OF DEPRESSION

- ▼ Especially for elderly persons, depression may not appear as a feeling of sadness or "the blues." Rather, it is often experienced as an uncharacteristic lack of pleasure in life, irritability, "crankiness," despair over the quality of life, helplessness, or anger.
- ▼ Physical changes, such as aches and pains, complaints, weight changes, appetite changes, fatigue, lack of energy, or a change in sleeping patterns.
- ▼ Emotional symptoms, such as an overall "empty" mood, apathy, crying without reason, or indifference.
- ▼ Slow or disorganized thinking, lack of concentration or memory problems, and indecisiveness.
- ▼ Thoughts of death or suicide.
- ▼ Behavioral changes, such as a loss of interest in previously enjoyed activities, sexual disinterest, and neglect of appearance or hygiene. They may also experience difficulty with ordinary daily tasks, withdrawal from people, and an increase in alcohol or other drug use.

## WHAT TO DO

Don't ignore noticeable changes in an older person's behavior or moods. These changes could be symptoms of depression or other conditions for which help is available. Seek medical and psychological evaluation which can lead to treatment that can return an older person to a productive and happy life. Helpful actions include:

- ▼ Supportive counseling that might include pastoral counseling or peer support.
- ▼ Support groups that link older adults to other persons going through similar problems. These provide a sheltered environment for sharing experiences, advice, and encouragement.
- ▼ Socialization activities that include "friendly visits," social groups, recreational activities, more involvement with family.
- ▼ Exercise
- ▼ Therapy from a mental health professional
- ▼ Antidepressant medications



For more information,  
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