

# September 2016 Newsletter



## Elderly Depression: Symptoms & Care



Does it seem like just yesterday that your mom lit up when you brought the grandchildren over? So why does she hardly smile and seem irritable around the kids now? Has your dad always been a lifelong baseball fan? So when did he start turning down box seat tickets at the ballpark? Sudden changes in mood and interest can signal more than just old age. The National Institute of Mental Health (NIMH) reports that elderly depression is not

only widespread but "a serious public health concern." Recent research suggests that as many as 15% of elders - that's 6.5 million Americans - suffer from depression, and still more, 25%, report that they suffer from persistent feelings of sadness.

### **SENIOR DEPRESSION: A "MAJOR PUBLIC HEALTH PROBLEM"**

Dr. Gary Kennedy, chief of geriatric psychiatry at Montefiore Medical Center and Albert Einstein College of Medicine in New York and a leading authority on elderly depression, calls the condition a "major public health problem." Kennedy says many health practitioners who care for the elderly are unprepared and unable to detect signs of depression. "Most don't ask the simple questions that screen for depression," he says.

To make matters worse, seniors themselves often ignore or hide their debilitating mental conditions. "Older adults are more sensitive to the mental illness stigma than any other group," says Kennedy. "They tend to think of mental health treatment as leading to mental hospitals or nursing."

While many elderly individuals may downplay their depression, the illness can have frightening consequences if not addressed. In older adult populations, it's common for depressed individuals to stop taking critical medications such as insulin treatment or prescriptions for serious heart conditions.

Research shows that elderly depression can double the risk of cardiac disease and increase the risk of developing other serious health conditions. In studies where nursing home patients with physical illnesses were examined, the advent of depression significantly increased the chance of death from those illnesses. In addition, non-depressed elders are more likely to recover from a heart attack, while depressed seniors have a greater chance of dying after a cardiac incident.

"Depression can be a deadly illness," notes Kennedy. "It's associated with suicide." In fact, the United States has seen a significant increase in the elderly suicide rate in the past 10 years, and many health experts blame untreated depression. Though adults over the age of 65 make up only 13% of the nation's population, they account for 20% of all suicide deaths, according to the National Institutes of Health.

### **WARNING SIGNS OF ELDERLY DEPRESSION**

While it's natural to experience some grief in the face of major life changes, clinical depression doesn't go away by itself, lasts for several months, and needs to be treated by a professional. If you suspect that your parent or loved one is suffering from depression, pay attention to these health indicators:

- **Irritability**  
Did your mother used to be a content and happy person, and is she now cranky and easily irritated by small things? Sudden mood changes can suggest depression.
- **Loss of Self-Regard**  
Kennedy and other experts say that one of the most obvious signs of depression in elders is seen when they show a lack of pride in their personal appearance. Perhaps your mother has stopped wearing makeup, or your father has stopped bathing.
- **Social Withdrawal**  
Did you have lunch with your dad every Wednesday, but now he's making excuses about why he can't join you? Depressed elders tend to take on the "hermit mentality," shutting out others and avoiding social situations.
- **Increased Pain**  
One of the greatest myths about depression, says Kennedy, is that it's only in the mind. In fact, "depression amplifies physical pain," he says.
- **Recent Illness or Surgery**  
Elders recovering from major illness or surgery, says Kennedy, are "much more likely to develop a depressive episode, and some go on to have a depression disorder." In fact, research shows that 15% of people who are discharged from a hospital leave with depressive symptoms.
- **Recent Loss**  
"Depression in bereavement is common," says Kennedy, who notes that elderly persons have a much higher risk than do younger people of plummeting into depression after the loss of a loved one.

While 50% of depressed elders will eventually recover on their own without any intervention, you shouldn't hesitate to help a senior loved one who is exhibiting the signs of depression to get treatment. "More often than not, the depressed senior is brought in by someone else," says Kennedy. That's good, he says, because studies show that elders who have a support network are more likely to pull through a depressive episode than those who are isolated.

When selecting a psychotherapist, look for someone who specializes in geriatrics (care for the elderly). According to Kennedy, there are only 3,000 such specialists in the nation, so you may have to look beyond your immediate city or town, but getting specialized care may well be worth the extra travel time.

## **TREATMENT OPTIONS FOR SENIOR DEPRESSION**

When it comes to elderly depression, each patient is different and requires a customized treatment approach to his or her unique needs and circumstances. Often the treatment plan will combine the following different approaches:

### **MEDICATION**

"Most studies show that only half of people treated with medicine get better," says Kennedy. Still, many respond well to medication. According to the NIMH, antidepressants influence the functioning of certain neurotransmitters in the brain. The newer medications, selective serotonin re-uptake inhibitors (or SSRIs) such as Prozac are generally preferred over older medications such as tricyclic antidepressants (TCAs) and monoamine oxidase inhibitors (MAOIs), because they are known to have fewer and less severe potential side effects.

Whatever the medication, each dose has to be properly administered to produce the desired effect. Many

practitioners, says Kennedy, "under-treat when it comes to depression in the elderly. They think older adults don't need the full dose. But they do."

## **THERAPY**

"With most treatment methods," says Kennedy, "if you add psychotherapy, you get the best results. Most people get medication only, but the best treatment is combined with psychotherapy."

Kennedy recalls one of his patients—an elderly Holocaust survivor in New York City. "Her mother died in the tragedy when she was a child, so throughout her life, she was very sensitive about being separated from her daughter," he explains.

But as her daughter grew up, she moved on and became involved with her own family and career. Feeling a tragic separation from her daughter, the 79-year-old woman sank into a depression. She stayed in, turned down social invitations, and developed a significant pain syndrome complete with severe headaches and weight loss. After a brief hospitalization for her symptoms, Kennedy was brought in to provide psychotherapy.

"Through psychotherapy, I encouraged her to stay active and do things that didn't depend on her daughter," says Kennedy. "Now she's totally independent. She goes to music and theater events all the time, and volunteers at a major museum. Through psychotherapy, we were able to keep her socially engaged, and she's done remarkably well."

## **ELECTROCONVULSIVE THERAPY**

For severe cases of depression that do not respond to medication, or where the depression is accompanied by schizophrenia or psychosis, there is the option of electroconvulsive therapy (ECT). This treatment uses electrical shocks to produce monitored seizures that release certain chemicals, or neurotransmitters, in the brain -- a process that can provide dramatic short-term improvement for depression. While extreme, ECT is generally considered by psychiatrists to be a very safe and effective procedure when performed under current guidelines.

## **DON'T LET YOUR LOVED ONE SUFFER**

So what's the bottom line about elderly depression? Don't let it go untreated. If you suspect your parent is suffering from minor or major depressive symptoms, encourage him or her to seek help. By making yourself a part of the solution, says Kennedy, you're "opening a door that the senior may be too embarrassed to open herself."

*by: A place for Mom*