
Recognizing Risks and Signs of Depression

Jean Bandos, MSN, GCNS-BC

Many older adults face a variety of significant life changes that can put them at risk for depression. Depression is not a normal part of growing older, but unfortunately is a widely *underrecognized* and *undertreated* illness in older adults. According to the Centers for Disease Control and Prevention (CDC), in 2004, people aged 65 and older represented 12% of the US population, but accounted for a disproportionate 16% of suicide deaths.¹ Depression screenings by primary care physicians can improve detection and treatment of depression before extreme actions, such as suicide, occur.

There are many reasons that depression commonly goes untreated. One of the main reasons is that many confuse depression with dementia because both illnesses affect a person's ability to concentrate and remember. Another reason is that physicians have the tendency to focus on illnesses affecting the *body* instead of the *mind*. Also, older adults have been taught to be independent and are accustomed to giving help, not receiving it. Some seniors feel they shouldn't "bother" their physician or their caregiver with feelings of loneliness and depression.

Symptoms of depression (Table 1) may be heightened or worsened during holidays or other significant times because of stress related to

unrealistic expectations, financial concerns, and being away from family and friends (Table 2). In addition, depression often coexists with other medical problems, such as heart disease, cancer, or other

chronic health conditions. Many people may be unaware of the issue or find it uncomfortable to discuss, so knowing and recognizing the risks and symptoms for early detection is extremely important.

Experiencing overload or anxiety can be very taxing for both the person who is depressed and the person(s) caring for them. The National Mental Health Association offers 12 steps that can help these people cope with the stress that comes with depression²:

- Set realistic goals and have realistic expectations.
- Let others share the responsibilities of special tasks.
- Live and enjoy the present; look into the future with optimism.

Table 1. Symptoms of Depression

- Constant sad, anxious, or "empty" moods
- Feelings of hopelessness or pessimism
- Feelings of guilt, worthlessness, and helplessness
- Loss of interest or pleasure in activities once enjoyed
- Decreased energy, fatigue, or feeling "slowed down"
- Increased or unexplained aches and pains
- Difficulty concentrating, remembering, or making decisions
- Insomnia, early-morning awakening, or oversleeping
- Appetite change causing weight loss or gain
- Thoughts of death or suicide; suicide attempts
- Restlessness or irritability

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- Don't compare one day with the good old days of the past. This can lead to disappointment.
- Those who are lonely should try to volunteer some time to others.
- Limit drinking. Excessive alcohol can increase feelings of depression.
- Get exercise or do some physical activity regularly.
- Spend time with supportive and caring people.

- Reach out and make new friends or contact a long lost friend or relative.
- Make time for yourself.
- Find free activities: travel with a friend through new areas where you live; go window shopping; or attend a free concert or program at your church, synagogue, or community center.
- Keep track of spending. Over-spending can lead to stress and anxiety when the bill arrives.

Table 2. Risks for and Causes of Depression

- Family history of depression
- Grief from the death or loss of a spouse or loved one
- Serious illness or diminishing physical capacity
- Social isolation
- A major unwelcome change in living environment or condition
- Some medications
- Alcohol or drug use
- Loss of independence (no longer driving, moving)

PROVIDER ACTION

Impact to You

According to the Centers for Disease Control and Prevention (CDC), in 2004, people aged 65 and older represented 12% of the US population, but accounted for a disproportionate 16% of suicide deaths. Depression screenings by primary care physicians can improve detection and treatment of depression before extreme actions, such as suicide, occur.

What You Need to Know

Healthcare practitioners need to be aware of the barriers that often prevent appropriate diagnosis of depression. These barriers include:

- Healthcare providers often confuse depressive symptoms with those of dementia or delirium.
- Physicians focus on illnesses that affect the body instead of those that affect the mind.
- Seniors are reluctant to report depression because of the culture of independence.

What You Need to Do

Healthcare practitioners can work not only to reduce the barriers to appropriate diagnosis of depression, but also to play an important role in encouraging the depressed senior to visit the office for treatment. By providing educational resources to caregivers and seniors, physicians can motivate patients to come forward for assessment. Getting a depressed older patient into the office is the first step in making the diagnosis.

Many adult children caring for a parent with depression feel as though they don't have the right to intrude on their parent's privacy. But, if an aging parent has any of the common depressive symptoms such as irritability, frequent crying, or weight gain or loss, it's important to assist him or her in making an appointment with a physician. Reinforce that these depressive symptoms are treatable and that the senior deserves to feel better, have more energy, and continue to age in place. *MPM*

Jean Bandos, MSN, GCNS-BC, is research director at My Health Care Manager. Jean is an experienced gerontological clinical nurse specialist with vast expertise in care management of the older adult. My Health Care Manager is a national company that helps seniors and their families manage the complexities of older adult life with unbiased professional guidance related to health and independence. For more information and advice, please visit www.my-healthcaremanager.com.

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