

DEPRESSION IN OLDER ADULTS

You may think depression is being sad and feeling blue, but it is more than that. Depression can be the feeling of grief you have after losing someone you love. It can also be the feeling of loneliness you have when you are at home by yourself. These types of depression may last for a short period of time, and then go away.

HEALTH NOTES



Depression that goes on for weeks and months is something that you should share with your doctor or a member of your health care team. You may be suffering from clinical depression – an illness that can be treated. Clinical depression can affect your mind and body; the way you think and feel.

Types of clinical depression

Major depression

Major depression makes normal activities, like sleeping or eating, hard. If you cannot remember the last time you were happy or it was a long time ago, you may have major depression. This type of depression can happen one time or many times. People with major depression need medical care.

Bipolar disorder or manic-depressive illness

If you have severe mood swings from extreme “lows” to extreme “highs” you may have bipolar disorder. This disorder usually starts in your early twenties and rarely starts for the first time later in life. Whatever your age now, if you have bipolar disorder you should received medical care.

For More Information

Visit kp.org/health

- Click on **Get health advice** and read about depression in the Health encyclopedia and Featured health topics.
- Visit message boards for information on Senior Health.

Call a Kaiser Permanente Medical Advice Nurse

- Talk to your medical advice nurse 24 hours a day, 7 days a week by calling (703) 359-7878 or 1-800-777-7904 or TTY (703) 359-7616 or 1-800-700-4901.

Symptoms of depression

If you have recently had a loss, the feelings listed below may be normal. However, if you’ve had more than 4 of the symptoms listed below for more than two weeks, make an appointment with your doctor soon.

- Constant sad, anxious, or “empty” mood
- Loss of interest or joy in normal everyday activities, including sex
- Less energy or feeling “slowed down”
- Trouble falling asleep, oversleeping, early-morning waking
- Loss of appetite or weight, weight gain
- Trouble concentrating, remembering, or making decisions
- Hopeless or negative feeling
- Guilty, worthless, or helpless feeling
- Thoughts of death, suicide, or a suicide attempt
- Irritable
- A lot of crying
- Aches and pains that come back and do not get better

Depression and other illnesses

Clinical depression can look like other illnesses with symptoms such as headaches, backaches, joint pain, stomach problems, or other physical problems. It is important to share with your doctor any symptoms you have. When depressed, you might focus more on physical symptoms rather than your feelings of anxiety, sadness, or fatigue. If you are depressed, you can also look like you have Alzheimer's. You may also have other medical disorders that cause memory loss and lack of concentration. Depression may also be caused by other physical problems or the result of medicine you are taking. This is common in older adults. This is why you need to have a complete medical exam. If your symptoms are caused by depression, you may get better with the right treatment.

Symptoms of mania

If you have mania your symptoms could range from moderate to severe. If it is moderate, only people close to you may see it. If you have four or more of the symptoms of mania listed below, make an appointment to see your doctor.

- Very large "high" mood
- Irritable
- Need less sleep
- Have much more energy
- More talking, moving, and sexual activity
- Thoughts racing
- Trouble making decisions
- Strange ideas
- Easily distracted

Causes of depression

There are many causes of depression. You can become depressed for one or many reasons. There are times when depression happens for no reason. Regardless of the reason, depression needs to be diagnosed and treated. Some common reasons older adults may become depressed are:

Other illnesses

Long-term or sudden illnesses like a stroke, heart disease, diabetes, Parkinson's disease, and hormonal disorders.

Medicines

Some side effects of medicines cause depressive symptoms. Different medicines can also interact in unexpected ways when taken together. It is important that your doctor and all the members of your health care team know the different types and dosages of medicine you are taking.

Genetics, family history and personality

If depression runs in your family, you are at higher risk of getting depression. Also children of depressed parents have a bigger chance of getting depression. If you have low self-esteem or feel very dependent on others, you have a higher risk for depression. Talking with someone can help you identify and remedy these causes and others that may be leading to your depression.

Life events

Have you experienced a loss recently or one that affected you greatly? The death of a loved one, divorce, moving to a new place, money problems, or any loss can be part of the cause of depression. If you do not have relatives or friends to help, you may have an even harder time coping with losses. Sadness and grief are normal responses to loss. If you have symptoms of depression that continue or are severe, seek medical care.

Seasonal affective disorder

Seasonal Affective Disorder (SAD) is a mental health problem that usually occurs in the months when there is less sunlight. There is no known cure for the disorder. However, it can be controlled, and it improves in the spring when there are more hours of daylight. The main symptoms include depressed mood, decreased energy, and food cravings. If you notice this pattern starting in the winter, try to go out into the sun as often as possible, take a vacation to a sunny place, and get regular exercise, either outdoors or indoors near a window that lets in sunlight.

Help for depression

If you have depression, it will not go away by itself. You are not too old to get help and it is not a sign of weakness. Depression is a treatable disorder. Even the most seriously depressed person can be treated successfully. Often in a matter of weeks, you can return to a happier and more fulfilling life.

If you believe you are depressed and need help, make an appointment with your doctor soon. Talk to your family and friends about it and ask someone to come to the your appointment with you. They can give you support, ask your doctor questions, and to learn more about available treatment methods. If you are having thoughts of suicide, seek medical help right away.

Preparing for your appointment

The following are a few suggestions to consider before your appointment:

Be honest with your doctor

It is tempting to say what you think your doctor wants to hear. You may tell your doctor that you have been getting good sleep, when you really have not been sleeping at all. It is important that your doctor know how you are feeling to give you the very best care.

Stay focused on the purpose of your visit

Your doctor may talk with you for a while. To make the best use of your time, stick to the point. Give the doctor a brief description of the symptoms. Let your doctor know when you noticed the symptoms and how often it happens. Your doctor will also want to know if your depression is getting worse or better.

You can help your doctor diagnose and treat your symptoms by being prepared to answer the following questions:

- What exactly are your symptoms?
- What was happening in your life when the depressed mood started?
- How long have you had your symptoms? Do they come and go or are they always around?
- Do the symptoms interfere with your daily activities? Which activities? How?
- Have you ever had a similar problem in the past? If so, how was it treated?
- What makes your symptoms better or worse? Have you tried self-treatment with alcohol, illegal drugs, or nonprescription remedies?
- What prescription or nonprescription medications are you currently using?
- Has anyone else in your family ever been diagnosed with any form of depression?

Ask questions and take notes

It can be difficult to remember what the doctor says. Take a note pad and pencil and write down the main points. Ask questions when you do not understand the meaning of a word or when the instructions are not clear. Your doctor will work with you to create an action plan that will work for you. Partnering with your doctor and health care team is important to help maintain your health.

Medicines

Your doctor may recommend a medicine to treat your depression. The most common medicines most often used to treat depression are selective serotonin reuptake inhibitors (SSRIs), such as Prozac®, Paxil®, Zoloft®, Wellbutrin®, and Effexor®. All medicines alter the action of your brain chemicals to help improve your mood, sleep, appetite, energy levels, and concentration. Different people may need different medicines. Sometimes more than one medicine is needed to treat clinical depression. Your doctor will help you find the right medicine for you.

After starting medicine, your symptoms will usually get better within weeks. However, it is usually recommended that medicines be taken for at least four to nine months after the symptoms have improved.

Psychotherapy

Another treatment option to consider is talking with a trained therapist. A therapist can help develop a short-term therapy plan focused on your specific symptoms of depression. Talking with a trained therapist can also be effective in treating certain depressions, particularly those that are less severe. Short-term therapies that are developed to treat depression focus on the specific symptoms of depression.

Cognitive behavioral therapy aims to help you recognize and change negative thinking patterns that may contribute to your depression.

Interpersonal therapy will help you focus on improving relationships that can help reduce the symptoms of depression.

At the end of your appointment

When you and your doctor are at the end of your appointment, make sure you understand the following questions:

- How long do you have to take your medication?
 - If the medication needs to be stopped for any reason, how should you stop it?
 - How often will you need to see your doctor? How long will your return appointments take?
 - Is any type of psychotherapy recommended as part of your treatment?
 - What can you do to improve your treatment? What should you stop doing?
 - If this medication does not work, are there other kinds you can take? What are they?
 - If someone questions why your doctor gave you medication, or tells you that there are dangers of taking medication, what should you tell them?
 - What dosage of medication should you take, at what time of the day, and how do you increase your dosage if necessary? (You should take notes.)
 - What should you do if you miss a dosage?
 - What are the possible side effects of your medication and what should you do if you experience a side effect?
- How can you access emergency medical care or reach your doctor if you experience severe side effects or worsening of your condition?
 - How long will it take to feel better and what will that feel like?
 - Are there risks associated with taking this treatment and, if so, how can you recognize them? (Talk to your doctor about any questions you have.)

Resources

- Visit National Institute on Aging (www.nih.gov/seniorhealth), a senior-friendly Web site that features popular health topics for older adults. It is simple to use, has large type and a 'talking' function that reads text out loud.
- Visit National Institute of Mental Health (www.nimh.nih.gov), for information on resources and publications.
- Visit National Mental Health Association (www.nmha.org), for mental health topics, advocacy, education, research, and service information.

To view an online Emmi® program about depression go to your doctor's **My Doctor** home page at kp.org/doctor and click on the Quick Link titled "Prepare for your procedure or manage your ongoing medicine condition (Emmi®)."

The information presented here is not intended to diagnose health problems or to take the place of professional medical care. If you have persistent medical problems, or if you have further questions, please consult your doctor or member of your health care team. Adapted from the National Institute on Aging, U.S. Department of Health and Human Services, Public Health Service, 2004.