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SENIOR LIVING

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RECOGNIZING DEPRESSION IN OLDER ADULTS

Depression is the most prevalent mental health problem among older adults.

Depression is not just a passing mood of sadness but an actual illness. This serious disorder can cause severe symptoms affecting sleep, nutrition, daily activities, and thought processes.

“Depressive disorder” or “clinical depression” may describe conditions that affect daily routines for extended periods of time. Many people who experience depression require treatment but they may delay or decline help, perceiving themselves as weak.

Older adults often associate a stigma with depression. They feel if they’re depressed, it means they don’t have the “backbone that they once had.”

It should be made clear that depression is a disease just like high blood pressure or any other; it is not something one is personally responsible for, and if not treated it may cause prolonged suffering.

Causes and Risk Factors for Depression

Contributors to depression include:

- Prior history—depression experienced at younger ages may relate to developing a disorder later in life
- Genetics—a family history of depression
- Stressful life event—a traumatic situation
- Physical illness—and related medications or impaired functional status
- Chemical imbalance— researchers have learned much about the biology of depression

Depression Is Not Part of the Aging Process

Studies indicate that despite physical illnesses, older adults are often content; however significant life events may lead to stress, anxiety or feelings of sorrow. These may include the death of a loved one, a serious illness (whether their own or affecting a loved one), job changes, moving, or entering retirement.

A subsequent adjustment period may lead to balanced emotional health; if it does not, treatment should be sought.

Common Symptoms of Depression

Depression may be indicated if several of the following symptoms continue for more than two weeks:

- Feelings of sadness, hopelessness, or vulnerability
- Unable to find pleasure in anything; uninterested in people or activities
- Struggle with concentration or memory
- Changes in sleeping or eating patterns
- Frequent lamentation or crying
- Irritability or restlessness
- Headaches, pain or digestive problems not relieved with typical treatments
- Excessive fatigue
- Thoughts of death or suicide

In older adults, depression can present with fatigue, trouble sleeping, irritability and confusion. The latter may appear similar to dementia disorder symptoms.

Moreover, there may be one or more co-existing conditions and associated medication side effects contributing to depression. Hesitation to discuss symptoms can lead to missed diagnosis and treatment.

Depression's Effects on Other Illnesses

Depression and other diseases including heart disease, cancer, and diabetes can adversely affect each other, and medications used to treat other illnesses may have side effects that contribute to depression. It is important to consult a doctor for an accurate diagnosis and treatment of depression, in order to better manage co-existing conditions.

Treatment and Therapy for Depression

Depression is one of the most successfully treated illnesses.

If you think you or someone you know may have depression, contact (or encourage them to contact) a primary care doctor or a medical provider who specializes in mental health, such as a psychologist or psychiatrist.

Because certain medications and some medical conditions can cause the same symptoms as depression, it is important to either rule out these possibilities or set the next step for managing the illness.

The most common treatments for depression are medication (such as antidepressants) and/or psychotherapy (often referred to as “talk therapy.”) The choice and length of treatment vary among individuals and should always be under the direction of a health care professional.

Steps to Lower the Risk of Depression

There are steps you can take to help yourself or a loved one cope with life events that can lead to depression.

Make preparations for major changes such as retirement or moving. Maintain communication with family and friends and share any feelings you may be experiencing. Take advantage of social support services in your local community.

An exercise routine and a balanced diet coordinated with your doctor may help to avoid illnesses that contribute to depression, and participation in hobbies or volunteer efforts may help to avert feelings of loneliness, sadness or unease.

Ask about our Live Exhilarated™ Program for ideas.

Get Immediate Help

If you have thoughts of harming yourself:

- Call a family member or friend for help; do not isolate yourself.
- Call your doctor.
- Call 911 or go to a hospital emergency room.
- Call the toll-free 24-hour National Suicide Prevention Lifeline: 1-800-273-TALK (1-800-273-8255) or 1-800-799-4TTY (1-800-799-4889).

Resources

American Psychological Association
800-374-2721 (toll-free)
202-336-6123 (TDD/TTY)
www.apa.org

National Institute of Mental Health
866-615-6464 (toll-free)
866-415-8051 (TTY/toll-free)
nimhinfo@nih.gov
www.nimh.nih.gov

National Suicide Prevention Lifeline
800-273-8255 (toll-free/24 hours a day)
800-799-4889 (TTY/toll-free)
www.suicidepreventionlifeline.org

Depression and Bipolar Support Alliance
800-826-3632 (toll-free)
www.dbsalliance.org

References:

National Institute on Aging (NIA), Centers for Disease Control and Prevention (CDC)