

# Elderly Depression

Major depression (also known as clinical depression and/or unipolar depression) is an illness that can affect both the brain and body. It is a chemical imbalance in the brain and can strike people regardless of age, race or economic position. The illness can appear after a triggering event or for no apparent reason and on average is left untreated for up to eight months. It is a myth that depression is part of the aging process. It is NOT normal for people of any age to suffer from depression; this includes our elderly population.

## Symptoms that may present differently in the elderly:

- Complaints of aches and pains (back, stomach, arms, legs, head, chest), fatigue, slowed movements and speech, loss of appetite, inability to sleep, weight increase or decrease, blurred vision, dizziness, heart racing, anxiety, moving in a slower manner that is noticed by others around them.
- Inability to concentrate, remember or think straight (sometimes mistaken for dementia). An overall sadness or apathy, withdrawn; unable to find pleasure in anything; inability to sleep or sleeping often
- Irritability, mood swings or constant complaining; nothing seems to make the person happy.
- Talk of worthlessness, not being needed anymore, excessive and unwarranted guilt.
- Frequent doctor visits without relief in symptoms; all tests come out negative.
- Alcoholism can mask an underlying depression.
- Social Withdrawal (Not wanting to participate in activities that usually make them happy).
- Demanding behavior or constant need of assistance.



## Warning signs of suicide:

- Talking about wanting to die or to kill oneself.
- Looking for a way to kill oneself.
- Talking about feeling hopeless or having no purpose.
- Talking about feeling trapped or being in unbearable pain.
- Talking about being a burden to others.
- Increasing the use of alcohol or drugs.
- Acting anxious, agitated, or reckless.
- Sleeping too little or too much.
- Withdrawing or feeling isolated.
- Showing rage or talking about seeking revenge.
- Displaying extreme mood swings.

*It is critical that before a diagnosis of depression is made, a complete physical examination is completed.*

Other physical diseases (Parkinson's, multiple sclerosis, diabetes, thyroid disorders, certain viral infections, strokes, tumors) and certain medications (steroids, hormones, blood pressure and arthritis medications) used to treat those illnesses can mimic the symptoms of depression; they can CAUSE a chemical imbalance in the brain. Therefore, a thorough exam is extremely important, as well as a complete medical history and list of medications currently being taken (both over-the-counter and prescription drugs). Family history of depressive illness should also be noted, due to the genetic component of brain illnesses. A dialogue with the individual may be useful in determining if your friend or family member is in danger. Never keep suicide a secret.

Untreated or mistreated depression can result in suicide.

## Depression is treatable and suicide can be prevented

Nearly 90 percent of people with clinical depression can be treated successfully with medications, psychotherapy, or a combination of both. Some depressions may respond best to electroconvulsive therapy. ECT is an effective treatment that is used in extremely severe cases of major depression when very rapid improvement is necessary, or when medications cannot be used or have not worked. An improved procedure makes this treatment much safer than in previous years, and is gaining popularity for those who fail to improve with medications and psychotherapy. Recent studies have also proven that aerobic exercise can assist in treating mild depression (NAMI, 2014).

*The National Council on Aging report that nearly 20% of individuals over 65, suffer from clinical depression and that the suicide rate is the second highest among the elderly population.*