Depression in Older Adults

Depression is an illness that often gets ignored in our elderly population, even though it’s not a normal part of aging. The signs and symptoms of depression seen with younger age groups are often not the same with our elders. Seniors may not always be able to talk about their feelings or identify the source of their problem or pain. However, a recent study shows that about one-third of elderly patients who come to the emergency room for something else also show signs of depression.

Seniors most at risk include those who:
- Have outlived a spouse
- Have multiple chronic conditions
- Have poor social support
- Are experiencing cognitive impairment, such as dementia
- Are having financial difficulties

Health care providers are in a unique position to screen for depression and identify an individual who may need a more comprehensive evaluation. A short screening test may consist of asking questions such as:
- Are you basically satisfied with life?
- Do you find yourself often bored?
- Do you prefer to stay at home, and not go out?
- Have you often felt helpless?
- Have you recently felt little pleasure or interest in doing things?

Prevention is the best treatment. Identifying sources of stress, treating associated chronic conditions and having a strong support system are useful coping mechanisms. But, if help is needed, the first step is to recognize that you cannot handle the problem alone. Thoughtful friends and relatives who suggest that “all will be fine” may not know how to help.

A health care provider can determine treatments or courses of action that can address the causes. Alternative therapies may work for some but not all individuals. Sometimes, medications to ease the symptoms may be needed for relief. If you have a concern, contacting your health care provider is the best place to start.

Many people with depression do not seek treatment

An estimated 15 million Americans struggle with depression in a given year. But how many of those who are living with depression are actually treated? A new study found an alarming discrepancy.

The research, published in the journal JAMA International Medicine, found that less than a third of people who screen positive for depression are actually receiving treatment.

For the study, the researchers looked at self-reported survey data of more than 46,000 people. While they found that approximately eight percent had depression, less than 30 percent of those people received treatment during the year when the survey was conducted.

Dr. Judy Woodburn, an Advocate Medical Group clinical psychologist at BroMenn Medical Center in Normal, Ill. says reasons include:
- Lack of knowledge of appropriate treatment resources.
- Limited access to appropriate treatment due to lack of insurance, financial limitations, limited resources in the patient’s community, lack of transportation and inability to get time off work.
- Stigma around mental illness. For example, in some cultures, seeking help outside the family is frowned upon and may prevent someone from receiving help.

In order to increase the likelihood of treatment, the message needs to change. “Depression is treatable,” says Sarah Katula, an advanced practice nurse in psychiatry at Advocate Good Samaritan Hospital. “With mild to moderate depression, there is evidence that talk therapy is the most helpful treatment option and with more severe depression, medication and talk therapy combined were found to be the most helpful.”

Faith communities can take the lead in reducing the stigma and shame that may prevent someone from seeking treatment by openly talking about mental illness just as we would about any other illness and encouraging people to get the help they need.

Dear God, grant me the strength and guidance to understand this illness better so that I can get the treatment I need and see myself as the beautiful person you have created.