Depression in Older Adults

Everyone feels sad at times. It is a natural part of life but when the sadness persists and interferes with everyday life, it may be depression. Depression is not a normal condition of aging. Depression is a serious, but treatable illness that according to the Geriatric Mental Health Foundation (2005) affects approximately 15 out of every 100 adults over the age of 65 in the United States. Caregivers have an increased risk of depression. Of the 65.7 million adult caregivers in the United States, approximately 40-50% of caregivers experience depression at some point.

Some of the risk factors for older adults developing depression include:
- Recent loss of a loved one or pet
- Changes in medications or newly prescribed medications
- Presence of another illness or after a stroke, bypass operation or hip fracture
- Severe and chronic pain
- Living alone and feeling socially isolated
- Hormonal changes in women
- Family history of depression
- Alcohol and or drug misuse including over the counter or prescription medicines
- Memory Loss disorder

Signs and symptoms of depression in older adults
Recognizing depression in older adults is not always easy. It is often difficult for the person to describe how he or she is feeling. Older adults may also hide their depression as they fear being labeled crazy or worry that it is a sign of weakness. Depression can happen to anyone.

People may also believe that they will "snap out of it" and "get over it". However, someone suffering from depression cannot just "snap out of it". Depression is a biological disorder and medical illness that requires diagnosis and treatment by professionals. Untreated it may last months or years. When depression is diagnosed and treated, more than 80% of those suffering from depression recover.

Warning Signs of Depression
Key to recognizing depression in older adults is being aware of the signs and symptoms of depression.

Depression signs and symptoms include:
- Persistent sadness, lasting 2 weeks or more
- Fatigue
- Abandoning or losing interest in hobbies or other pleasurable pastimes
- Social withdrawal and isolation (reluctance to be with friends, engage in activities, or leave home)
- Weight changes
- Sleep disturbances (difficulty falling asleep or staying asleep, oversleeping, or daytime sleepiness)
- Loss of self-worth (worries about being a burden, feelings of worthlessness, self-loathing)
- Increased use of alcohol or other drugs
- Fixation on death; suicidal thoughts or attempts

Depression without sadness.
While depression and sadness might seem to go hand and hand, many depressed older adults don't claim to feel sad at all. They may complain, instead, of low motivation, memory problems, confusion, a lack of energy, or physical problems. In fact, physical complaints, such as arthritis pain or headaches that have gotten worse,
are often the predominant symptom of depression in an older adult. You don’t have to experience all of the symptoms. People experience depression differently.

Older adults who deny feeling sad or depressed may still have major depression. Here are clues to look for:

- Unexplained or aggravated physical aches and pains
- Feelings of hopelessness or helplessness
- Concentration/Memory problems
- Trouble making decisions
- Lack of motivation and energy
- Loss of interest in socializing and hobbies
- Slowed movement and speech
- Pacing and fidgeting
- Irritability and intolerance
- Excessive anxiety and worries about finance and health problems
- Neglecting personal care (skipping meals, forgetting meds, neglecting personal hygiene)

What to do if I or my loved one is depressed?

Depression drains your energy, hope, and drive, making it difficult to do what you need to feel better. Although overcoming depression isn’t quick or easy, it is possible to get better. You can’t beat it through sheer willpower, but you do have some control—even if your depression is severe and persistent.

The key to feeling better is to start small and ask for help.

The first step is to make an appointment with your physician. He/she will be able to assess and discuss treatment options with you. The most common treatment for depression involves a combination of medicine, support (such as, counseling/therapy or support groups), and gradual reconnection to activities and people.

If you don’t feel comfortable talking with your physician, consider a friend, a confidant or your religious/spiritual advisor. Don’t hold it in.

Exercise is the elixir of life. Increase your endorphins, natures’ antidepressant. Walking is easy and even 10 minutes a day can give you a boost.

If you or your loved is suicidal, seek urgent professional help. Call 911.