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Kathy Bosch

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Depression in Later Life

By Kathy Bosch, Extension Specialist, Family Life Education

We all understand feeling sad or “blue” from time to time. Personal losses or crises can leave us with low energy and a sense of unhappiness. These reactions are a normal part of living. But depression and depressive symptoms in the older individual present unique challenges. It is easy to dismiss the symptoms as a normal part of aging. Sleeping problems, agitation, fatigue, isolation, loss of appetite, or a preoccupation with physical complaints may be seen as an older person “just being fussy.” But depression is a serious concern that can hamper physical well-being. If properly treated, the older person with depression can live a happier, healthier life.

Symptoms of Depression

- a persistent sad, anxious mood
- loss of interest in ordinary activities, including sex
- decreased energy, fatigue, or increased restlessness
- changes in eating habits, weight gain or weight loss
- changes in sleep patterns, insomnia, oversleeping
- difficulty concentrating, remembering, making decisions
- feelings of hopelessness or pessimism
- feelings of inappropriate guilt
- thoughts of death or suicide
- irritability
- excessive crying
- recurring aches and pains that don’t respond to treatment

In older adults, additional symptoms may be present:

- memory and attention problems that appear to be dementia
- complaints of aches and pains with exaggerated and recurring fears about physical problems

What Causes Depression?

Depression in an older person can be short-lived and could be a result of an inability to cope with multiple stressful situations. For example, extended grief over the loss of a loved one can develop into depression if the grief is not resolved. If an older person has a significant change in lifestyle — loss of financial security, a move to a nursing home or supervised

living facility, loss of physical independence — the person may develop depressive symptoms. Depression can be an intense, whole-body disorder that occurs for no apparent reason. It can occur without warning if there is a family history or if a person had a problem with depression at an earlier age.

For some adults, depression can be related to a physical illness. Diabetes, thyroid disorders, Alzheimer’s disease, stroke, congestive heart failure, cancer and Parkinson’s disease are some examples of physical illnesses that may be associated with symptoms of depression. This is significant in older adults who may be dealing with various illnesses and taking a number of medications for treatment. Medications can be responsible for causing depressive symptoms. It is important to determine whether one, or a combination of medications, may cause a person to feel depressed.

Seek Treatment

Persons suffering with depression need professional assistance through medication therapy or psychotherapy, which is talk therapy. Persons with depression may also benefit from biofeedback or relaxation training.

Did You Know?

- Nine out of 10 adults with depression respond to treatment.

If You or Someone You Know Needs Help, Please Call:

National Mental Health Association (NMHA),
1-800-969-NMHA;

National Association for the Mentally Ill (NAMI) Helpline,
1-800-950-6264;

The Center for Mental Health Services Information Line,
1-800-780-CMHS; or Nebraska Mental Health,
(402) 479-5126;

Nebraska Mental Health Consumer Help Line,
1-800-836-7660;

Nebraska State Department of Aging, **(402) 471-4617;**

or your local mental health office or community services.

References

A Mental Health Guide for Older Kansans and Their Families, 2000.

Nebraska Mental Health, Substance Abuse and Gambling Services, 2000.

Panhandle Mental Health Services, Scottsbluff, Neb., 2002.

Panhandle Community Services, Scottsbluff, Neb., 2002.

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