DEPRESSION

A GUIDE FOR OLDER AMERICANS

DVD INSIDE

ACP
AMERICAN COLLEGE OF PHYSICIANS
INTERNAL MEDICINE | DOCTORS FOR ADULTS

PENN Geriatrics
UNIVERSITY OF PENNSYLVANIA HEALTH SYSTEM
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When an older person starts to lose pleasure or interest in activities, it might be a sign of depression.

Many of us feel sad, empty, or worried at times. Such feelings may increase with age. Sometimes when a person is not feeling well, it could be a health condition called depression.

When an older person starts to lose pleasure or interest in activities, it might be a sign of depression.

If unexplained aches and pains appear and persist, this too may be a sign of depression.

Depression may seem like a natural part of aging, but it’s not. Depression is a health condition.

With the right treatment, a person with depression can feel much better, at any age. This guidebook and DVD are designed to help you:

- Find out if you might have depression.
- Work with your healthcare professional.
- Take charge of your health.
Recognizing Depression

Depression is common in older adults. It might affect at least 1 of every 5 older adults.

Depression may be more common than many of us realize. Family members can help by recognizing symptoms of depression. They can also help make sure that a person with symptoms of depression gets evaluated.

Although it is common, depression can be hard to recognize in older adults. Therefore, it often goes undiagnosed. Many seniors don’t get treatment that could help them feel better.

To someone who is not familiar with depression, the symptoms might seem like severe memory loss or another age-related condition. Although depression may seem like a normal part of aging, it is not. It is a treatable health condition.

Sometimes, physical pain, or constant aches and pains, may be the only symptom of depression in an older person.

Double Disease

About 1 of every 4 older Americans with a chronic illness also has depression. This includes people with heart disease, arthritis, Alzheimer’s disease, lung disease, cancer, and other conditions.

If a person with depression also has another health condition, depression might worsen the other condition. Also, it may be hard to separate symptoms of depression from those of another condition. When a person is diagnosed with another health condition, it may be easy to focus on that condition and overlook depression.

One recent study found that depression increases the risk of diabetes in people 65 and older. Having symptoms of depression raises an older adult’s risk of type 2 diabetes by 50 to 60 percent, the study found.
Finding Out, Feeling Better

If you think you might have depression, see your doctor or other healthcare provider. A healthcare professional can determine if you have depression.

People do not need to spend their final years feeling empty, sad, or helpless. Most of those who get treatment for depression find that it helps them feel much better. Getting depression diagnosed and treated might increase a person’s enjoyment of life. It might even help prevent premature death.

Finding out if you have depression is the first step toward feeling better.
**Risk Factors**

Are you at risk for depression? Or do you have a parent, spouse, or other family member who may be at risk?

Anyone can get depression. It can occur at any age. Having a family member with depression may increase a person’s risk. Drinking too much alcohol may also increase the risk of depression.

Men often get depressed, but studies find that women experience depression about twice as often as men.

**Daily Experiences**

Older Americans often have experiences that may increase their risk for depression. Do some of the following apply to you or your loved one?

- **Living alone.**
- **Losing a spouse.**
- **Having little or no social support.** Some people have too few friends or activities outside of the home. Some aren’t getting the help they need with activities of daily living.
- **Having chronic pain.**
- **Having trouble sleeping (insomnia).**
- **Being a caregiver.** Caring for a loved one with a major illness can take its toll on the caregiver.
- **Having a disability.** The challenges of losing the ability to walk around or losing vision can raise the risk of depression.
- **Having a chronic health condition.** Having a stroke, heart disease, osteoporosis, chronic pain, or diabetes may raise a person’s risk for depression.
- **Taking certain medications.** Some medications can raise a person’s risk for depression. Ask your healthcare professional about the medications you are taking.

Understanding your risks lets you take charge of your health. Talk with your healthcare professional about your risk factors for depression.
There is no single reason why people experience depression. It is a complex disease. Scientists believe that many of the symptoms of depression are linked to changes in chemicals in the brain.

Symptoms of depression may be emotional, mental, or physical. For example, some people with depression feel persistent sadness. Some lose interest in activities they used to enjoy. Others have trouble concentrating. Physical symptoms may include persistent aches and pains, weight loss, or trouble sleeping.

Symptoms Checklist

Symptoms of depression can occur at any age. If you have some of the following symptoms, tell your healthcare professional. If a loved one shows symptoms of depression, share this symptoms checklist with him or her.

- Persistent sad or “empty” mood
- Loss of interest or pleasure in activities
- Loss of appetite, weight loss, or weight gain
- Trouble falling asleep, waking up too early, or oversleeping
- Feeling “slowed down” or restless, or having trouble sitting still
- Fatigue or loss of energy
- Feeling guilty or worthless
- Difficulty concentrating, remembering, or making decisions
- Feeling irritable
- Persistent physical symptoms that do not respond to treatment, such as headaches, other aches and pains, or problems with digestion
- Thoughts about suicide—Get medical help immediately!
Late-Life Symptoms

Some symptoms of depression may become more common as a person ages. For example, an older person may have trouble sleeping or experience aches and pains that seem like part of another health condition. A doctor might diagnose depression. Or, if an older person sits around a lot and doesn’t feel like doing things, he or she might be depressed.

Forgetfulness, trouble concentrating, and difficulty making decisions may be symptoms of dementia (becoming senile). However, these are also symptoms of depression. A healthcare professional can determine whether a person has dementia or depression.

Thoughts about death may be normal for an older person, but thoughts about suicide are not. If you or your loved one has thoughts about suicide, get help immediately:

- Call your healthcare professional.
- Go to the emergency room.
- Call 911.
- Call 1-800-SUICIDE (1-800-784-2433).

Grieving after the loss of a loved one might seem like depression, but grief usually goes away after 6 months or less. Most people with grief experience sadness but not the other symptoms of depression.
Treatment

Treatment for depression usually includes prescription medication or talk therapy—or both.

Treatment choices vary for each individual. You and your healthcare professional might need to try different treatments to find what works best for you.

Medication

Medication can be helpful for late-life depression, even at a very advanced age.

There are many types of medication for depression. You and your doctor need to find what is best for you. Talk with your doctor about possible side effects.

Also talk with your doctor about other medications you are taking. If you are already taking a lot of medications, you might be wary of adding another. Some medications may be a better choice for you than others. You and your doctor can find the treatment that is best for you.

With treatment, many people begin to feel better in 1 to 4 weeks, but response to treatment might take longer in an older person. For example, if a younger adult feels better 6 to 8 weeks after starting treatment, the same treatment might take up to 3 months for an older person.

Continuing to take depression medication after your symptoms go away might help prevent the depression from coming back. Some people continue taking depression medication for up to a year after the symptoms begin to improve. Other people may be on medications for longer, especially if the symptoms of depression returned after they had discontinued the medication.
Talk Therapy

Talk therapy (psychotherapy) is a way to share thoughts and feelings with someone who will understand and not tell others. Therapy often lasts for up to 5 months. Sometimes it lasts for longer.

Many older people find that therapy helps them feel a lot better. A therapist can help you see problems in a different way. Talking with a therapist can help relieve worries and fears. Therapy can also make it easier to talk with family members and others.

Helping a Family Member or Friend

If your parent, spouse, or other loved one is showing signs of depression, you can help. Your support might be very important for your loved one.

Explain that depression is a health problem, not a personal problem, and not a sign of weakness. Encourage your friend or family member to talk about his or her symptoms with a healthcare professional. Depression does not have to be a part of aging.

You might need to make the appointment for your loved one, and you might need to go there together. You might need to make sure the person is taking medication as prescribed or attending therapy sessions. You might also need to offer a ride to appointments.

If you are concerned about any talk of suicide, tell the depressed person’s healthcare provider if possible. In an emergency, call 911.
Try to show understanding, patience, and affection. Encourage your loved one to talk, and try to listen carefully. Try to do activities together that both of you enjoy. You might go to movies or sports events. Walking is a great way to spend time together.

Remind the person that it might take several weeks to start feeling better. Be encouraging. Remind your loved one that treatment for depression can be very helpful.

**Don’t give up!** With the right treatment, a person with depression can feel much better, at any age.
Questions to Ask Your Healthcare Professional

Answering your questions is part of your healthcare provider’s job. When you meet with a healthcare professional, you might want to ask many of the following questions.

Diagnosis

Do I have depression? What do my symptoms mean?

Check the symptoms that apply to you, then show this list to your healthcare professional.

- Persistent sad or “empty” mood
- Loss of interest or pleasure in activities
- Loss of appetite, weight loss, or weight gain
- Trouble falling asleep, waking up too early, or oversleeping
- Feeling “slowed down” or restless, or having trouble sitting still
- Fatigue or loss of energy
- Feeling guilty or worthless
- Difficulty concentrating, remembering, or making decisions
- Feeling irritable
- Persistent physical symptoms that do not respond to treatment, such as headaches, other aches and pains, or problems with digestion
- Thoughts about suicide—Get medical help immediately!
What kind of treatment (or treatments) do you suggest for me? Why?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

How often should I come see you?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Are there other healthcare professionals I should see? If so, who?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Medication

List all of the medications you are taking, and show the list to your healthcare professional. Include prescription medications and other medicines, as well as herbs and supplements.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

Which medication would be best for me? Why?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

How often should I take it? What if I forget a dose?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
What side effects should I expect?

While taking this medication, do I need to change what I eat or drink, or do anything else differently?

Can I still take my other medications? Are there any I should not take?

How long will I need to take the medication?

Talk Therapy

Do you think talk therapy may help me? How?

Where should I go for talk therapy?

Name: __________________________

Address: __________________________

Telephone: __________________________
Recovery

How soon can I expect to feel better?

How can I expect to feel in the months and years ahead?

What should I do if my symptoms return?
RESOURCES

For more information about depression, contact the following organizations or find them on the Internet.

**American College of Physicians**
Philadelphia, PA
215-351-2400
www.doctorsforadults.com/topics/dfa_depr.htm

**Geriatric Mental Health Foundation**
Bethesda, MD
301-654-7850
www.gmhfonline.org and www.treatmenthelps.org

**Medline Plus**
National Library of Medicine
www.nlm.nih.gov/medlineplus/depression.html (English)

**National Institute of Mental Health**
National Institutes of Health (NIH)
Bethesda, MD
866-615-6464
www.nimh.nih.gov/publicat/depression.cfm (English)

**NIH Senior Health**
http://nihseniorhealth.gov

**National Alliance on Mental Illness**
Arlington, VA
800-950-6264
www.nami.org

**National Mental Health Association**
Alexandria, VA
800-969-6642
www.nmha.org

COLLABORATORS

**American College of Physicians (ACP)**

Established in 1915, the American College of Physicians (ACP) is the nation’s largest medical specialty organization and second-largest physician group. Its mission is to enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine. ACP membership includes about 119,000 members including medical students. Members are physicians in general internal medicine and related subspecialties, including cardiology, gastroenterology, nephrology, endocrinology, hematology, rheumatology, neurology, pulmonary disease, oncology, infectious diseases, allergy and immunology, and geriatrics. Internists treat the majority of adults in the United States.

For more information about internal medicine physicians, please visit: www.doctorsforadults.com.

**Penn Geriatrics**

Penn Geriatrics is dedicated to enhancing the health of adults age 65 or older through interdisciplinary clinical care and trained physicians who provide excellent clinical care to older adults—with an emphasis on enhancing functional status, quality of life, and survival. Penn Geriatrics is part of the University of Pennsylvania Health System.
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The DVD features astronaut Buzz Alrin, age 78, who has been to the moon and back and has also had personal experience with depression.