

Depression and Older Adults



Depression is more than just feeling sad or blue. It is a common but serious mood disorder that needs treatment. It causes severe symptoms that affect how a person feels, thinks, and handles daily activities, such as sleeping, eating, and working.

When a person has depression, they have trouble with daily life for weeks at a time. Doctors call this condition “depressive disorder” or “clinical depression.”

Depression is a real illness. It is not a sign of a person’s weakness or a character flaw. A person can’t “snap out of” clinical depression. Most people who experience depression need treatment to get better.

Depression Is Not A Normal Part Of Aging

Depression is a common problem among older adults, but it is NOT a normal part of aging. In fact, studies show that most older adults feel satisfied with their lives, despite having more illnesses or physical problems. However, important life changes that happen as we get older may cause feelings of uneasiness, stress, and sadness.

For instance, the death of a loved one, moving from work into retirement, or dealing with a serious illness can leave people feeling sad or anxious. After a period of adjustment, many older adults can regain their emotional balance, but others do not and may develop depression.

Recognizing Symptoms Of Depression In Older Adults

Depression in older adults may be difficult to recognize because they may show different symptoms than younger people. For some older adults with depression, sadness is not their main symptom. They may have other, less obvious symptoms of depression, or they may not be willing to talk about their feelings. Therefore, doctors may be less likely to recognize that their patient has depression.

Sometimes older people who are depressed appear to feel tired, have trouble sleeping, or seem grumpy and irritable. Confusion or attention problems caused by depression can sometimes look like Alzheimer’s disease or other brain disorders. Older adults also may have more medical conditions, such as heart disease, stroke, or cancer, which may cause depressive symptoms. Or they may be taking medications with side effects that contribute to depression.

Older adults are often misdiagnosed and undertreated. Healthcare providers may mistake an older adult’s symptoms of depression as just a natural reaction to illness or the life changes that may occur as we age, and therefore not see the depression as something to be treated. Older adults themselves often share this belief and do not seek help because they don’t understand that they could feel better with appropriate treatment.

- Depression is more than just feeling sad or blue. It is a common but serious mood disorder that needs treatment.
- Depression is not a normal part of aging. In fact, studies show that most older adults feel satisfied with their lives despite having more illnesses or physical problems.
- For some older adults with depression, sadness is not their main symptom. They may have other, less obvious signs of depression.
- Depression is treatable. Treatment choices differ for each person. Medication and psychotherapy are the most common forms of treatment.

Types Of Depression

There are several types of depressive disorders.

Major depression involves severe symptoms that interfere with the ability to work, sleep, study, eat, and enjoy life. An episode can occur only once in a person’s lifetime, but more often, a person has several episodes.

Persistent depressive disorder is a depressed mood that lasts for at least 2 years. A person diagnosed with persistent depressive disorder may have episodes of major depression along with periods of less severe symptoms, but symptoms must last for 2 years to be considered persistent depressive disorder.

Other forms of depression include psychotic depression, postpartum depression, and seasonal affective disorder.



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Common Symptoms Of Depression

There are many symptoms associated with depression, and some will vary depending on the individual. However, some of the most common symptoms are listed below. If an older adult has several of these symptoms for more than 2 weeks, they may have depression.

- Persistent sad, anxious, or "empty" mood
- Feelings of hopelessness, guilt, worthlessness, or helplessness
- Irritability, restlessness, or having trouble sitting still
- Loss of interest in once pleasurable activities, including sex
- Decreased energy or fatigue
- Moving or talking more slowly
- Difficulty concentrating, remembering, making decisions
- Difficulty sleeping, early-morning awakening, or oversleeping
- Eating more or less than usual, usually with unplanned weight gain or loss
- Thoughts of death or suicide, or suicide attempts
- Aches or pains, headaches, cramps, or digestive problems without a clear physical cause and/or that do not ease with treatment
- Frequent crying

Treatments For Depression

Depression, even severe depression, can be treated. If a person thinks they may have depression, they can start by making an appointment to see a doctor or healthcare provider. This could be a primary doctor or a provider who specializes in diagnosing and treating mental health conditions (a psychologist or psychiatrist). Certain medications and some medical conditions can cause the same symptoms as depression. A doctor can rule out these possibilities by doing a physical exam, interview, and lab tests. If the doctor can find no medical condition that may be causing the depression, the next step is a psychological evaluation.

Treatment choices differ for each person, and sometimes multiple treatments must be tried to find one that works. It is important to keep trying until the person finds something that works for them.

The most common forms of treatment for depression are medication and psychotherapy.

- **Medication**—Antidepressants are medicines that treat depression. There are many different types of antidepressants. They may help improve the way the brain uses certain chemicals that control mood or stress. A person may need to try several different antidepressant medicines before finding one that improves their symptoms and has manageable side effects.
- **Psychotherapy**—Psychotherapy, also called "talk therapy," can help people with depression. Some treatments are short-term, lasting 10 to 20 weeks; others are longer, depending on the person's needs. Cognitive behavioral therapy (CBT) is one type of talk therapy used to treat depression. It focuses on helping people change negative thinking and any behaviors that may be making depression worse. In fact, research shows that cognitive-behavioral therapy, including a version called problem-solving therapy, may be an especially useful type of psychotherapy for treating older adults and improving their quality of life.

Preventing Depression

What can be done to lower the risk of depression? How can people cope? There are a few steps older adults can take. They can try to prepare for major changes in life, such as retirement or moving from their home of many years. They can stay in touch with family and let them know when they feel sad.

Regular exercise may also help prevent depression or lift a person's mood if they are depressed. They can pick something they like to do. Being physically fit and eating a balanced diet may help avoid illnesses that can bring on disability or depression.

Connecticut Resources

CT Department of Mental
Health and Addiction Services

<https://portal.ct.gov/dmhas>

24/7 Treatment Access Line

1.800.563.4086

National Resources

National Alliance on Mental
Illness

www.nami.org

1.800.950.6264

National Suicide Prevention
Lifeline

www.suicidepreventionlifeline.org

1.800.273.TALK (8255)

National Institute on Aging <https://www.nia.nih.gov/health/depression-and-older-adults> 2017

Centers for Disease Control and Prevention <https://www.cdc.gov/aging> 2017

National Institute of Mental Health <https://www.nimh.nih.gov>

