

Depression: How “Chronic Sadness” Negatively Impacts Quality of Life *by Diane Walker, RN, MS, John Dystel Nurse Fellow of the National MS Society, General Manager, GRISWOLD SPECIAL CARE*

We all probably know a little something about depression, right? Everyone feels sad at times and that is perfectly normal. For many people, however, the sadness becomes a chronic experience and they actually have a clinical depression. Among older adults, depression is particularly disabling and it can often go unrecognized and undiagnosed for years. Depression affects approximately 20% of adults over 65 years of age but only about 10% of those with the condition receive treatment. Let’s explore the difference between sadness and depression, the ways that depression severely impacts adults’ quality of life, and learn how it can be effectively treated.

Sadness is a normal emotion experienced as feelings of disadvantage, loss, and helplessness.¹ It almost always accompanies unwanted change such as leaving a home of many years and especially the loss of something important such as a loved one, close friend, or a job. This form of sadness, often referred to as grief, has been so well described by Elizabeth Kubler Ross. Sadness can be expressed by quietness, withdrawal, or having less energy as a short-term response to a life event (even the memories of an event can trigger this feeling). While sadness can lead to depression if

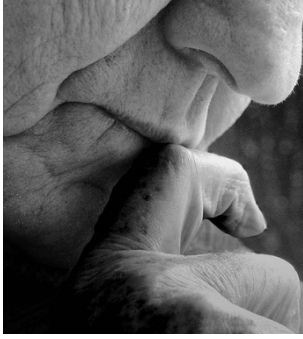


one gets “stuck” in these emotions, depression is believed to be a real bio-chemical alteration in the brain that does not have to be associated with a life event. Some of the more common risk factors for developing depression include family history, divorced or widowed marital status, medical illness, chronic pain, certain medications, cognitive impairment, gender (women are more likely to experience depression; men have a higher risk of suicide), physical disability, social isolation, and caregiving. Unlike sadness, depression is a serious medical condition that requires treatment.

If depression is so prevalent and such a serious condition, why does it go unrecognized/untreated in so many older adults? Older adults may not want others to know they are depressed, so they hide their feelings. Among individuals over 65 years of age, particularly those who grew up in the Great Depression, clinical depression is often considered a character flaw. The person may be afraid the physician will take away his/her remaining independence. Older adults may also believe that there isn’t a cure for depression or that the treatment is worse than the condition. Some adults don’t feel sad and so they do not recognize they are depressed. Other reasons may include the false beliefs that the sadness will go away by itself, that it is a normal part of being older because of dependency and disability, or the clinicians who might be in a position to detect the presence of a clinical depression do not ask the right questions or spend enough time with the person.²

Regardless of why, depression usually doesn’t go away by itself and, if left untreated, results in higher mortality, diminished quality of life, and susceptibility to other medical illnesses. Clinical depression affects one’s thoughts, feelings, behaviors, and physical health. People often describe depression as “feeling sad for no reason,” or “having no motivation to do anything.” It is characterized by memory problems, confusion, negative thinking, social isolation, loss of appetite, inability to sleep, irritability, anxiety, persistent physical complaints, discouragement, loss of self-worth, self-blame, inattention to appearance, inability to complete activities of daily living, and lack of humor.³ There are several questionnaires that can be used to determine if someone is depressed and how severely. You can find a sample questionnaire at www.CaringTimes.org.

The good news is that depression is very treatable: approximately 80% of depressed individuals can recover fully when treated with modern antidepressant medications and psychotherapy. These



medications over time correct the chemical imbalances in the brain. It can take longer to treat an older person because the medications take longer to have an effect, physicians usually begin with lower dosages and the type of antidepressant may have to be changed due to the side effects, the adults may forget to take the medication, and they may not take the prescription regularly due to cost.³

If someone you know feels worthless most of the time, cries frequently, has persistent physical complaints, or has thoughts of suicide, contact his or her health care provider. The longer depression goes untreated, the more at risk the individual becomes. The very nature of the illness often interferes with a person's ability to seek help. As a family member, friend, or neighbor you may have to become actively involved in helping the person get the treatment they need. You can offer emotional support and encouragement, help the person make appointments with a physician, take them there, and then monitor medication compliance.

In addition to traditional medical treatment, there are forms of self-help that older adults can use to elevate their mood – but these are not a substitute for proper medical care. For example, mild exercise and walking outdoors, music, pets, gardening, visiting friends, playing games, telling jokes, using vitamins, and doing activities that have always been pleasurable can be very helpful. There are also a number of advocacy organizations that can be contacted for support. You will find direct links to these groups at www.caringtimes.org. where there is also an expert you can contact with your questions.

Depression causes tremendous suffering and loss (including suicide) for the persons afflicted with the disease as well as their loved ones. The winter months, when there is less light, and the holiday season, can often spark episodes of depression. But the holidays are also a wonderful opportunity to spend the time listening to an older parent/person to assess their state of mind and functioning. Learning how to recognize the signs of depression and seeking appropriate medical intervention are essential tools for healthy aging at any age.

¹ Sadness. (2007) Retrieved from <http://en.wikipedia.org/wiki/sadness>. September 29, 2008.

² Depression in Older Persons. Retrieved from http://www.nami.org/Template.cfm?Section=by_illness&template=/ContentManagement/ContentDisplay.cfm&ContentID=17624. October 5, 2007.

³ Depression in Older Adults and the Elderly: Signs, Symptoms, Causes and Treatment. Retrieved from http://www.helpguide.org/mental/depression_elderly.htm. October 5, 2007.