



Fuqua Center for Late-Life Depression
Emory University
Late Life Depression

 **What is Late-Life Depression— The Facts**

Depression is a physical disorder of the brain that impacts over 20 million adults overall and affects more than 6.5 million individuals over the age of 65. Depression impacts a person's whole being—mental health and physical health—and if left untreated can disable those who might otherwise be healthy individuals. All people feel sad or unhappy at times during their lives, but persistent sadness that interferes with everyday life may be depression. Depression is NOT a normal part of growing older. It is a treatable medical illness, much like heart disease or diabetes.

 **What Causes Depression?**

There is no one cause for depression and the onset of late-life depression can be attributed to genetic, biological, or neurological factors; life changes; illnesses; or a combination. Some older adults with depression have suffered from the illness most of their lives. For others, their experience with depression may not begin until late life. Depression in late life is more common in women, widowed individuals, those who lack a supportive social network, and those with physical health problems. Chronic or serious illness is the most common cause of depression in the elderly. Sometimes depression will occur for no apparent reason. As the brain and body age, a number of natural bio-chemical changes begin to take place. Changes as the result of aging, medical illness or genetics may put the older adult at a greater risk for developing depression.

Symptoms of Depression

Symptoms of depression usually last over two weeks.

- ▶ Disturbed sleep (sleeping too much or too little)
- ▶ Changes in appetite (weight loss or gain)
- ▶ Physical aches and pains
- ▶ Lack of energy or motivation
- ▶ Irritability or intolerance
- ▶ Loss of interest or pleasure
- ▶ Feelings of worthlessness or guilt
- ▶ Difficulties with concentration or decision making
- ▶ Noticeable restlessness or slow movement
- ▶ Recurring thoughts of death or suicide
- ▶ Changed sex drive

 **Stigma**

Stigma can discourage people from seeking treatment. Some people are ashamed that they have depression—they feel that it is their fault or that they should be able to help themselves out of their depressed mood. Depression is NOT a weakness or character flaw. Depression is a medical illness that can be successfully treated and recovery is possible.

Am I Depressed?

The signs that an older person may be suffering from depression include inability to sleep, memory problems, confusion, withdrawal from social situations, and irritability. People in their later years are less likely to appear sad or talk about a depressed mood. Sometimes the most common symptom of depression in an older adult is persistent complaints about vague aches and pains along with frequent demanding behavior. The first step to recovery is to tell your health care provider what you are feeling.

Treatment Options for Late-Life Depression

Depression is treatable.. Treatment will reduce your pain and suffering caused by the symptoms of depression. The most prescribed treatments for late-life depression are medication and psychotherapy (talk therapy). Talk to your healthcare provider about what is the right treatment for you.

Medications

Medication is often necessary to balance the chemicals in your brain. Antidepressants are the types of drugs normally prescribed for people diagnosed with depression. All medication treatments have some side effects; work with your physician to see which medicine you can tolerate the best. You should start to see some relief from your depression two to eight weeks after you start antidepressants. It may take up to three to four months for substantial improvement.

Suicide

Suicide is more common in older people than in any other age group. The population over age 65 accounts for more than 25% of the nation's suicides. Suicide attempts or severe thoughts or wishes by older adults must always be taken seriously. Caring friends and family must actively intervene and call for help.

How can I Access Services in Georgia?

▶ **The Georgia Crisis & Access Line**
(800) 715-4225

▶ **Fuqua Center/Depression Information Service**
Toll-Free Mon-Fri 7am-7pm
(877) 498-0096

▶ **Fuqua Center/Geriatric Psychiatry at Emory**
Patient Appointments: (404) 728-6302
General Information: (404) 728-6948

▶ **AgeWise Connection**
Information on aging services in GA
(404) 463-3333 or (800) 676-2433

▶ **Georgia Telemedicine Project**
To access geriatric psychiatry specialists
in rural areas of the state
(866) 754-4325

▶ **Screening for Mental Health**
www.mentalhealthscreening.org

This handout provides a general overview on this topic and may not apply to everyone. To find out if this handout applies to you and to get more information on this subject, talk to your doctor. SOURCE: The Geriatric Mental Health Foundation (GMHF), 7910 Woodmont Avenue, Suite 1050, Bethesda, Maryland 20814 . (301) 654-7850 www.GMHFonline.org



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