

Depression and ageing

Depression is not a normal part of ageing. It's an illness that can have serious consequences if it isn't recognised and treated. Depression is often not well recognised or detected in older people. Symptoms such as sadness, sleep and appetite problems or mood changes may be dismissed as a 'normal' part of ageing. These symptoms may also be confused with other conditions such as dementia.

Depression can damage a person's quality of life and their relationships with friends and family. Severe depression can be life threatening as a risk factor for suicidal thoughts and suicide.

Depression is often not recognised in older people

Symptoms of depression that would cause concern in a younger person, such as insomnia or social withdrawal, may be disregarded in older people as 'just old age'. People also sometimes assume that problems with memory or concentration are due to age-related changes in thinking, rather than being due to depression. Older people may also find it difficult to talk about feeling sad or depressed. Depression can affect memory and concentration, particularly in elderly people.

Depression is not a normal part of ageing

Older people do not necessarily suffer higher rates of depression. Recent surveys have found older people in good health and living in their own home have lower rates of depression than people of younger age groups. However, the incidence of depression was higher in older people who were in poor health, living in a care facility or nursing home, or who were otherwise isolated.

Situations such as illness, disability, loss and loneliness are more common for older people. It is normal to grieve when faced with loss or illness, but depression is a more severe and persistent sadness. It is not a normal reaction to these events and should always be investigated and treated appropriately.

Seek help for depression

Everyone experiences some or all of the symptoms of depression from time to time. However, if you or someone close to you experiences persistent symptoms for two weeks or longer that cause them some impairment, then help from a doctor is needed.

Symptoms of depression

Everyone can feel sad, particularly if you experience loss or grief. Depression, however, is more than feeling low and sad – it is a disabling condition that requires treatment. People who are depressed can experience symptoms that affect their:

- Behaviour
- Thoughts
- Feelings
- Physical wellbeing.

Behaviour

- Neglecting your responsibilities
- Not looking after yourself – for example, not eating well or caring about how you look
- Withdrawing from family and friends
- Avoiding certain situations

- Not enjoying any activity
- Doing things that are out of character – for example, being angry or aggressive.

Thoughts

- Regularly thinking about suicide
- No longer feeling good about yourself.

Feelings

- Irritability
- Sadness
- Anxiety
- Worry
- Emptiness
- Guilt.

Physical symptoms

- Sleeping more or less than usual
- Feeling tired all the time
- Unexplained headaches or other aches
- Digestive upsets
- Loss or change of appetite
- Significant weight loss or weight gain
- Memory problems and confusion.

People at risk of depression

- Some risk factors may trigger depression. However, not all depression can be traced to a risk or cause. Risk factors for depression in older people may include:
- Isolation – for example, living in a remote location or living in a different location to family and friends
- Living in a nursing home or other care facility
- Dementia – depression is common in people with dementia such as Alzheimer's disease. The reason for the link is not clear
- Other physical health conditions including vitamin deficiencies, thyroid problems, heart disease, arthritis, Parkinson's disease and cancer
- Some medications can promote depression – for example, benzodiazepines (such as diazepam) and propranolol
- Alcohol abuse.

Depression and stress

Prolonged stress is a recognised risk factor for depression for all age groups. Stress can arise in many situations for older people, which may include:

- Retirement
- Chronic pain
- Being the primary carer for a partner or other relative
- Financial problems
- Loneliness
- Death or illness of a spouse, partner or other close relative or friend
- Other family problems.

Diagnosis of depression

A diagnosis of depression can be made after a number of steps. These are used to both confirm the presence of depression and to exclude other physical causes of the symptoms. The steps include:

- **Physical examination** – to check for any underlying physical illnesses such as anaemia or thyroid problems that may cause depression
- **Medical history** – your doctor may ask about your prior use of various drugs (such as high blood pressure medications, steroids and alcohol), which can cause depression as a side effect
- **Detailed questioning** – for example, the doctor may ask how severe the symptoms are, how long they last and if you have experienced any major life changes recently
- **Psychological tests** – may be used to help identify the type of depression, your performance on memory and thinking tasks, and any contributing factors
- **Laboratory investigations** – for example to examine your blood counts, electrolytes and thyroid activity.

Sometimes depression co-exists with dementia, which can make a specific diagnosis difficult. Some physical symptoms of depression, such as insomnia or lack of appetite, may also have other causes – these need to be ruled out as part of a diagnosis of depression.

Treatment for depression

Depression is a treatable illness. Early detection and treatment may help to keep depression from becoming severe. Treatments may be a combination of:

- Medical
- Psychological
- Lifestyle changes.

Medical treatments

Medical treatments for depression can be very effective and may include:

- **Antidepressants** – these may take up to six weeks to show improvements. Medication for depression should only be taken under a doctor's supervision and must not be stopped suddenly.
- **Electroconvulsive therapy** – in severe cases.

Psychological treatments

Psychological treatments for depression can be very effective and may include:

- **Cognitive behaviour therapy** – helps the person change their negative thought patterns.
- **Interpersonal therapy** – helps to improve relationships and to resolve loss.

Lifestyle changes

As part of treatment for depression, a doctor or other practitioner may recommend changes to a person's lifestyle. These changes may include:

- Dietary changes
- Nutritional supplements
- Exercise
- Involvement in social activities
- Avoiding situations that trigger anxiety.

Antidepressants and other medications

Treatment of depression in people aged 65 and older is generally the same as for people in other age groups. However, older people tend to take more medications for other conditions. Antidepressants must be prescribed carefully to ensure they do not cause dangerous interactions with other drugs.

The risk of adverse interaction also includes herbal or other complementary remedies for depression. The herb St John's Wort is sometimes taken to try and treat depression, but it can have serious interactions with other drugs. Consult your doctor before taking any supplements or complementary treatments for depression.

Where to get help

- Your doctor
- Your local community health centre
- Psychologist
- Occupational therapist or social worker
- Mental health nurse
- [beyondblue](#) Info Line Tel. 1300 22 4636
- SANE Mental Health Information Line Tel. 1800 18 7263, Monday to Friday, 9am to 5pm
- Lifeline Tel. 13 11 14
- Mental Health Foundation www.mentalhealthvic.org.au
- SuicideLine Victoria Tel. 1300 651 251 – for counselling, crisis intervention, information and referral (24 hours, 7 days)

Things to remember

- Depression is not a normal part of ageing.
- Symptoms of depression may be confused with other illnesses or with ageing.
- Depression can be successfully treated with psychological therapies, medication and lifestyle changes.

This page has been produced in consultation with, and approved by:

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