

GERIATRICS

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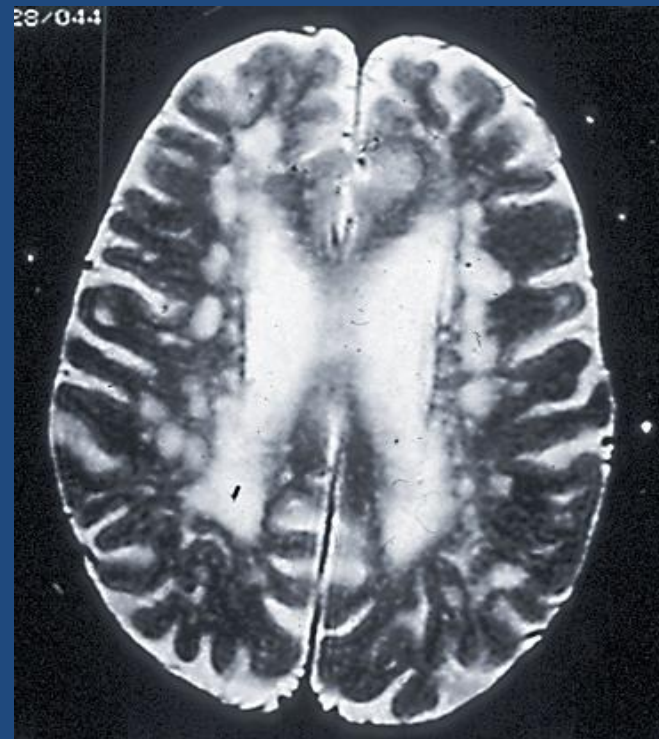
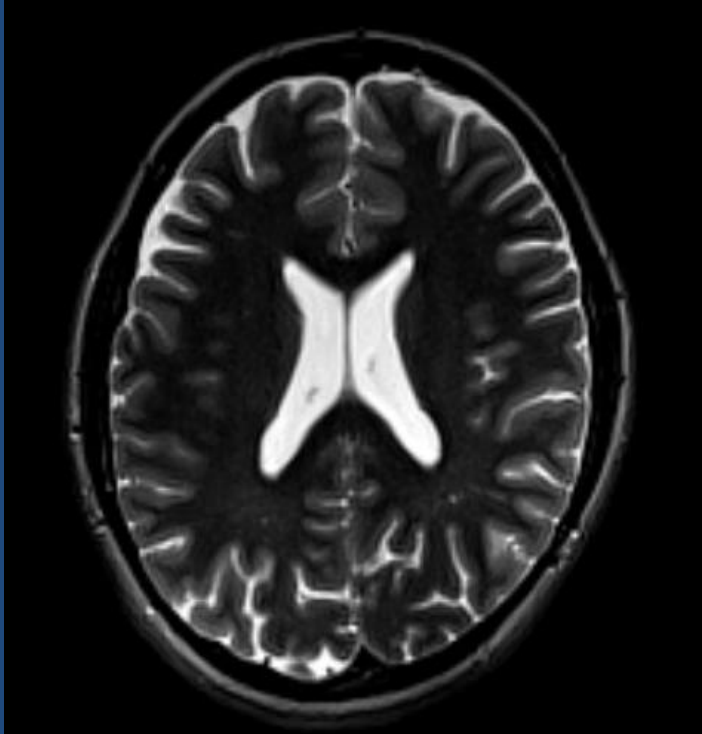
DEPRESSION: IT REALLY IS ALL IN YOUR HEAD

- Depression is an illness affecting the brain
 - Our brain works differently when we're depressed
 - We respond differently, we think differently

CAUSES OF DEPRESSION

- Biology contributes to depression development
 - “Mini-strokes”
 - Inflammation
 - Stress response
 - Genetic differences

THE AGING BRAIN



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Depression and Vascular Disease

- Vascular disease – heart attacks, stroke – can cause depression
- Depression can adversely affect vascular illness
 - Depressed people have about 50% greater risk of heart attack
 - People with heart disease who are depressed have more medical complications and increased mortality after heart attack

Depression and Vascular Disease

- But the good news...
 - Antidepressants are safe and effective in people with heart disease
 - Antidepressant treatment may help reverse depression's increased risk, resulting in better outcomes
- Best approach: Identify early

SYMPTOMS OF DEPRESSION

- Depressed mood, sad or empty, most of the day, nearly every day
- Anhedonia – lack of interest or pleasure
- Sleep – insomnia/hypersomnia
- Appetite or weight change
- Fatigue or loss of energy
- Agitation/retardation
- Diminished ability to think or concentrate
- Low self-esteem or inappropriate guilt
- Recurrent thoughts of death or suicidal ideation

SYMPTOMS OF DEPRESSION

- More specific & less recognized in aging...
 - Depression without sadness
 - Diminished ability to think and concentrate
 - Rumination on negative thoughts
 - Memory loss
 - Sleep disturbance
 - Fatigue or loss of energy
 - Pain

Depression without sadness

- No emotional sadness, no tearfulness
- Instead:
 - Loss of pleasure
 - Lack of interest
 - Lack of motivation

Diminished Ability to Think and Concentrate

- Difficulty focusing and concentrating
- Distracted
- Difficulty remembering recent events

Rumination

- Excessive focus on negative thoughts

Memory Loss

- Often related to rumination
- Can improve with antidepressant treatment
- Different from Alzheimer's disease

Sleep Disruption

- Insomnia is more common than hypersomnia
- Trouble falling asleep, trouble staying asleep

Fatigue and Loss of Energy

- Reduced activity
- Reduced functioning
- But remember: Exercise improves energy

Pain

- Chronic pain increases risk of depression
- Depression makes it more difficult to treat chronic pain
- Best approach: Treat them both!

Preventing depression

- Set realistic goals
- Stay physically active – Exercise your body
- Stay mentally active – Exercise your mind
- Stay socially connected
 - Visit with family
 - Stay involved with friends
 - Stay engaged in your spiritual activities
- Be altruistic, volunteer, and be philanthropic

Treating Depression

- Older individuals do respond to treatment
 - Medications and psychotherapy both work
 - Need to be careful of medication interactions and side effects
 - May take longer to respond
 - Not all symptoms improve at the same rate
- Can be a recurrent problem: Ongoing treatment and monitoring often needed
 - Our brain works differently when we're depressed

Successful Aging



Good health, positive outlook, active lifestyle, and a strong social network

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