DEPRESSION: GETTING HELP AND FEELING BETTER

“I just felt embarrassed when my daughter told me she thought I was depressed. I’ve always been the “rock” of my family. It took me a while to realize depression was a common, serious, and treatable problem and not a sign of weakness.”

— Claire, 74-year-old mother

As we grow older, our bodies, lifestyles, and relationships change. When experiencing some of these changes, many people are unprepared to recognize the difference between “normal” emotional responses and depression. Depression affects a person’s ability to enjoy life, even in the simplest ways. The excellent news is that, once identified, proper treatment can cure or significantly improve depression.

What Is Depression?

Depression is a medical condition affecting the entire person. You can feel “blue” or as if you are in a black hole without any means of escape for weeks, months, or years. Depression can:

• Bring on a range of debilitating feelings, such as worthlessness, hopelessness, despair, extreme sadness, or loss of pleasure.
• Affect your thoughts, feelings, behavior, or physical health.
• Interfere with your ability to function normally.

Depression is a serious medical illness. It is caused by a combination of factors: chemical changes in the brain, stressful events, other medical illnesses, medication side effects, and/or heredity. Typically, only treatment eliminates depression. Untreated, it can negatively impact one’s physical and mental health and can even lead to suicide.

Is Depression a Normal Part of Aging?

Depression is not a normal part of the aging process. Older persons may face many challenges like the loss of loved ones, physical and mental changes, financial concerns, adjustments to new living situations, or assuming new and different roles within the family and workplace. Such losses, challenges, and changes can temporarily create overwhelming
sadness and despair. Reactions to difficult life circumstances and periods of being “down” typically last for a relatively short period; in time, one is able to return to the usual level of functioning and once again feels pleasure and other positive emotions.

Who Suffers from Depression?

Depression affects men and women of all ages, races, and socioeconomic backgrounds, with women twice as likely as men to suffer from the disease. For many, depression is something that has occurred throughout life. For others, facing depression is a new experience – even for those in their 80s or 90s. In fact, over 6-1/2 million Americans over age 65 suffer from some form of depression.

What Symptoms of Depression Should I Look for?

Depression’s numerous signs and symptoms vary by individual in severity and duration. Depressive symptoms usually occur round-the-clock anywhere for two weeks to many years. Because depression can have similar symptoms as other illnesses, such as thyroid gland problems, physicians or other health care providers might misattribute depressive symptoms to other illnesses. Typical signs and symptoms are:

Behavioral Changes
- Sleeping more or less than usual (early morning awakening; sleeping too much; insomnia).
- Withdrawal from outings with family, friends, and previously enjoyable activities.
- Eating more or less than usual.
- Lethargy, extreme tiredness, fatigue, and lack of energy.
- Minimal attention to personal care.

Physical Changes
- Weight gain or loss unrelated to physical problems.
- Unexplained headaches, backaches, stomach aches, or constipation.
- Little or no sexual energy.

Emotional/Cognitive/Mood States
- Sadness, tearfulness, or hopelessness.
- Inability to concentrate, remember, or make decisions.
- Thoughts of death, suicide, or little hope for the future.
- General dissatisfaction with life, restlessness or irritability.
- Loss of interest in talking to people.
- Feelings of guilt or worthless, as if no one cares about you.
Why Might I Be Ashamed about Being Depressed?

Like many older people, you may believe a stigma is attached to depression. Many do not tell their family or health care provider about sadness or loss of pleasure, mistakenly believing that depression is a personal failing or personal weakness that they themselves should resolve. Some erroneously believe that depressive symptoms are just a normal part of getting older (for example, unhappiness or grumpiness) and thus do not think the condition can be helped or quality of life improved. Unfortunately, such common misunderstandings lead many older people to suffer in silence and not receive help to make them feel better.

How Do I Find Out if I am Depressed?

Many people with depression know that something is wrong but don’t know what to do. The first step to getting help is letting your physician know every symptom you have been experiencing. Remember, your physician may not be able to tell something is wrong just by looking at you – you need to speak up.

After you tell your doctor how you’re feeling, he/she will ask about your symptoms, as well as about your health and family health history. A physical examination and medical tests will also be given. Your doctor will want to rule out any other illness or side effects from your medications that may be causing symptoms similar to depression. If, after a thorough medical assessment, you are diagnosed with depression, treatment can begin immediately.

How is Depression Treated?

Several treatment options for depression are available. The most common include medication and psychotherapy. In some circumstances, electroconvulsive therapy (ECT) may be needed.

Medication. Anti-depressants can help correct the chemical imbalances in the brain that contribute to depression. Many older people tolerate many new anti-depressant medications well. If you tried an anti-depressant medication years ago but did not stay on it because of side effects, talk with your physician about the newer medications now on the market. Using drugs or alcohol while taking anti-depressants may worsen the depression and cause dangerous side effects. Also discuss that with your physician.
Psychotherapy. Talking with a mental health professional (e.g., a psychotherapist, such as a social worker or psychologist) may be recommended. Talking about how your behavior, moods, and thoughts are affecting you can help develop strategies to improve your health and quality of life. In addition, a psychotherapist can partner with you and your physician to help monitor the depression to assure progress is being made.

Electroconvulsive Therapy (ECT). When depression is severe or resistant to other treatments, ECT might "jump-start" the electrical activity in the brain. Today’s ECT is medically proven safe and effective.

What Else Can I Do to Overcome Depression?

In your overall treatment plan, it is important to include the following:

Stay involved with your social circle. Involve yourself with your family, friends, religious community, and/or other networks – even if you feel like hiding. Let people you trust know you have been going through a difficult time and accept their support and encouragement. You might have to really push yourself to do this, but isolation can worsen the depression.

Participate in life’s opportunities. Start new activities or resume old ones – even if you don’t feel like it – such as going to movies, going out with friends, participating in community events, or taking up a hobby. Getting back into the swing of life, even if it isn’t pleasurable right now, will help distract you from focusing on your depression, thus improving your mood.

Stay active. Even if you feel like staying in bed, physical activity activates a chemical reaction in the brain that may help make you feel better. Activities might include taking a daily walk, swimming or water exercises, yoga, or, if you have a mobility impairment, doing exercises in a chair.

The good news is that most people treated for depression are successfully helped and return to their usual level of activities. Older adults treated for depression often begin to feel happier and healthier, able once again to find pleasure and meaning in life.
Where to Get Help

National Resources

**American Psychological Association (APA): Find a Psychologist.** This association cannot provide direct referrals to a psychologist; however, a referral to a local psychologist can be obtained by calling 1-800-964-2000. The operator will use your zip code to locate and connect you with the referral service of the state psychological association.
Web site: www.apa.org

**National Alliance for the Mentally ILL (NAMI).** This non-profit organization’s local offices nationwide offer information, education, and support to sufferers (and their families) of major depressive disorder and other serious mental illnesses. An information help line is available, with trained volunteers who provide information, referrals, and support to those with questions about or who are affected by serious mental illness.
Phone: 1-800-950-6264. Web site: www.nami.org

**National Hope Line Network.** If you have a mental health emergency, this service will immediately put you in contact with a 24-hour crisis center in your area. Phone: 1-800-784-2433.
Web site: www.suicidehotlines.com/national.html

**National Institute of Mental Health (NIMH).** This National Institutes of Health agency provides in-depth information about depression in older adults and has an introductory, easy-to-read booklet “Stories of Depression – Does This Sound Like You?” available to view from its website or free to order. Phone: 1-800-421-4211. For publications: 1-866-615-6464.
Web site: www.nimh.nih.gov

**National Mental Health Association (NMHA).** This non-profit organization’s resource center provides information by trained volunteers on local support groups and treatment resources, answers to FAQ’s, and free publications. By entering your zip code on the Web site’s homepage, you can find a therapist, psychologist, psychiatrist, social worker, or counselor in your area.
Phone: 1-800-969-6642. Web site: www.nmha.org
National Mental Health Information Center. This Center is part of the Substance Abuse and Mental Health Services Administration (SAMHSA). The website offers a nationwide mental health services locator that lists mental health facilities and support services in your area. Phone: 1-800-789-2647. Web site: www.mentalhealth.samhsa.gov

New York City Resources

CornellCARES. This Website developed and maintained by Weill Medical College of Cornell University’s Division of Geriatrics and Gerontology, provides an easily accessible Web-based directory of NYC Medicare mental health providers. Some specialize in treating depression. Go to www. CornellCARES.com and click on Provider Directory to begin your provider search.

LIFENET. This free community service is provided by the Mental Health Association of New York City, in collaboration with the New York City Department of Health and Mental Hygiene. LIFENET operates 24 hours a day, 7 days a week helping callers find mental health and substance abuse services and those experiencing a psychiatric crisis. LIFENET establishes linkages with 23 mobile crisis teams in NYC and Emergency Medical Services. Phone: 1-800-543-3638 for English. 1-877-298-3373 for Spanish. 1-877-990-8585 for Mandarin, Cantonese and Korean. Web site: www.mhaofnyc.org/2lifenet.html

Other Resources

Wings of Madness. A member-supported organization providing information, news, a message board and chat room for both those just learning about depression, as well as those who are expanding their existing knowledge. Web site: www.wingsofmadness.com

This resource provides brief, general information about this health care topic. It does not take the place of specific instructions you receive from your health care providers. For answers to other questions consult your physician or other health care provider.

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