A STUDY OF ASSESSMENT OF DEPRESSION AMONG GERIATRIC POPULATION:

Community Medicine

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ABSTRACT

Older people face many physical and mental health challenges which need to be recognized. Over 20% of adults aged 60 and above suffer from a mental or neurological disorder and 6.6% of all disability (disability adjusted life years-Dalys) among people over 60 years is attributed to mental and neurological disorders. Mental disorders though more prevalent but has got the low priority in most of the countries around the world, of which depression among the elderly population being the most common treatable medical condition and is the most frequent cause of emotional distress. According to WHO Mental Health Report 2012, depression is estimated to affect 350 million people. The World Mental Health Survey conducted in 17 countries found that on average about 1 in 20 people reported having an episode of depression in 2011. In India, community-based studies on mental disorder have revealed that the prevalence of depression varies between 13% and 46% among the elderly population. This study puts in a sincere effort in assessment of Depression among Gediatric Population.

KEYWORDS

Assessment, Depression, Population, Geriatric.

Introduction:

Depression in the elderly contributes to decreased quality of life and increased mortality from both suicide and medical illnesses, yet it remains underdiagnosed and undertreated in these patients. Physicians should be aware of the varying presentations of depression in older adults and differentiate late-life depression from other psychiatric diagnoses. Thorough medical and cognitive assessments are necessary to determine whether late-life depression is due to underlying medical causes and neurologic diagnoses such as Alzheimer's disease or dementia. Depression rating scales, cognitive screening instruments, and structural and functional neuroimaging studies may be implemented as the situation requires.

Older people face many physical and mental health challenges which need to be recognized. Over 20% of adults aged 60 and above suffer from a mental or neurological disorder and 6.6% of all disability (disability adjusted life years-Dalys) among people over 60 years is attributed to mental and neurological disorders.[1] Mental disorders though more prevalent but has got the low priority in most of the countries around the world, of which depression among the elderly population being the most common treatable medical condition and is the most frequent cause of emotional distress.[2] According to WHO Mental Health Report 2012, depression is estimated to affect 350 million people. The World Mental Health Survey conducted in 17 countries found that on average about 1 in 20 people reported having an episode of depression in 2011.[3] In India, community-based studies on mental disorder have revealed that the prevalence of depression varies between 13% and 46% among the elderly population.[4]

As the life expectancy is increasing, the geriatric population in the world are also increasing. Between 2015 and 2050, the proportion of the world's older population is estimated to almost double from about 12% to 22% and India is the second-most populous country in the world in terms of elderly population aged more than 60 years.

There may be multiple risk factors for mental health problems at any point in life. But elderly people may experience life stressors common to all people along with the additional stressors that are more common in later life. For example, older adults may experience reduced mobility, chronic pain and other health problems. In addition, older people are more likely to experience events such as drop in socioeconomic status with retirement, abandonment, neglect, death of the spouse, loneliness, loss of dignity and lack of social support. All these stressors make them prone to develop depression and other mental health problems in their life. Though depression is a major mental health problem, most of the elderly people will not seek health care may be due to under-diagnosis or stigma associated with it and due to many other barriers. Hence our study tries to find out the prevalence of depression, socio-demographic factors influencing it and also other

barriers which prevent elderly population in seeking health care. This study puts in a sincere effort in assessment of Depression among Gediatric Population.

Aims and Objectives:

Assessment of Depression among Gediatric Population.

Materials and Methods:

This study was done in Shridevi institute of Medical Sciences and Research Hospital.

This was done from May 2017 to May 2018

The prevalence of Neuropsychiatric disorders is 11.6% in India (Mental Health Atlas 2011 - World Health Organization). 5 the same was considered for sample size calculation, taking an allowable error as 20%. So the sample size required for the study was 762 (800) by using the formula n= 4pq/d2 (n= (4) (11.6) (88.4)/5.38 = 762 which was approximated to 800].

Results:

Table 1: Mean age of the Patients

Patients	Mean age	Standard Deviation
800	71.11	4.33

Table 2: Total Number of Patients who developed complications

Patients	Incidence	Percentage
392	49 per 100	49%

Table 3: Table of Significance

Patients	X-Value	P-Value (<0.05)
392	0.673	0.021

This is significant.

Table 4: Assessment of Frequency

Assessment	Frequency
• Depressed mood	221
• Loss of interest or pleasure in normal, previously enjoyed activities	335
• Decreased energy and increased fatigue	88
• Sleep disturbance	636
• Inappropriate feelings of guilt	111
• Diminished ability to think or concentrate	89
• Appetite change (e.g.usually loss of appetite in the elderly)	161
• Psychomotor agitation or retardation	19
• Suicidal ideation or recurrent thoughts of death	02

Discussion:

In the present study depression among elderly was found to be 27.74%. In a study conducted by Pracheth R et al[5] in the urban slums of Dharwad district, Karnataka, prevalence of depression was 29.36% and, in another study, conducted by Vishal J et al[6] in the urban poor locality of Surat observed the prevalence of 39%. A cross-sectional study in a tertiary care hospital in Karachi found the prevalence of depression to be 19.5% in the elderly aged 65 years and above.[7] This shows that depression among elderly is emerging as public health concern. A similar study conducted by Safwi SR et al[8] showed similar findings that depression was more prevalent among (14.6%) subjects than those having some education. 16.1% of the study subjects having a low SLI were found to be suffering from depression as compared to 12.1% of those having high SLI. Among the occupational groups depression was found to be present in 33.3% of the professional groups, followed by 11.5% in the housewives. Hence people with no education, dependant on others without occupation, lower socioeconomic status and low standard of living all these situation puts any individuals at risk of developing depression in their life. Depression and dementia are the two most frequent psychiatric syndromes in the older adult population. Depression in older adults with and without dementia often goes unrecognized and untreated. Estimates of the prevalence of depression in older adults with dementia vary widely, which is attributed to differences in sampling, diagnostic criteria used to identify depression, and the way it is assessed. Depression in older adults is not simply due to aging; medical conditions increase the likelihood of depression.

Despite expert recommendations and increased availability of a range of depression treatment options (e.g., medication, psychotherapy, combination therapy, and ECT), depression remains a significant public health problem for older adults. Detection is the first essential step to improving depression care for patients with dementia.

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