

Depression in Older Adults and the Elderly:

RECOGNIZING THE SIGNS AND GETTING HELP



The difficult changes that many elderly individuals face—such as the death of a spouse or medical problems—can lead to depression, especially in those without a strong support system. But depression is not a normal or necessary part of aging. In fact, most seniors are satisfied with their lives despite the challenges of growing old.

Left alone, depression not only prevents older adults from enjoying life like they could be, it also takes a heavy toll on health. But if you learn how to spot the signs of depression and find effective ways to help, you or your loved ones can remain happy and vibrant throughout the golden years.

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Depression is a problem for many older adults

Loss is painful—whether a loss of independence, mobility, health, your long-time career, or someone you love. Grieving over these losses is normal, even if the feelings of sadness last for weeks or months. Losing all hope and joy, however, is not normal. It's depression.

If you have depression, you are not alone. According to the [National Institutes of Health](#), of the 35 million Americans age 65 or older, about 2 million suffer from full-blown depression. Another 5 million suffer from less severe forms of the illness

Although depression in the elderly is a common problem, only a small percentage get the help they need. There are

Frank's story

many reasons depression in older adults is so often overlooked: Some assume seniors have good reason to be down or that depression is just part of aging. Elderly adults are often isolated, with few around to notice their distress. Physicians are more likely to ignore depression in older patients, concentrating instead on physical complaints. Finally, many depressed seniors are reluctant to talk about their feelings or ask for help.

The consequences of this oversight are high. Untreated depression poses serious risks for older adults, including illness, alcohol and prescription drug abuse, a higher mortality rate, and even suicide. So it's important to watch for the warning signs and seek professional help when you recognize it. The good news is that with treatment and support, depressed seniors can feel better. No one, whether they're 18 or 80, has to live with depression.

Frank is a 74-year-old widower. He used to be quite active, volunteering his time at the local community center, playing golf with his buddies at least once a week, and enjoying frequent get-togethers with his grown children and grandkids. But since his wife Ruth passed away, he's lost all interest in getting out or seeing anyone. It's been nine months since his loss, but Frank shows no sign of feeling better.



To his friends and family, Frank seems like a different person. He's not the lively man they used to know, always cracking jokes, telling stories, or starting a new project. Now he seems to walk and talk in slow-motion. He doesn't even leave home most days and he avoids phone calls and visitors. Even more concerning is his rapidly deteriorating health. Frank's diabetes used to be under control, but not anymore. Making matters worse, he often skips meals or forgets to take his insulin shots.

Causes of depression in the elderly

Many elderly adults face significant life changes and stressors that put them at risk for depression. Those at the highest risk include older adults with a personal or family history of depression, failing health, substance abuse problems, or inadequate social support.

Causes and risk factors that contribute to depression in the elderly include:

- **Loneliness and isolation** – Living alone; a dwindling social circle due to deaths or relocation; decreased mobility due to illness or loss of driving privileges.
- **Reduced sense of purpose** - Feelings of purposelessness or loss of identity due to retirement or physical limitations on activities.
- **Health problems** – Illness and disability; chronic or severe pain; cognitive decline; damage to body image due to surgery or disease.
- **Medications** – Many prescription medications can trigger or exacerbate depression.
- **Fears** – Fear of death or dying; anxiety over financial problems or health issues.
- **Recent bereavement** - The death of friends, family members, and pets; the loss of a spouse or partner.

Is it grief or depression?

Although a grieving person may experience a number of depressive symptoms such as frequent crying and profound sadness, grief is a natural and healthy response to bereavement and other major losses. There is a difference, however, between a normal grief reaction and one that is disabling or unrelenting. While there's no set timetable for grieving, if it doesn't let up over time or extinguishes all signs of joy—laughing at a good joke, brightening in response to a hug, appreciating a beautiful sunset—it may be depression.

Signs and symptoms of depression in the elderly

Recognizing depression in the elderly starts with knowing the signs and symptoms. Depression red flags include:

- Sadness
- Fatigue
- Abandoning or losing interest in hobbies or other pleasurable pastimes
- Social withdrawal and isolation (reluctance to be with friends, engage in activities, or leave home)
- Weight loss; loss of appetite
- Sleep disturbances (difficulty falling asleep or staying asleep, oversleeping, or daytime sleepiness)
- Loss of self-worth (worries about being a burden, feelings of worthlessness, self-loathing)
- Increased use of alcohol or other drugs
- Fixation on death; suicidal thoughts or attempts

Depression without sadness

Older adults don't always fit the typical picture of depression. Many depressed seniors don't claim to feel sad at all. They may complain, instead, of low motivation, a lack of energy, or physical problems. In fact, physical complaints, such as arthritis pain or headaches that have gotten worse, are often the predominant symptom of depression in the elderly.

Older adults with depression are also more likely to show symptoms of anxiety or irritability. They may constantly wring their hands, pace around the room, or fret obsessively about money, their health, or the state of the world.

Depression Clues in Older Adults

Older adults who deny feeling sad or depressed may still have major depression. Here are the clues to look for:

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| ■ Unexplained or aggravated aches and pains | ■ Loss of feeling of pleasure |
| ■ Hopelessness | ■ Slowed movement |
| ■ Helplessness | ■ Irritability |
| ■ Anxiety and worries | ■ Lack of interest in personal care (skipping meals, forgetting medications, neglecting personal hygiene) |
| ■ Memory problems | |

Adapted from [American Academy of Family Physicians](#)

Helping a depressed friend or relative

The very nature of depression interferes with a person's ability to seek help, draining energy and self-esteem. For depressed seniors, raised in a time when mental illness was highly stigmatized and misunderstood, it can be even more difficult—especially if they don't believe depression is a real illness, are too proud or ashamed to ask for assistance, or fear becoming a burden to their families. With such roadblocks, assistance from others can mean the difference between suffering and recovery.

If a senior citizen you care about is depressed, you can make a difference by offering emotional support. Listen to your loved one with patience and compassion. Don't criticize feelings expressed, but point out realities and offer hope. You can also help by seeing that your friend or family member gets an accurate diagnosis and appropriate treatment. Help your loved one find a good doctor, accompany him or her to appointments, and offer moral support.

Other tips for helping a depressed elderly friend or relative:

- **Invite your loved one out.** Depression is less likely when people's bodies and minds remain active. Suggest activities to do together that your loved one used to enjoy: walks, an art class, a trip to the museum or the movies—anything that provides mental or physical stimulation.
- **Schedule regular social activities.** Group outings, visits from friends and family members, or trips to the local senior or community center can help combat isolation and loneliness. Be gently insistent if your plans are refused: depressed people often feel better when they're around others.

- **Plan and prepare healthy meals.** A poor diet can make depression worse, so make sure your loved one is eating right, with plenty of fruit, vegetables, whole grains, and some protein at every meal.
- **Encourage the person to follow through with treatment.** Depression usually recurs when treatment is stopped too soon, so help your loved one keep up with his or her treatment plan. If it isn't helping, look into other medications and therapies.
- **Make sure all medications are taken as instructed.** Remind the person to obey doctor's orders about the use of alcohol while on medication. Help them remember when to take their dose.
- **Watch for suicide warning signs.** Seek immediate professional help if you suspect that your loved one is thinking about suicide.

For more tips, see [Helping a Depressed Person: Taking Care of Yourself While Supporting a Loved One](#).

Depression self-help for seniors

If you're depressed, you may not want to do anything or see anybody. But isolation and inactivity only make depression worse. The more active you are—physically, mentally, and socially—the better you'll feel.

Some ways to combat and prevent depression include:

- **Getting out in to the world** – Try not to stay cooped up at home all day. Go to the park, take a trip to the hairdresser, or have lunch with a friend.
- **Connecting to others** – Limit the time you're alone. If you can't get out to socialize, invite loved ones to visit you, or keep in touch over the phone or email.
- **Participating in activities you enjoy** - Pursue whatever hobbies or pastimes bring or used to bring you joy.
- **Volunteering your time** – Helping others is one of the best ways to feel better about yourself and regain perspective.
- **Taking care of a pet** – Get a pet to keep you company.
- **Learning a new skill** – Pick something that you've always wanted to learn, or that sparks your imagination and creativity.
- **Enjoying jokes and stories** – Laughter provides a mood boost, so swap humorous stories and jokes with your loved ones, watch a comedy, or read a funny book.
- **Maintaining a healthy diet** – Avoid eating too much sugar and junk food. Choose healthy foods that provide nourishment and energy, and take a daily multivitamin.
- **Exercising** - Even if you're ill, frail, or disabled, there are many safe exercises you can do to build your strength and boost your mood—even from a chair or wheelchair.

To learn more about starting a fitness program, see [Exercise Tips for Seniors](#).

Getting professional help for depression

While support and self-care can help depressed seniors, professional help should also be pursued. If you see the signs and symptoms of depression in yourself or an older relative, schedule an appointment with a doctor for a thorough evaluation, including a complete physical and lab workup. This is particularly important since many medical conditions, medications, an even certain physiological changes of aging can cause depression or compound the problem.

Diagnosing depression in the elderly

Before being diagnosed with depression, elderly adults should be screened for common health issues that can affect mood. These include:

- Hormonal imbalances
- Thyroid problems
- Vitamin B12 deficiency

- Other nutritional deficiencies
- Electrolyte imbalances or dehydration

Illness and depression

When undergoing evaluation for depression, long-term or severe health issues should also be taken into account. Chronic medical conditions, particularly those that are painful, disabling, or life-threatening, can understandably lead to depression. Illnesses that affect the brain can also cause depression through the disease process itself.

Medical conditions that commonly trigger depression include:

- Heart attack or disease
- Parkinson's disease
- Stroke
- Alzheimer's
- Multiple sclerosis
- Cancer
- Diabetes

Medication-induced depression

All medications have side effects, but some can actually cause symptoms of depression or make a pre-existing depression worse. Harmful drug interactions or a failure to take a medication as prescribed can also contribute to depression. For elder individuals with multiple prescriptions, the risk of medication-induced depression is particularly high.

Medications that can induce depression include:

- Steroids
- Painkillers
- Hormones
- Arthritis medication
- High blood pressure drugs
- Heart disease medication
- Tranquilizers
- Cancer drugs

Make a list of all medications being taken and bring it to the doctor. He or she can help you determine if any of the prescriptions are causing depression symptoms.

Treatment options for the elderly

Depression treatment is just as effective for elderly adults as it is for younger people. Therapy, support groups, and medication can all help relieve symptoms. However, health issues should always be considered in an older adult's treatment plan.

Any medical issues complicating the depression must be addressed and resolved. For example, many seniors suffer from chronic pain. Pain that interferes with daily activities can prevent depression recovery, so it must be managed as part of the treatment plan.

Antidepressant treatment

Antidepressant medications can ease depression in the elderly. But older adults are more sensitive to drug side effects and vulnerable to interactions with other medicines they're taking. Depressed seniors may also forget to take the medication. Furthermore, recent studies have found that SSRIs such as Prozac can cause rapid bone loss and a higher risk for fracture and falls. Because of these safety concerns, elderly adults on antidepressants should be carefully monitored.

Counseling and therapy

Studies have found that therapy works just as well as medication in relieving mild to moderate depression. And unlike antidepressants, therapy also addresses the underlying causes of the depression.

- **Supportive counseling** includes religious and peer counseling. It can help ease loneliness and the hopelessness of depression.
- **Psychotherapy** helps people work through stressful life changes, heal from losses, and process difficult emotions.
- **Cognitive behavioral therapy (CBT)** helps people change negative thinking patterns, deal with problems in healthy ways, and develop better coping skills.
- **Support groups** for depression, illness, or bereavement connect people with others who are going through the same challenges. They are a safe place to share experiences, advice, and encouragement.

Dementia vs. depression

Never assume that a loss of mental sharpness is just a normal sign of old age. It could be a sign of depression or dementia both of which are common in the elderly. But since depression and dementia share many similar symptoms, including memory problems, sluggish speech and movements, and low motivation, it can be difficult to tell the two apart. There are, however, some differences that can help you distinguish between the two.

Is it Depression or Dementia?	
Symptoms of Depression	Symptoms of Dementia
<ul style="list-style-type: none"> ■ Mental decline is relatively rapid ■ Knows the correct time, date, and where he or she is ■ Difficulty concentrating ■ Language and motor skills are slow, but normal ■ Notices or worries about memory problems 	<ul style="list-style-type: none"> ■ Mental decline happens slowly ■ Confused and disoriented; becomes lost in familiar locations ■ Difficulty with short-term memory ■ Writing, speaking, and motor skills are impaired ■ Doesn't notice memory problems or seem to care

Whether the cognitive decline is caused by dementia or depression, prompt diagnosis and treatment are key. If it's depression, memory, concentration, and energy will bounce back with treatment. Treatment for dementia will also improve you or your loved one's quality of life. And in some types of dementia, symptoms can be reversed, halted, or slowed.

To learn more about dementia, see [Alzheimer's and Other Dementias: Understanding the Differences](#)

To Learn More...

[Signs & Symptoms of Depression](#)

[Depression Self-Help & Recovery](#)

[Antidepressant Medications](#)

[Depression Treatment & Diagnosis](#)

[Helping a Suicidal Person](#)

[Coping with Suicidal Thoughts & Feelings](#)

Related links for depression in older adults

General resources for depression in the elderly

[Depression](#) – Guide to depression in seniors from the National Institute of Mental Health and the National Institute on Aging Provides information about the risk factors, symptoms, and treatment. (National Institutes of Health)

[Recognizing Depression in Later Years](#) – Learn how to recognize depression in the elderly. Includes clues to diagnosis and commonly overlooked signs and symptoms. (Healthology)

[Depression in the Elderly](#) – Overview of depression in older adults, including contributing factors, signs and symptoms, and how to find help and support. (Palo Alto Medical Foundation)

[Understanding Geriatric Depression](#) – Provides a good overview and information on the signs and symptoms that distinguishes

dementia from depression, discusses treatment and side effects of medications, and suggests ways to help a depressed elderly person. (ElderCare Online)

[Depression in Older Adults](#) – Pamphlet for seniors with depression describes what it feels like, what the risk factors are, and how you can help yourself. (Royal College of Psychiatrists)

[Overcoming Geriatric Depression](#) – Provides a discussion of the emotional needs of elders, and offers very useful suggestions for family members in dealing with a depressed elder. (ElderCare Online)

Antidepressant use in the elderly

[Antidepressant Use Linked to Bone Loss](#) – Covers two Archives of Internal Medicine studies on the connection between SSRI use in adults over 65 and abnormal bone loss. (National Institutes of Health)

[Study: Antidepressants Boost Fracture Risk](#) – Reviews a Canadian study, published in the Archives of Internal Medicine, and the link it found between SSRI use and bone fractures in the elderly. (CBS News)

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