MYTHS & FACTS

1. Depression is not a normal part of aging, although older adults are at an increased risk for experiencing depression.
2. Depression is not just having “the blues” or having emotions related to major life events (e.g. mourning over the loss of a loved one, retirement, etc.).
3. Older adults often do not seek help for this condition, and providers often misdiagnose and undertreat depression.

WHAT IS DEPRESSION?

Depression is a true medical condition (like diabetes, asthma and high blood pressure) that can be properly diagnosed and effectively treated.

Think DEPRESSION when one or more of the following are present:

- feelings of sadness and anxiety lasting for weeks at a time
- feelings of hopelessness, pessimism, and/or irritability
- loss of interest in activities once pleasurable
- fatigue and decreased energy
- difficulty concentrating, remembering details and making decisions
- sleeping difficulties, including early-morning wakefulness and excessive sleeping
- overeating or loss of appetite
- thought or attempts at suicide
- unexplained aches and pains, including headaches, digestive problems, abdominal cramps, muscle soreness, etc.
HOW MANY OLDER ADULTS ARE DEPRESSED?

Although it is estimated that about 1-5% of the elderly living in the community are depressed, this figure dramatically rises to 12% in those requiring home or hospital health care.

WHERE TO FIND HELP:

There are a number of excellent websites, including:

- National Institute of Mental Health  
  www.nimh.nih.gov
- Geriatric Mental Health Foundation  
  www.gmhfonline.org
- American Psychological Association  
  www.apa.org

If you are concerned about a loved one, offer to go with him or her to see a health care provider to be diagnosed and treated. If he/she is in “crisis,” immediately call 911 or visit a nearby hospital’s emergency department.