



Ask

EVERCARE'S
CHIEF MEDICAL
OFFICER



DEPRESSION IN THE ELDERLY

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.



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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.



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