Integrated Literature Review of Depression in Elderly People

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According to the World Health Organization (WHO) report by 2020, depression will be the second leading cause of disability worldwide; currently, depression is very prevalent in developing countries; globally, the second leading cause of disability is depression. Studies have shown that currently, 30% of elderly people aged more than 65 years have emotional disorders, and 64% of hospitalized elderly people have depression symptoms such as low mood, sleep disturbance, poor appetite, or pain combined with anxiety [1,2,3,4,5]. Additionally, 36.9% of 111 elderly patients experienced depression, and the prevalence was 45.7%, 36.2%, and 22.2% in those living in nursing homes, intermediate care facilities, and domiciliary care facilities, respectively [6]. Specifically, 21.7% of 152 veterans developed depression [7]. Moreover, 34.9% of community-dwelling elderly veterans in the Yunlin-Chiai area exhibited depression symptoms; this prevalence rate was higher than that for other communities in Taiwan [8]. Depression exerts severe effects in elderly people, including physical and psychological symptoms and social functioning disorders. Based on research findings accumulated over many years, elderly people with mild, early-diagnosed, and relapsed depression exhibit a high risk of dementia [5]. Furthermore, systematically reviewed the literature on the association of depression symptoms with recurrent falls among the elderly population and demonstrated that elderly people with an abnormal status for four items of the Geriatric Depression Scale (GDS) had experienced recurrent falls twice during the past 2 years [9]. Overall, the depression symptoms and disorders influence their health and are the major factors causing a high risk of suicide; thus, depression represents a heavy burden on the family and society [3,4,8]. The authors conducted a literature review of the depression findings of systematic reviews and meta-analyses in elderly people. According to the integrated review, the defining characteristics of depression in elderly people include 2-5 symptoms, namely sleep disorders, changed weight, psychomotor retardation, fatigue, and feelings of worthlessness or guilt within 2 weeks. The critical symptom is either low mood or loss of interest in usual activities. Moreover, elderly people with an abnormal status for the items of GDS may experience recurrent falls twice during the past 2 years. The related factors of depression in elderly people include demographic, physical, psychological, mental, and social factors. Four major self-rating depression scales for elderly people, including BDI, SDS, CES-D, GDS, and CES-D is a valid scale that can be used to distinguish major depression from emotional disorders among elderly people, and it can also be used in pharmacological trials. The interventions for depression in elderly people include pharmacological and nonpharmacological methods. Regarding pharmacological treatment, the evidence-based literature has demonstrated that duloxetine taken for 8 weeks can alleviate recurrent major depression in elderly people; at the same time, healthcare professionals should pay attention to some side effects. Moreover, herbal medicine (Gan Mai Da Zao decoction) only alleviates post-stroke depression in elderly people. Nonpharmacological interventions are exercise therapies such as yoga; alternative therapies such as touching, intimate massage, music, art, nature, as well as cognitive, reminiscence, and psychotherapy. Based on the literature review findings, the authors recommend that future studies should develop a comprehensive depression assessment scale for elderly patients that include the related factors and defining characteristics of depression in elderly people. Based on the evidence-based literature, more nonpharmacological interventions should be administered to elderly patients with depression to improve their quality of life.

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Abstract Summary:
The authors conducted a literature review of the depression findings of systematic reviews and meta-analyses in elderly people, including the defining characteristics of depression, four major self-rating depression scales, and the interventions for depression in elderly people

Content Outline:
a) The defining characteristics of depression in elderly people include 2–5 symptoms, namely sleep disorders, changed weight, psychomotor retardation, fatigue, and feelings of worthlessness or guilt within 2 weeks; the critical symptom is either low mood or loss of interest in usual activities.

b) The related factors of depression in elderly people include demographic, physical, psychological, mental, and social factors.

c) Colasanti et al. (2010) identified four major self-rating depression scales for elderly people: the Beck Depression Inventory (BDI), Self-rating Depression Scale (SDS), Center for Epidemiological Studies Depression (CES-D), and GDS.

d) The interventions for depression in elderly people include pharmacological and nonpharmacological methods.

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