

5th International Conference on Geriatric Medicine & Gerontological Nursing

November 14-15, 2016 | Atlanta, USA



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BIPOLAR DEPRESSION: PREDICTORS AND IMPLICATIONS FOR TREATMENT AND PROGNOSIS IN ELDERLY

Depression is one of the leading causes of premature death especially in the geriatric population, and one of the highest burdens of overall disability. Depression also can be a precursor to suicide. Highest rates of suicide occur in the geriatric population. Thus proper diagnosis of depression (unipolar vs. bipolar) and aggressive treatment are very important.

Depressive episodes are still underdiagnosed and undertreated. Several factors contribute to underdiagnosis and treatment, including lack of detailed knowledge of the condition, lack of confidence in treatments, etc. Improving knowledge and confidence in diagnosing depression types in order to improve either treatment (based on proper diagnosis of unipolar vs bipolar depression) both in psychiatry and primary care clinics would improve patient's mental and physical outcomes, morbidity, mortality, and quality of life.

Despite all available education avenues, there are still high rates of underrecognition of depression and misdiagnosis of bipolar depression among psychiatrists as well as primary care physicians. A meta-analysis of several studies comparing several western countries found that clinicians in Australia and the US were the worst in identifying depression.

Moreover, bipolar depression can be difficult to distinguish from unipolar depression and can be underdiagnosed. Delays can lead to further worsening of the disease with additional burden. This presentation will review the studies and the evidence-based medical approach to early detection, proper diagnoses, and how bipolar and unipolar depression are treated differently, especially when it comes to different pharmacotherapeutics. Recent updated evidence-based interventions with pharmacotherapy and brain stimulation interventions will be discussed.

Biography

Nagy A. Youssef is an Associate Professor at the Medical College of Georgia, AU. His primary academic interest include clinical, education and research in treatment-resistant psychiatric disorders especially mood disorders and PTSD and suicide prevention. He is interested in the mechanistic understanding at the environment-genomic interface and brain stimulation interventions of these disorders. He did medical school at Cairo University (Egypt); psychiatry residency and postgraduate fellowship at the University of South Alabama and Yale University; and a research fellowship at both Durham VA and Duke University. He was on the faculty at Duke University before moving to Augusta.

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