

Psychiatrist, Geriatric Psychiatry and Counseling Psychology

December 08-09, 2016 San Antonio, USA

Aging and psychiatric issues in African Americans

William B Lawson

University of Texas, USA

Multiple studies have shown that African Americans show disparities in health care outcomes throughout the life cycle. While the elderly have not been studied as extensively, nevertheless disparities have been found in both physical and mental health. While life expectancy remains lower it has increased, allowing African Americans to show an increase in such disorders as Alzheimer's, with its illness burden on families that have fewer resources. Problems such as drug abuse are more often seen in the elderly and chronic medical disorders such as AIDS have emerged as problems for elderly females. Moreover the willingness of African American families to support their elderly rather than to use public or private facilities raised significant issues for family members especially when they are caretakers for the severely mentally ill. However suicide rates tend to be lower for reasons that are not clear but are well worth investigating. The negative consequences and positive outcomes of aging should be investigated.

william.lawson@austin.utexas.edu

Depression and associated factors among hospitalized elderly: A cross sectional study in a Saudi Teaching Hospital

Sultan H Alamri, Abdulaziz I Bari and Abdulrahman T Ali

King Abdulaziz University, Saudi Arabia

Background & Purpose: Depression is a serious and often under diagnosed psychiatric disorder. The purpose of this study was to examine the prevalence of depression and associated factors among hospitalized elderly.

Methods: We included a consecutive series of patients (n=208) aged 60 years and older who were admitted to the medical and surgical wards of King Abdulaziz University Hospital (KAUH). Participants were interviewed within 48 hours of admission using an interviewer administered questionnaire to provide basic demographic and clinical information. Patient Health Questionnaire-9 (PHQ-9) was used to screen for depression. DSM-V criteria were used to confirm the diagnosis. According to PHQ-9, there were 34(17%) and 21(10.5%) of the 200 patients diagnosed with major depressive disorder and other depressive disorder respectively.

Results: There was no statistical significant difference found between major depressive disorder, other depressive disorder and no depression groups in terms of socio-demographic and clinical measures except for the number of co-morbidity which was significantly higher in the major depressive disorder group than the no depression group (post hoc $p=0.023$). According to DSM-V criteria, There were 24(12%) of the 200 patients diagnosed with major depression which is less than the number diagnosed by PHQ-9. There was no statistical difference in patients' characteristics between DSM-V depression and no depression group.

Conclusion: In conclusion, our study demonstrated a high prevalence rate of depression among hospitalized elderly. Consequently, physicians must maintain a high index of suspicion for such illness in this frail population.

abdulaziz.bari@gmail.com