



Stress, Depression and Anxiety among Geriatrics at Old Age

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DESCRIPTION

Depression is that the common mental disease which occurs during old age. Depression is an illness marked by feelings of sadness, worthlessness or hopelessness as well as problems of concentrating and remembering. Old age may be a risk factor for depression caused by damage or harm. People with high negative thoughts will tend to possess greater rates of depression which ends up in suicide in the elderly people. Persistent pain can lead to cyclical patterns of anxiety, depression and social isolation.

Prevalence of depression

The prevalence of depression is higher in the Indian geriatric population when compared to other countries such as China, Ghana, Mexico, Russia, and South Africa documented by WHO Global aging and adult health 2007-2010. Six millions of Americans aged 65 and above, suffer with late life depression but 10% only received the treatment. Dementia (5%) and depression (7%) are the most common mental and neurological disorders in this age group. A meta-analysis of studies worldwide among 4,87,275 geriatric people found the prevalence rate of depressive disorders is between 4.7% to 16% and also it indicates the higher prevalence of geriatric depression in India. Persistent pain in the elderly can lead to cyclical patterns of anxiety, depression and social isolation. One in four elderly people were experiencing depression. The estimated prevalence of depression among Indian geriatric population analysed from fifty one studies from 16 states of India revealed as 34.4%. The prevalence is greater among females, geriatric people residing in rural areas and eastern part of the country. According to the Centre for Disease Control and Prevention, 1%-5% of the general

population is affected with depression, 13.5% of geriatric people require home health care and 11.5% needs hospitalization for their treatment. Older people are more likely to blame their depression on events or social circumstances, but while the death of a partner or friends, or coping with a chronic illness are important contributory factors, there are real biological changes that account for depression. Divorce is a leading cause of depression which poses a significant risk of depression among the aged population. The frequencies of the depression show approximately 3% and subsyndromal depressive indications shows 15%. Depression often occurs in geriatric people who suffer with medical problems and disabilities. About 70.42% of them had mild depression and 29.58% had severe depression. Depression in the geriatric people is an emerging public health issue in developing countries. The prevalence of this depression was found to be 37.8 from an urban slum in Bangalore, India. Among 1451 geriatric people, the prevalence of depressive symptoms was 15.2% and the occurrence of depressive symptoms was greater among women.

Effects of depression on brain

According to National Collaborating Centre for Mental Health, the pathophysiology of depression includes a chemical imbalance of the neurotransmitters, such as noradrenaline, serotonin and cortisol and structural changes in the brain. The chemicals that brain cells use to communicate with each other which called neurotransmitters become out of balance. This happens in young and old alike and is always abnormal. Brain-imaging studies have shown that in depression the brain circuits responsible for regulating mood, thinking, sleep, appetite and behavior all fail to work properly.

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