Depression in Later Life

Depression affects more than 19 million Americans every year, regardless of age, race, or gender. While depression is not a normal part of the aging process, there is a strong likelihood of it occurring when other physical health conditions are present. For example, nearly a quarter of the 600,000 people who experience a stroke in a given year will experience clinical depression.[1] Unfortunately, symptoms of depression are often overlooked and untreated when they coincide with other medical illnesses or life events that commonly occur as people age (e.g., loss of loved ones). However, clinical depression is never a “normal” response; it is a serious medical illness that should be treated at any age.

Prevalence
- More than two million of the 34 million Americans age 65 and older suffer from some form of depression.[2]

Co-occurring Illnesses
- Symptoms of clinical depression can be triggered by other chronic illnesses common in later life, such as Alzheimer’s disease, Parkinson’s disease, heart disease, cancer and arthritis.[3]

Widowhood
- One-third of widows/widowers meet criteria for depression in the first month after the death of their spouse, and half of these individuals remain clinically depressed after one year.[4]

Healthcare Costs
- Older patients with symptoms of depression have roughly 50% higher healthcare costs than non-depressed seniors.[5]

Suicide
- Depression is a significant predictor of suicide in elderly Americans. 2
- Comprising only 13% of the U.S. population, individuals aged 65 and older account for 20% of all suicide deaths, with white males being particularly vulnerable. 2

Suicide among white males aged 85 and older (65.3 deaths per 100,000 persons) is nearly six times the suicide rate (10.8 per 100,000) in the U.S.2

Treatment
- More than 55% of older persons treated for mental health services received care from primary care physicians. Less than 3% aged 65 and older received treatment from mental health professionals.[6]
- Primary care physicians accurately recognize less than one half of patients with depression, resulting in potentially decreased function and increased length of hospitalization.[7]
- Fortunately, clinical depression is a very treatable illness. More than 80% of all people with depression can be successfully treated with medication, psychotherapy or a combination of both.[8]
Older Adult Attitudes Toward Depression

According to a National Mental Health Association survey on attitudes and beliefs about clinical depression:

- Approximately 68% of adults aged 65 and over know little or almost nothing about depression.
- Only 38% of adults aged 65 and over believe that depression is a “health” problem.
- If suffering from depression, older adults are more likely than any other group to “handle it themselves.” Only 42% would seek help from a health professional.
- Signs of depression are mentioned more frequently by people under age 64 than people aged 65 and over. These include “a change in eating habits” (29% vs. 15%), “a change in sleeping habits” (33% vs. 16%) and “sadness” (28% vs. 15%).
- About 58% of people aged 65 and older believe that it is “normal” for people to get depressed as they grow older.

Older Adults: Depression and Suicide Facts

**Depression**, one of the most common conditions associated with suicide in older adults, is a widely underrecognized and undertreated medical illness. In fact, several studies have found that many older adults who die by suicide—up to 75 percent—have visited a primary care physician within a month of their suicide. These findings point to the urgency of improving detection and treatment of depression as a means of reducing suicide risk among older persons.

Older Americans are disproportionately likely to die by suicide. Comprising only 13 percent of the U.S. population, individuals age 65 and older accounted for 18 percent of all suicide deaths in 2000. Among the highest rates (when categorized by gender and race) were white men age 85 and older: 59 deaths per 100,000 persons in 2000, more than five times the national U.S. rate of 10.6 per 100,000.

Of the nearly 35 million Americans age 65 and older, an estimated 2 million have a depressive illness (major depressive disorder, dysthymic disorder, or bipolar disorder) and another 5 million may have “subsyndromal depression,” or depressive symptoms that fall short of meeting full diagnostic criteria for a disorder. Subsyndromal depression is especially common among older persons and is associated with an increased risk of developing major depression. In any of these forms, however, depressive symptoms are not a normal part of aging. In contrast to the normal emotional experiences of sadness, grief, loss, or passing mood states, they tend to be persistent and to interfere significantly with an individual's ability to function.

Other Resources

Contact your local Mental Health America of Illinois at (312) 368-9070 ext.10, or via our website at www.mhai.org. You can also contact your local community mental health center or for additional resources, please call 1-800-969-NMHA.

Mental Health America’s Campaign for America’s Mental Health works to raise awareness that mental illnesses are common, real and treatable illnesses and ensure that those most at-risk receive proper, timely and effective treatment.