Geriatric Mood and Anxiety Disorders:

5 Things you need to know about Treating Depression in the Elderly

Kiran Rabheru MD, CCFP, FRCP
Geriatric Psychiatrist, The Ottawa Hospital
Professor, University of Ottawa
Faculty/Presenter Disclosure

• **Faculty:** DR. KIRAN RABHERU

• **Relationships with commercial interests:** NONE
Disclosure of Commercial Support

- This program has received financial support from N/A
- This program has received in-kind support from N/A
- Potential for conflict(s) of interest NONE
Mitigating Potential Bias

NONE
1. Beware of Ageism
2. Recognize Geriatric Depression
3. It is very common & has a big impact on QoL

Evidence of Hippocampal Atrophy and Loss in MDD Patients

- Compared to controls, patients with depression had smaller hippocampal volumes.
- Decreased hippocampal volume may be related to the duration of depression.

4. Optimize what you can
5. Treatment makes people feel better
CORE SYMPTOMS
- Depressed Mood
- Lack of Interest & Pleasure

Psychological
- Hopelessness
- Helplessness
- Guilt
- Suicidal

Physiological
- Sleep
- Appetite
- Weight
- Energy
- Concentration

In older adults:
- Less mood symptoms
- Somatic symptoms
- Agitation & Anxiety
- Psychotic symptoms
Stressors

- Physical Illness***
- surgery, immobility
- Sensory deprivation
- Social isolation / Rejection
- Economic / Living Conditions
- Loss of significant other
- Retirement
Depression is common!

<table>
<thead>
<tr>
<th></th>
<th>Major</th>
<th>Minor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community</td>
<td>1-3%</td>
<td>15%</td>
</tr>
<tr>
<td>Primary care</td>
<td>10%</td>
<td>20%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>15%</td>
<td>30%</td>
</tr>
<tr>
<td>Long Term Care</td>
<td>15%</td>
<td>30%</td>
</tr>
</tbody>
</table>

13% annual incidence of new episodes in nursing homes


Achieving Remission: When Are The Chances Greatest?

During the first 6 months of treatment, the chances of achieving remission are 50%. The chances are much lower in the next 8 to 10 months, with only 5% of cases achieving remission. This data is from Keller et al., Arch Gen Psych, 1992; 49: 809-816.
Depression is treatable.

- **Severe: Major depression**:
  - Use Meds / ECT.
  - treated successful in very old & early old. (1)

- **Advanced Minor Depression/Dysthymia**:
  - Use Meds
    - SSRI (Paroxetine) showed moderate benefit. (3)

- **Mild Minor Depression**:
  - May not need meds / **High Placebo response**.
    - SSRI (Paroxetine) not clearly superior to placebo..may help more severely ill patients (2)

**Antidepressants are safe and effective in the treatment of late-life depression.** (4)

Placebo Trials

The response to placebo in published trials of antidepressant medication for MDD is highly variable and often substantial and has increased significantly in recent years, as has the response to medication.

JAMA 2002 Apr 10;287(14):1840-7
Placebo response in studies of major depression: variable, substantial, and growing.
Walsh BT, Seidman SN, Sysko R, Gould M.
Teaching an old dog new tricks!
It may be difficult but it IS possible!

"Okay your father managed to get a mouse. Now how do we use it?"
Depression in the Elderly: Treatment Program

- Strong doctor-patient relationship
- Environmental, Social, Recreational, Supportive & Spiritual Interventions
- Psychoeducation
  - include Family
- Medication
  - Drug: TCAs, SSRIs & Novels
  - Dosage
  - Duration
- ECT for severe cases
All Antidepressants work: Choose based on target symptoms and side effect profile

Antidepressants’ Modes of Action
Serotonin, Norepinephrine & Dopamine

- Serotonin
  - Anxiety
  - Irritability
  - Impulsivity

- Norepinephrine
  - Energy
  - Interest
  - Mood, Emotion, Cognitive Function
  - Motivation
  - Drive

- Dopamine
  - Sex
  - Appetite
  - Aggression
Adverse Effects of Neurotransmitter Activity and Receptor Binding

Sedation/drowsiness
- Weight gain

Blurred vision
- Dry mouth
- Constipation
- Sinus tachycardia
- Urinary retention
- Memory dysfunction

Priapism

Psychomotor activation
- Psychosis

DA reuptake inhibition

5HT₂ Stimulation

H₁ block

5-HT₃ Stimulation

ACh block

5-HT reuptake inhibition

NE reuptake inhibition

Alpha₁ block

Postural hypotension
- Dizziness
- Reflex tachycardia

Alpha₂ block

Nausea

GI disturbances

Activating effects

Dry mouth
- Urinary retention
- Activating effects
- Tremor

Sexual dysfunction
- Activating side effects

Adapted from Richelson E. Current Psychiatric Therapy. 1993;232-239
Importance of Mental Health

Mental health is fundamental to health.