Signs of depression

- Feeling down, most of the day, nearly every day and for weeks on end
- Change in sleeping patterns
- Loss of appetite or significant weight loss or gain
- Loss of interest and pleasure in life
- Loss of motivation
- Noticeable changes in behaviour such as irritability or withdrawing from others
- Feelings of hopelessness or worthlessness
- Pain including headaches, abdominal pain and other body pain for which the doctor can find no cause
- Poor concentration, forgetfulness, finding it hard to make decisions

GPs and mental health professionals recognise these signs as possible indicators of depression, especially if you have experienced a number of them for two weeks or longer. Or they may be the sign of a physical illness. Consulting a GP and having a check-up is really important.

Where can I get help?

If those 'blues' are persistent, talk to your GP. The earlier a diagnosis is made and treatment begins, the better your chances of recovery and a return to your usual activities and enjoyment of life. The sooner the better.

Sometimes, especially if you are feeling down, it is really hard to remember exactly what the doctor says. Consider having a supportive friend or family member accompany you. If you do not exercise regularly, ask your GP about a green prescription.

Treatment for depression may include seeing a counsellor and/or taking medication, usually an antidepressant. If you are prescribed medication remember that you are entitled to know its name, what symptoms it is treating, how long it will be before it takes effect, how long you have to take it for and what the side effects are. This is very important if you are already taking other medication. If you feel the medication is not working after 2-3 weeks, you should go back to see your GP as something else may suit you better.

Resources

The Mental Health Foundation has a comprehensive range of information on mental health and wellbeing including pamphlets, books and videos for purchase or loan, and our relaxation CD is available at a cost of \$10.

Contact us

Resource & Information Service

Phone: **09 300 7030**

Email: resource@mentalhealth.org.nz

Mental Health Foundation

PO Box 10051, Dominion Road, 81 New North Road, Eden Terrace, Auckland 1446

Phone: **09 300 7010** Fax: **09 300 7020**

www.mentalhealth.org.nz

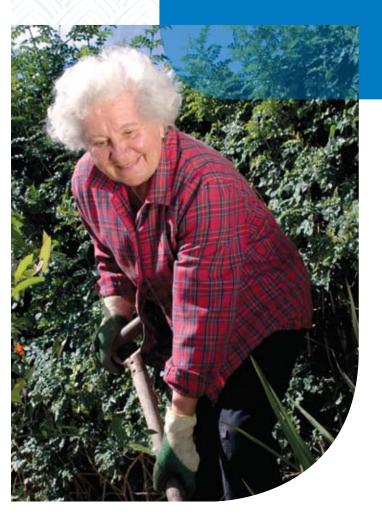
Further information Age Concern

Phone: 04 801 9338 Fax: 04 801 9336

www.ageconcern.org.nz

This brochure was produced with the support of the Elsie Steele Trust and the Auckland City Council Community Group Assistance Fund

Late Life Depression





www.mentalhealth.org.nz

Depression is more than an 'attack of the blues' or being 'in the doldrums' for a short while. Depression is a state of persistent and ongoing unhappiness. Many older people experience depression and it can be a factor in suicide in that age group. Yet most depression goes undetected and untreated.

Why is depression often not recognised in older people?

- Many older people don't like to bother their GP about something other than a physical illness. They seldom mention depression and are more likely to talk about vague symptoms.
- Although they know they need help, some people have difficulty putting troubled feelings into words.
- People born in the early part of the 20th century endured world wars and economic depression and learned to 'keep their chin up' and carry on, without complaining.

- Those with the memories of people being placed in asylums and being subjected to treatment without their consent may be frightened of talking to a doctor about their mental health.
- Some older people don't like the idea of taking more pills and do not easily accept that counselling can help when they are depressed.
- Many people, including some GPs, seem to think depression is an inevitable part of ageing.

What causes depression?

Grief, loss, change, loneliness, poverty, illness, reaction to medication and many other factors may contribute to depression. Often it is due to a combination of factors. Sometimes it just seems to come 'out of the blue'.

What about grief?

The signs of depression and grief can be similar, although people who have experienced both talk about the 'sadness' of grief compared with the 'numbness' or almost non-feeling state of major depression. Grieving is a natural process. After a period it usually lessens or resolves. If you have persistent distressing signs, which continue for months after a bereavement or loss, you may need help from a doctor or counsellor.

Who's at risk?

Those more at risk of depression include people who've had previous episodes of depression; a family history of depression or suicide attempts; problem use of alcohol or other substances; childhood trauma; responsibilities for caring for others; and chronic or severe physical illness.

What can I do?

Many older people have developed strategies for dealing with times when they feel down. These include gardening, walking on the beach, visiting grandchildren, reading a good book, phoning friends, treating yourself to a small luxury, having your hair done or even cleaning the oven! These things sometimes drive the blues away successfully. But a word of warning – people can also 'mask' or disguise depression by making themselves really busy and not getting the help they need.

It is said that 'friends and family are good medicine' and having meaningful contacts with others is of real value. You may find that hobbies or voluntary work contribute to a sense of worth and belonging in a community which often seems to forget its older citizens. Use your voice and your vote to influence people's attitudes and change social

factors like poverty that may contribute to depression. You may find comfort and meaning in spirituality or religious beliefs. These are all things that protect you from depression or help you make a successful recovery from it.

Friends and family are good medicine

