Depression and dependence in seniors

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NTRODUCTION

Aging is often linked to cimorbidities, polymedication and high risk of depression usually underdiagnosed. While this phenomenon is considered unavoidable, few diseases such as depression are treatable. Yet, it is still underdiagnosed du to misleading symptoms.

METHOD

We conducted a prospective data collection over the period between 2018 and 2019 including

seniors older than 65 years old, selected randomly.

Exclusion criteria were altered neurologic status, previous psychiatric disease. We used mini GDS

composed of 4 questiins to assess the risk of depression and KATS score to evaluate dependant

RESULTS

Overall, 140 patients participate with sex ratio of 0,78. The age distribution was as follow: a slightly

higher than a half (51%) were between 65 and 74, 35% between 75 and 84 and 14% older than 84.

Around one fifth (21%) had KATS score under or equal to 3 and they were considered totally

dependant, 36% showed a score equal or over 6 so we considered them independent while the

majority (43%) showed a moderate dependence features with a KATS score between 3,5 and 5,5

44 patients were considered unlikely to have depression symptoms , 56% of them totally

independent. Comparatively, the 96 patients left had higher risk of depression and they were

distributed as follow: around one fifth were independent, almost a half have mild dependence

symptoms while 28 % with higher risk of dependence

CONCLUSION

Mental health issues in seniors should not be considered as a part of normal ageing . A correlation

between physical and mental disease exists which makes it crucial for health care givers to assess the

risk of depression among elderly experiencing symptoms of dependence