

# Help & Hope for Depression

## What Are The Facts?

Seniors Share Their Experiences



*“I wanted to sleep a lot, stay in bed away from everybody. Now I get out every day, even if it’s just for a short walk.”*

## Recognizing Depression In Seniors

For people aged 65 and over depression is both common and very disturbing.

Depression affects one in ten people over the course of a lifetime. Yet symptoms can be resolved with the right diagnosis and treatment. The success rate for treating depression in seniors is quite high.

- Depression in seniors may not be noticed as they often talk about physical health rather than mood.
- Seniors may make the mistake of accepting the signs of depression as a natural part of aging.
- Depression may be overlooked as it can be masked by physical signs such as - chronic aches and pains, headaches, joint pains, stomach problems, memory loss, irritability, forgetfulness, and trouble concentrating.
- Depression can be confused with other illness such as Alzheimer disease, thyroid problems, diabetes, heart failure and even lung problems.

In this pamphlet four seniors share their experiences with depression and how they found help and hope.

## What Is It?

Depression is a chemical imbalance in the brain. It can be treated successfully! Its causes are not entirely understood.

## How Does It Feel?

- Depression affects the whole body.
- Simple things like getting out of bed in the morning, cooking a simple meal or planning a walk can be too large to handle.
- It continues longer than does grief and sorrow following a loss or change in life, such as a death in the family or a move to a new place. If “the blues” continues indefinitely, then a clinical depression may be present.
- Many people think they can “snap out of it”, that they are too old to get help, that it’s their fault, or that it’s a sign of weakness. Not true.

## How Does It Start?

Symptoms can start with sudden changes in life such as: loss of a spouse, changes in health, home, job or meaningful activities, friends or family members. It can delay recovery from a stroke or surgery.

At the same time, loss of sight, hearing or being less able to get around can affect social networks - an important part of wellness. People may self-medicate with alcohol and/or drugs to lessen feelings of loneliness and despair, which in turn can make depression worse.



## Roger, 70 *(with Twink, his dog)*

“Anyone going through depression is aware that it is very physical as well as mental. You have no energy, no incentive, no motivation. What would make you feel better would be to communicate with other people, but you have no desire to do so.”

“Before I retired, I was very involved in the arts - first as a dancer, then in the theatre and later as a makeup artist in the film and television industry. I was a very good makeup artist.”

“When I was working, I could hide my symptoms of depression, but when I retired there was a large void in my life and it was hard to get over that.”

“Medication has helped control the symptoms for me. I’m not a games person - I don’t like playing bingo - but I have a little garden and I live near the beach. I take Twink out for walks.”

***“I lost weight;  
I was down to 108 pounds.  
Now I enjoy my meals again.”***

# Life will get better

With recognition,  
acceptance and  
proper treatment  
individuals can return  
to a happier and  
more fulfilling life.

***“I dwelled on the negative,  
meals didn’t agree with me.  
I had a sense of hopelessness; there  
was nothing to look forward to.  
Now I enjoy painting again  
and I am learning to work  
on the computer.”***



## Marion, 92

“Day to day I began to get a closed-in feeling. I didn’t want to mix with people. I didn’t care about anything. This feeling crept up on me. I was imagining things – that the woman in the next apartment had a gun and was making an enemy of me. It was all happening through the walls of my apartment.”

“I kept to myself. I had no friends and nothing to do except visit my husband once a week in the hospital. No one noticed I was withdrawing and it seemed quite natural.”

“After I got help from my doctor, I began to feel much better. I joined a social group where I could mix with other people; I got out more.”

“My advice to anyone feeling low is to get out as much as possible: take a walk, talk to whomever you can, but keep it positive. Keep your eyes open, stand on your own two feet. Do an exercise class.”

“What’s past is past – take up your new life!”

***“My body wouldn’t let me do the things I want to do - now I walk. I’ve even joined an exercise class.”***

## Finding Help: Steps to Recovery

### Family doctor

The first step – visit your family doctor. Ask for a check-up to see if there are any other physical problems.

### Support of family and friends

Support from family and friends, a willingness to listen without being critical or suggesting the depressed person “snap out of it,” helps speed recovery.

### Medications

Many medications for depression are available today and new ones are being found. The key is to find the right one for you. The success rate with antidepressant medication is good.

### Counselling and education

Counselling gives support during treatment and the recovery period. More knowledge about the illness helps you to know what is happening if symptoms return.

### Self-help groups

In these groups people give each other good support. They share their stories with depression as well as what things work for them.

### Leisure activities

Be active. Get involved. Physical exercise, such as a daily walk, social times with other people and having hobbies and activities are important steps in recovery.



## Mary, 80

“I had cancer. Then the same year I had two heart attacks. My doctor said it was too much for my brain to handle. The depression began in the morning – I had this terrible anxiety in my stomach; I didn’t want to live when you feel like that – you can’t see the future.”

“Now I am on medication. I go to two exercise classes a week. I help coordinate the weddings at our church. I go to the theatre and concerts. Now when I get panicky or anxious I at least take a walk around the block.”

“You have to keep yourself busy – but there’s a fine line, you can get doing too much! You have to eat properly and keep regular hours. Get the right amount of sleep.”

“I also try and help someone else. With my social group, we knit squares and make blankets for a children’s charity. I’d like to read to someone. This is a difficult age; no one needs you any more. After having children and a husband who need you, you feel inadequate.”

“I do find some people are not very understanding. They don’t know what you are going through. Fortunately my family is very sympathetic and my girls do understand.”

## Do Any of These Signs Apply to You?

- loss of interest and pleasure in most activities
- not sleeping well – waking often or too early or finding it hard to go to sleep or sleeping too much
- loss of weight or putting on weight
- constipation
- small appetite
- hard to concentrate
- low energy
- uneasy and restless feelings
- impatience with family members and others who are trying to help
- too slow or too fast thoughts
- unhappy thoughts
- mood changes during the day – worse in the morning and improving as the day goes on
- guilty feelings
- feeling that bad things will happen, having fear, worrying
- very low moods, crying, no hope
- thoughts of death to end pain or wanting to end your life
- maybe seeing or hearing things that others do not

If you or a family member experiences a number of these signs for more than a two week period, see your doctor.



## Susan, 65

“I was diagnosed with Crohn’s disease and it was difficult to take cortisone – it affected my mood. I also have trouble absorbing food, which affects my depression. I was also stressed out about money. All I could do was cry. I was also lonely and loneliness to me is a big part of it.”

“When I was sick my daughter came to see me with a friend whom I hardly knew, but she had a family member with depression and understood what I was going through.”

“My medication helps and I see counselors every week. Last Saturday my family invited me to spend the afternoon at Ikea and to join them the next day for brunch.”

“I go bowling and I’m planning to be a volunteer grandmother.”

***“I wasn’t interested in the outside world, I would dwell on myself. Now I look forward to seeing my grandchild.”***

## Help Is Available

Don’t delay if you think you or a family member suffers from depression. Seek help immediately.

You are not alone: help is there and depression is very treatable.

- \* Your first call should be to your family physician to see if there are any other health problems.
- \* There are also other resources in your community, such as specialized mental health services for seniors. In Vancouver, these services are available through the Cambie Older Adult Mental Health and Substance Use Team. In other areas, contact the mental health centers in your region for information and help.

***“Successful treatment of depression in people aged 65 and over occurs in the vast majority of situations and means people can return to enjoying their lives!”***

Dr. Elisabeth Drance MD FRCP(C)  
Geriatric Psychiatrist



## ***Vision:***

***We are committed to supporting healthy lives in healthy communities with our partners through care, education and research.***

For more information please call the Cambie Older Adult Mental Health and Substance Use Team Central Intake line

**604-709-6785**

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