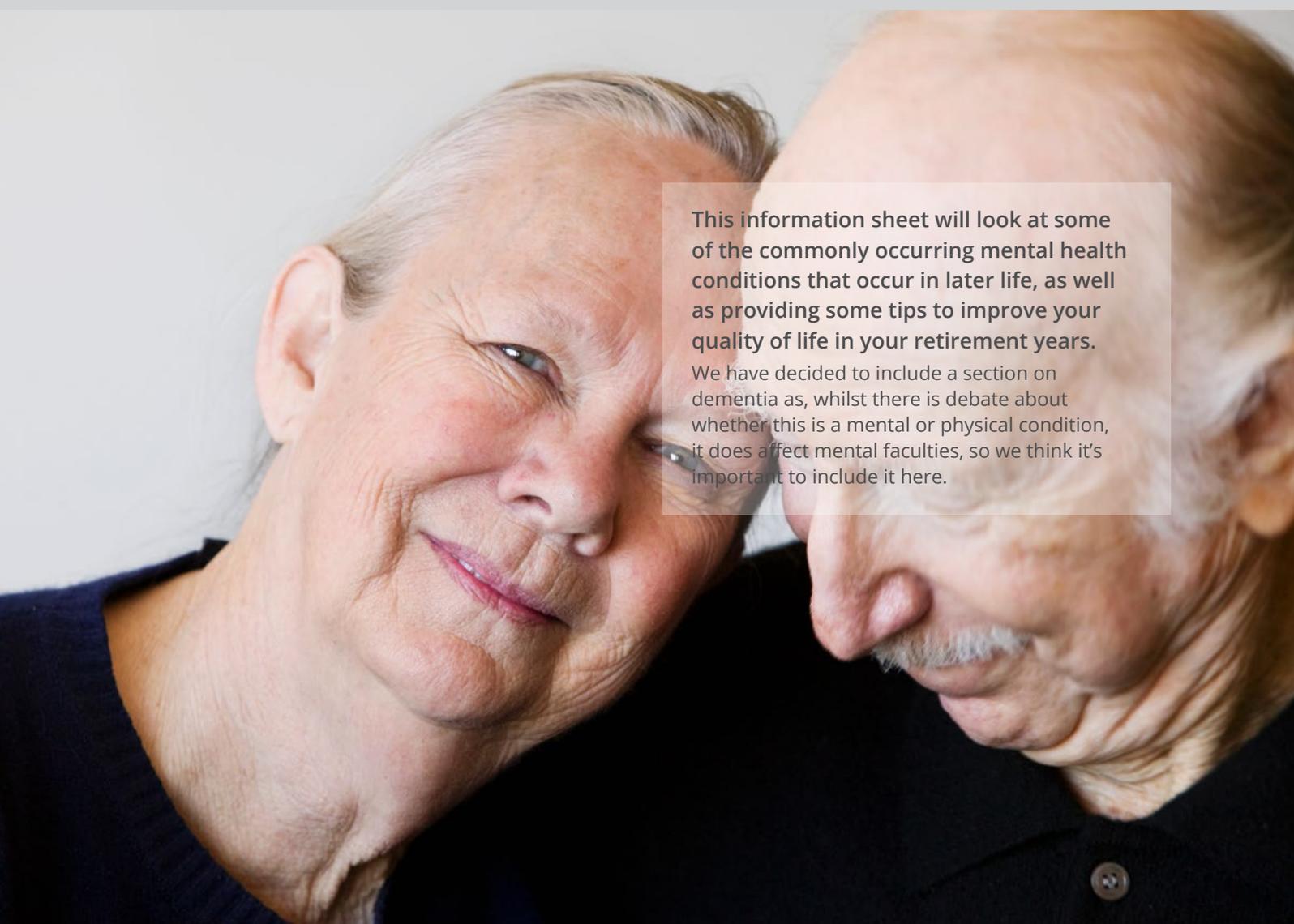




Later life mental health and dementia



This information sheet will look at some of the commonly occurring mental health conditions that occur in later life, as well as providing some tips to improve your quality of life in your retirement years.

We have decided to include a section on dementia as, whilst there is debate about whether this is a mental or physical condition, it does affect mental faculties, so we think it's important to include it here.

We accept that the terms 'older adults' and 'later life' are often subjective. For the purpose of this brochure, we'll be using these terms to represent those aged fifty years or older. In cases where studies represent older age groups we will make sure this is made clear. (We also acknowledge that many people do not feel that fifty years old represents later life and most people at this age are continuing to live normal working lives.)

With populations around the globe having longer life expectancies there is an increased focus on the health of older adults, including their mental health. Poorer mental health is often mistakenly thought to be par for the course when people get older; however, this is not the case. Many older adults live their lives free from mental health problems. In fact, Australian researchers found that most mental health problems have occurred prior to 30 years of age and later diseases are often secondary to an existing disorder. Japanese researchers have

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built on this, finding that having a severe mental health problem makes you more susceptible to further disorders. Older adults are however more vulnerable to mental health problems and suffer them more chronically than other age groups. They are also more likely to suffer from psychological distress that does not reach diagnosable levels. Having the belief that mental health issues are expected in

older age unfortunately prevents people from seeking professional help and causes an under-reporting of symptoms. Unreported mental health problems can also go on to perpetuate further mental health issues and can even lead to the worsening of physical symptoms. This is unfortunate as many mental health conditions can be managed and treated, leading to an improved quality of life.

Why do older adults develop mental health problems?

There are a number of changes that occur in older adults and in later life that can impact the mental wellbeing of a person. Whilst in some countries, like the UK, there is no longer an official retirement age, many people will take retirement at some point. Retirement is a drastic change to a person's life and whilst there are many positives, it's important to remember that it brings a lot of changes that can impact a person's mental health.

Retirement often means a reduction in finances, potentially a reduction in social contact and a loss of structure. All of these aspects can put an older person at risk of mental health problems. Physical health changes and a subsequent loss of independence can also put older adults at risk of mental health problems, especially depression, which is discussed in more detail below.

Discrimination and cultural perceptions of older adults can also impact mental wellbeing. A feeling of not being required, or not being needed, has been associated with poor mental health. This has been seen in China where previous generations had a culture of revering older generations and relying on them for advice. Newer generations do not subscribe to this same cultural approach, and as such, an increase in older adult mental health issues has been seen. More direct age discrimination is also a great cause of poor mental health. Luckily many countries have laws to protect older adults from this discrimination, especially in the workplace; for instance the UK has the Quality Act 2010.

Mental Health problems commonly seen in older adults

Approximately one fifth of adults over the age of 55 in the USA is thought to experience some type of mental health condition; with common disorders being anxiety and mood disorders such as depression. The estimates are slightly higher in the UK, with one 2009/10 study finding that 25% of males and 35% of females accessing secondary NHS services were over the age of 65. In New Zealand, this statistic appears to level off, with those over the age of 75 having the lowest diagnosis rates of common disorders such as anxiety and depression compared to any other age group. Unfortunately, this is not simply a Western cultural problem. Chinese studies have shown that mental health problems such as depression, suicide and dementia are the sixth largest disease burden affecting the country; resulting in measurements equalling approximately 5.3 million lost healthy years nationwide per year. These statistics are not predicted to improve anytime soon.

In fact, Canadian researchers are estimating that by the year 2041, rates of mental health (including dementia) in those aged 70-89 will exceed rates seen in all other age groups; highlighting a need to discuss mental health in older adults in more detail.





Below we discuss the prevalence of three commonly seen mental health problems seen in older adults.

Depression

Depression is a low mood that lasts for an extended period of time such as weeks or months. Symptoms of depression may include increased fatigue, loss of interest and episodes of tearfulness. Depression can inhibit day-to-day living and can cause people to consider suicide. Unfortunately, when dementia and depression appear together in a person they can be difficult to distinguish from each other due to some overlapping symptoms. This is especially problematic for older adults as they are most susceptible to dementia, and as such, depression is more likely to go undiagnosed. Unfortunately, along with the symptoms of depression itself, a diagnosis of depression has been shown to adversely affect other aspects of a person's general health, and can complicate other chronic conditions. In the USA, older adults with depression are more likely to visit the doctor, visit the emergency room, or use medication, than other age groups.

Depression is suspected to be the most prevalent mental health problem amongst older adults in the USA and, whilst not a normal part of the ageing process, symptoms do tend to increase as age advances. When looking at those over the age of 50, the Centre for Disease Control in the USA has found that 7.7% of people reported depression and 15.7% reported lifetime depression. This was more prevalent in women than in men, with 8.9% of older women reporting depressive symptoms, compared to 6.2% of older men. This gender disparity is also seen in the UK, where 22% of men and 28% of women over the age of 65 are thought to be suffering. In China in 2012, there is a large range for the estimate of depression in those over the age of 60 - anywhere from 11% to 57% of people are thought to be suffering. This highlights the problems with disclosure of mental health symptoms and under-reported instances.

Australian researchers have found that 52% of older adults in permanent care in 2012 had symptoms of depression, ranging from mild to severe. The prevalence is higher among hospitalised older adults than in the general population of older adults. This highlights the need to study sub-sets of older adults. This appears to be a global issue as Canadian researchers found the startling statistic that 80-90% of seniors in long term care facilities are thought to be depressed. This problem is also seen in the UK, although admittedly not at such a high rate. The Royal College of Psychiatrists has put estimates of depression in older adults in care at approximately 40%. These figures show that more efforts need to be made in improving the quality of care being given to older adults in longer term facilities. However, it may also be argued that those who are in care facilities may be less physically able and will have lost their independence - both big risk factors for mental health problems. As such, it would be unfair to lay all the blame on the care facilities themselves. It would also not be advisable to use these statistics as a justification for not using care home facilities when required.

As with most mental health conditions, older adults are known to not seek treatment for depression, in part because they may believe that it is part of the ageing process. This has led to vast amounts of sufferers going untreated. This is particularly alarming given that research suggests at least 80% of cases are treatable.

In China, research estimates suggest that less than 10% of sufferers are receiving the treatment they require. Whilst in the UK, it is thought that 85% of older adults with depression receive no treatment. Hopefully, with campaigns highlighting that this is not part of the ageing process, older adults will start to seek treatment for their depressive symptoms, leading to an improved quality of life.

Anxiety

Anxiety is a term that refers to a number of different disorders that focus around intense worrying, fear and nervousness. Whilst you can break anxiety down into its composite disorders, for the purpose of this leaflet we will keep the disorders grouped under the term anxiety.

Anxiety is one of the most prevalent disorders in older adults in the USA and is almost as prevalent as depression. In fact, anxiety often appears alongside depression with half of those suffering from depression also suffering from anxiety. It is believed that anxiety is as common in older adults as it is in younger adults, which is the age group most likely to be impacted by anxiety. In fact, anxiety may even be under reported in older adults, with one study suggesting up to 10% of older adults have had a lifetime diagnosis of anxiety. In Australia, this number is slightly increased, with estimates suggesting 10-15% of older adults living in the community are suffering from anxiety or depression. In New Zealand in 2011/12, 20-25% of males aged 65-74 were diagnosed with mood disorders or anxiety disorders, compared to 10-15% of females. This implies not only a great percentage of the age group is suffering, it also shows a slightly higher prevalence in males. This trend continued into the over 75 years of age bracket, with males having a diagnosis rate of 15-20% compared to 5-10% of females. Whilst these numbers do show that anxiety is an issue, many studies often group anxiety and depression together, so statistics for just anxiety are harder to come by.

Suicide

When we talk about suicide we are talking about both the action of taking one's own life, and also thinking about taking one's own life (known as suicide ideation). If you are reading this and are considering suicide, or believe you know of somebody who is at risk, then it is important to seek medical help immediately. More information about suicide, as well as some contact numbers can be found on our website www.shawmind.org

Whilst suicidal thoughts do not always lead to suicidal behaviours, they are still a troubling symptom. Older adults are not immune to suicidal ideations, in fact in Canada it is thought that 2% of older adults per year have suicidal thoughts. In China, the situation appears to be substantially worse, with 13-17% of older adults aged 60 or over thought to have had suicidal ideations in 2012/13. It is likely that these numbers are under reported due to cultural opinions relating to suicide, and the belief that these thoughts are part of the ageing process; which they are not.

Suicide in older adults is a consistent problem that, unfortunately, appears to be on the rise in some locations. In fact, in China, it has been found that as people age, their risk of suicide increases, with those most at risk being over 80 years of age. In 2013/14, it was found that suicidal behaviours in those over the age of 60 were on the increase in New Zealand. In Australia, the highest age specific suicide rate was seen in males over the age of 85 for eight out of the ten years leading up to 2012; reaching 38 males over the age of 85 per 100,000 committing suicide in 2012. Most of those who succumb to suicide in Australia have been found to have another diagnosable illness at the time of suicide. The pattern of older males being more likely to be affected by suicide is also seen in North America. Canadian studies have found that men over the age of 80 years old have the highest rate of suicide in the country, 31 out of 100,000. This number increases in the USA where older males have the highest suicide rate; with those over age 85 having a suicide rate of 45.23 per 100,000 compared to 11.01 per 100,000 seen when all age groups are combined.



Dementia

Dementia is a term used to define a group of conditions that result in a progressive decline in mental ability. Whilst symptoms can vary greatly, dementia affects at least two of the following core functions; memory, communication and language, reasoning, problem-solving, concentration and perception. There are many types of dementia, with the most common disorder being Alzheimer's disease.

Alzheimer's disease is thought to make up 62% of all dementia cases in the UK and it is the 6th leading cause of death in the USA. Whilst anybody can be affected by dementia, older adults are especially susceptible to Alzheimer's disease, with 95% of cases thought to have an onset after the age of 65. Japanese researchers have gone further and suggested that the risk of Alzheimer's disease doubles every five years once somebody has reached the age of 65. The idea that risk increases with age is confirmed by Canadian findings which show that after the age of 65, Alzheimer's disease affects 1 in 13 people. But after the age of 85, this drastically increases to a rate of 1 in 3. Whilst there is no cure for a progressive dementia like Alzheimer's disease, there are both drug and non-drug treatments that can help to manage the symptoms and to provide temporary improvements in some symptoms. Therefore, early reporting of memory loss and other symptoms is key in managing dementia.

Dementia worldwide is a substantial problem. Estimates suggest that 44 million people are currently suffering with dementia. Alarmingly this number is expected to double within the next 15 years. Whilst dementia can affect those in any age group, it is substantially more likely to affect those over 65 years old. In the UK, dementia ranks as one of the main causes of disability in later life, ahead of some cancers.

Findings from Australia suggest that dementia risk increases with age, which is unsurprising considering the Alzheimer's research from Japan mentioned earlier. 10% of Australians over the age of 65 are thought to suffer with dementia, with this number increasing to 30% for those over the age of 85. These numbers greatly increased when looking at permanent care facilities where dementia is thought to affect more than half of residents. Whilst we may be quick to assume that care homes need to be rethought because of this statistic, we must remember that people may be in the care home due to dementia. Dementia is not simply a Western problem; Chinese research shows that over 4.4% of Chinese residents over the age of 65 are affected by dementia. Unfortunately, all of these estimates are likely to be unrepresentative as estimates suggest that 27 million instances of dementia globally go undiagnosed.

Many people are unaware that dementia is a disorder that often results in death. As such, managing symptoms as soon as possible is key. In the UK and USA, 1 in 3 people over the age of 65 are thought to die with a form of dementia, and dementia is the leading cause of death in females in the UK, over the age of 65. The problem is greater in Australia, where dementia is the leading cause of death in older adults.



How to stay mentally healthy

There are many things that a person can attempt to do to stay mentally healthy. In some cases there will be the need for treatments and medications in order to stay healthy. Below are some ideas for older adults to keep mentally healthy before they require medication or treatment.

Plan ahead for changes

Retirement involves a great deal of change. A person's finances, social interactions and general life schedule are likely to change. It is important to plan ahead for retirement so older adults can transition into this new life with ease. Putting money aside in a retirement fund will help the financial transition from a full time job to a pension which can otherwise be a very stressful time. Planning how to keep in contact with work friends after leaving a job will also ensure a reduced risk of social isolation in retirement.

Avoid social isolation

Relating to the above point, older adults will want to avoid social isolation. Not all people will want to remain in contact with work colleagues, but there are a number of options to maintain alternative social relationships. There are often a number of social groups aimed at the retired and older adults that encompass all sorts of interests and hobbies. Other groups hold coffee mornings where people can meet others of the same age. Many people are often reluctant to join these types of groups but it is important to avoid social isolation which is a big risk factor for poor mental health.

Find new hobbies

Finding new hobbies and pursuing old hobbies is a great way to fill time in retirement. This can also relate to avoiding isolation as many hobbies can lead to groups of people with shared interests. A new hobby not only provides a person with something entertaining to pass the time, it also helps them find a new identity after work life, and can provide a sense of purpose and accomplishment.

Keep an active mind and body

As with all age groups, it is important for older adults to remain physically active. Obviously, as people grow older they may have more physical limitations and may need more assistance, but for the most part, there will still be some physical activity that they can do. For those that are physically able, then clubs and sports aimed at older adults are ideal, e.g. swimming and aerobics. For those that are less able, going for a short walk to the local shop and back may be the limit of what can be achieved, but this is still a great accomplishment. Not only does it provide the physical exercise the body needs, it also provides a sense of accomplishment. If people are less able to walk to the local shop then there are short exercises that can be completed in the home that help to keep a person healthy. Local health care providers are likely to have specific exercises available on request and may be able to provide staff to assist.

It is important to remember to keep the mind active to help avoid cognitive degeneration. There are a number of ways a person can keep their mind active and they do not have to be highly academic tasks. Older adults may keep their minds active by reading books or by completing the puzzle page in the daily newspaper.

Make time for yourself

Whilst this may stand in contrast to the majority of our other tips that propose socialising, this tip is vital. It is important for older adults to remember to take time for themselves to clear thoughts and to relax and recover. We are not suggesting extended periods of isolation but we do suggest that people take time out for themselves, even if it is just an hour in a day. Retirement can be a busy time, with new hobbies and friendships being made, as well as helping out in new family roles. But it is important to remember that older adults will need their own time and it is okay to say no when family members have made plans for them.

Diet and Sleep

Diet and sleep patterns have long been proven to impact mental health and this is no different for older adults. Ensuring a healthy intake of fruit and vegetables, as well as limiting smoking and excessive drinking are all key in maintaining positive mental health. A healthy sleep routine is also vital. This includes a regular time for going to sleep and waking up, as well as limiting stimulants such as coffee and access to computer screens, prior to going to bed.

Talk about concerns

As we have previously mentioned in this leaflet, older adults are thought to under report their instances of mental health problems. This is in part due to a reluctance to talk about problems. Therefore one key tip to staying healthy is to talk about any concerns you may have. These concerns may not be directly health related, they may be about anything in life, but not talking about them may cause a build-up of stress which can lead to poor mental health. If these concerns are medical then you may be best suited talking to a healthcare professional. But don't forget, simply talking to another family member about your concerns in life can go a long way in preserving your mental health.

This leaflet has given you a brief outline of some of the key areas of mental health in older adults. You can get lots more information on all aspects of mental health at our website: www.shawmind.org



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