

# **Depression**

# What You Need to Know and Helpful Resources

#### Overview

Major Depressive Disorder, also known as 'clinical depression,' is defined as experiencing five or more of the following symptoms, one of which must be either depressed mood or loss of interest/pleasure in everyday activities, most days and most of the day for at least two weeks.

#### The symptoms are:

- depressed mood most of the day; feeling sad, hopeless or empty
- loss of interest or pleasure in almost all activities
- significant changes in appetite or unplanned weight changes
- disturbed sleeping (too little or too much)
- psychomotor changes such as noticeable changes in mental and physical activity levels, either agitation and restlessness, or a slowing down
- fatigue or loss of energy
- feelings of guilt or worthlessness, or a loss of self-confidence
- difficulty concentrating, remembering, or making decisions
- frequent thoughts of death or suicide

Other signs and symptoms are also frequently seen, such as feelings of anxiety, irritability, or physical symptoms such as unexplained aches and pains, headaches, cramps, or digestive problems.

This condition significantly impacts an individual's daily life, work, and relationships.

Be aware that signs and symptoms of depression vary from person to person.

Depression in older adults may be hard to detect. Common symptoms such as fatigue, appetite loss, and trouble sleeping can be part of the aging process or a physical illness. As a result, symptoms of early depression may be ignored, or confused with other conditions that are common in older adults.

#### Causes

While the exact cause of major depressive disorder is not known, it is not a result of personal weakness. There are a variety of factors that may play a role, including:

- brain chemistry;
- brain structure and function;
- genetics;
- psychological and social factors (such as a traumatic event or a stressful life event);
- substances (such as drugs or alcohol); and
- certain medical conditions or medications.

There are a wide range of mental disorders, medical conditions, or drugs – both prescription and recreational – that can also cause depressive symptoms, so it is important to have a comprehensive assessment to rule out potential causes.

#### **Risk Factors for Older Adults**

In older adults, life changes can increase the risk for depression or make existing depression worse. Some of these changes include:

- retirement
- children moving away
- persistent sleep difficulties
- spouse or close friends passing away
- social isolation
- significant physical concerns or recent onset of anxiety
- loss of hearing or vision
- complaints of memory issues
- serious neurological illnesses, like dementia, Parkinson disease or stroke
- recurrent or prolonged hospitalization
- mobility issues
- loss of independence (for example, problems getting around or caring for oneself or loss of driving privileges), or
- a move from home, such as to a retirement or long-term care home

#### **Assessment**

A comprehensive assessment means that your care team will want to learn more about you to understand how best to help you. It should include questions about your mental and physical health, your medical history, what medications you're taking, how you spend your time, and how you're feeling. It might include filling out a standardized questionnaire about your symptoms.

There's no specific lab test that can diagnose depression; but your provider may order blood tests to find out if another health condition, such as anemia or thyroid disease, may be causing your depressive symptoms.

Information from the family and relevant third parties may be obtained when appropriate.

#### **Treatment**

There are good, evidence-based treatments for depression. You should be offered a choice of psychotherapy or antidepressant drugs. If your depression doesn't get better, you should be offered a combination of the two treatments. Because there are many effective treatments, most people will eventually get better, and it is important to remain hopeful and work with your doctor to find the right treatment for you.

In addition to medication and psychotherapy, there other self-help techniques that might improve your depression, such as behavioural activation, sleep hygiene, physical activity/exercise, yoga, nutrition, or light therapy. In fact, studies have shown that exercise alone may effectively treat depression.

# **Psychotherapy**

Evidence-based psychotherapies that may be appropriate include cognitive behavioural therapy (CBT), which can be delivered as an individual or group, over the internet or in-person. There are also other types of psychotherapies that may be offered, including problem-solving therapy or interpersonal therapy (IPT).

# Medications

Commonly recommended antidepressants include medications in the SSRI class, such as sertraline (Zoloft) or escitalopram (Cipralex) or SNRIs, such as duloxetine (Cymbalta). There are many more classes and medication options, and the choice will be based on your other health conditions, potential drug interactions, side effect profiles, and individual factors.

If you start on a new antidepressant, your healthcare professional should closely monitor the therapeutic effects or side effects of the medication. If your dosage is adjusted or your medications switched, and you're still not feeling better, another therapy should be tried.

To avoid the risk of your depression coming back, when you're feeling better, you should keep taking your antidepressant medication for several months; and if you have had multiple episodes or chronic or severe symptoms, you may need longer treatment. Your health care professional will work with you to develop this timeline. You should receive care if you start feeling worse again after treatment.

#### **Brain Stimulation Treatments**

Brain stimulation therapy is also known as 'neurostimulation' or 'neuromodulation'. The two main types are electroconvulsive therapy (ECT) and repetitive transcranial magnetic stimulation (rTMS), and both use electrical impulses to stimulate the brain. ECT is considered one of the most effective treatments for severe depression, and rTMS is typically reserved for major depression in those who do not respond to at least one antidepressant medication.

# Prevention

Higher levels of physical activity are associated with lower odds of developing depression. Self-help books (typically based on CBT principles) and some types of techniques, such as mindfulness-based stress reduction, may help to reduce the risk of developing a major depression in people who are having some of the symptoms of depression. Reducing social isolation and/or loneliness has been shown to reduce depressive symptoms.

#### Resources

#### Information

Canadian Coalition for Seniors' Mental Health (CCSMH). ccsmh.ca

Health Quality Ontario Quality Standard on Major Depression. Patient Reference Guide and Other Resources. <a href="https://doi.org/10.228/10.2081/nc.228/">https://doi.org/10.2081/nc.228/</a>

CANMAT and MDAO. The CHOICE-D Patient and Family Guide to Depression Treatment. 2019. <a href="mailto:canmat.org">canmat.org</a>

Mental Health Commission of Canada. Resources. mentalhealthcommission.ca

# **Community resources**

2-1-1 connects people with the appropriate information and services to enhance Canada's social infrastructure and enable people to fully engage in their communities. Visit 211.ca or call 2-1-1.

*YMCA* programs are offered at more than 1,700 locations across Canada and help more than 2.25 million people annually become healthier in spirit, mind, and body. Find your local Y at <a href="ymca.ca">ymca.ca</a>.

The Government of Canada, mental health support website offers information on resources, supports and services, including those available in each province or territory. Visit <u>Get Help Here: Mental health support - Canada.ca</u>.

9-8-8 Suicide Crisis Helpline. Available 24/7. Call or Text 9-8-8 or visit 988.ca.

# **Psychotherapy**

Ontario Structured Psychotherapy Program. Free CBT and related services for Ontario residents, including self-led resources guided by a coach or therapist (e.g., BounceBack®) and therapist-led CBT. ontariohealth.ca

BounceBack® is a free skill-building program from the Canadian Mental Health Association (CMHA). <u>bounceback.cmha.ca</u>

MindBeacon offers Canadians a full spectrum of digital mental health supports, from face-to-face live therapy, therapist-guided programs, messaging counselling, and free content. In many cases, MindBeacon services are covered by private insurance providers. mindbeacon.com

TELUS Health CBT (formerly AbilitiCBT for individuals) is an internet-based cognitive behavioural therapy program that you can access from any device, any time. Like with MindBeacon, you pay for the program upfront and can get reimbursed through your benefits or insurance plan under your paramedical coverage or through your Health Care Spending Account if they cover it. TELUS Health CBT Program

#### Meditation

The *Headspace app* provides mindfulness tools for everyday life, including meditations, sleepcasts, mindful movement and focus exercises. headspace.com (paid subscription)

Calm is quite like Headspace, with a paid subscription to the app providing tools and content related to mindfulness, stress reduction techniques, and sleep. calm.com

The Healthy Minds Program app is free app was developed by a non-profit affiliated with the University of Wisconsin-Madison. It includes meditations, podcast-style lessons, and other features. <a href="https://example.com/html/>

## Self-help books

Dennis Greenberger and Christine A. Padesky. *Mind over Mood*. Second edition, 2015.

David D. Burns. The Feeling Good Handbook. 2<sup>nd</sup> revised edition. 1999.

## **McMaster Optimal Aging Portal-related**

Psychological and mental health topic landing page. mcmasteroptimalaging.org

Video posts of relevance, including an overview of mental health apps and webinars on managing anxiety with CBT and exercise as medicine.

mcmasteroptimalaging.org/watch

E-Learning lessons of relevance, including a lesson on social isolation. mcmasteroptimalaging.org/e-learning

#### References

American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR). March 2022.

Canadian Coalition for Seniors' Mental Health (CCSMH). Canadian Guidelines on Prevention, Assessment and Treatment of Depression Among Older Adults. 2021 Guideline Update.

Health Quality Ontario. Quality Standard. Major Depression: Care for Adults and Adolescents. 2016.

Jonsson U, Bertilsson G, Allard P, Gyllensvärd H, Söderlund A, Tham A, et al. (2016) Psychological Treatment of Depression in People Aged 65 Years and Over: A Systematic Review of Efficacy, Safety, and Cost-Effectiveness. PLoS ONE 11(8).

Kennedy S et al. Canadian Network for Mood and Anxiety Treatments (CANMAT) 2016 clinical guidelines for the management of adults with major depressive disorder. Canadian Journal of Psychiatry, 2016.

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