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DEPRESSION AMONG GERIATRICS:PREVALENCE AND ASSOCIATED FACTORS

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ABSTRACT

Method: 182 participants aged over 60 from an urban area, Ashapur, Raichur were interviewed to assess their psychiatric morbidity and associated factors using geriatric depression scale.

Objective: To establish prevalence of depression and associated factors in geriatrics in Ashapur urban area, Raichur Dist, Karnataka., India. **Type of study:** Cross sectional. **Methodology:** The cross sectional epidemiological study was conducted in urban slums of Ashapur, Raichur Dist. The study area has a population of 25486 with a geriatric population of 2536. A sample size of 182 was estimated using Random Sampling Technique. **Study group:** 182 **Study area:** Ashapur urban area, Raichur Dist, Karnataka. **Study period:** July17 to October 17 . **Study tool:** Pretested Questionnaire.

Analysis: Descriptive statistics and other appropriate statistical studies will be used.

Results: This study revealed that 32.4% of individuals were suffering from depression. We conclude that depression in elderly is associated with poor socio economic status, unemployment, disrupted marital status, illiteracy, and substance abuse. **Conclusion:** By the end of the study we concluded that prevalence of depression in geriatrics is significantly high. It is mainly associated with substance abuse, unemployment, disrupted mental status, illiteracy and poor economic status.

Keywords: geriatrics, associated factors, depression.

INTRODUCTION

Aging is a universal phenomenon. India is the second largest country in the world, with 72 million elderly persons above 60 years of age as of 2001. From 1990 to 2025, the elderly population in Asia will rise from 50 per cent of the world's elderly to 58 per cent, in Africa and Latin America from 5 to 7 percent, but in Europe the figure will drop from 19 to 12 per cent of the world's elderly. According to projections, the elderly in the age group 60 and above is expected to increase from 72 million in 2001 to 179 million in 2031, and further to 301million in 2051. The life span has increased in India from 32

years in 1947 to more than 62 years now. In India, the 60 plus population in 1951 was just 5.43% that had gone up to more than 7.7% in 2001.

Of all the diseases the senior citizens meet, depression is the most hideous. Depression in elderly people often goes untreated because many people think that depression is a normal part of aging and a natural reaction to chronic illness, loss and social transition. It remains highly prevalent in the elderly population, and certain vulnerable populations of older adults are at special risk. Further, the morbidity of late-life depression on physical health, social support

systems, and overall functioning is considerable, making depression a leading cause of disability in elderly adults and a risk factor for mortality and suicide as well.

Depression is associated with morbidity as well as disability among the elderly. They constitute a major public health problem worldwide and their prevalence rates range between 10 and 55%. The long-term prognosis of geriatric depression is bleak with incomplete recovery and higher relapse rates. Along with the physiological and psychological changes associated with aging, changes in the associated risk factors also modify the prevalence and prognosis of geriatric depression. Medical co-morbidity and cognitive impairment have a complex bidirectional relationship with geriatric depression.

Available Indian study employing the Geriatric Depression Scale (GDS), a screening tool, in a small sample of elderly has reported prevalence of up to 45.9% (Jain and Aras⁵, in 2007). Another larger Indian study evaluating the Hindi version of the GDS studied only the depressive symptoms and not the depressive disorders, Ganguli² ET al(1999)...There is dearth of community studies from India investigating geriatric depression and its associated factors. This study aim to establish the prevalence and factors associated with geriatric depression in an urban study area in India.

METHODOLOGY

The cross sectional epidemiological study was conducted in urban slums of Ashapur, Raichur Dist. The study area has a population of 25486 with a geriatric population of 2536. A sample size of 182 was estimated using Random Sampling Technique. Individuals above 60 years of age not residing in the study area, residing in old age homes and critically ill were excluded. The questionnaire was based on semi structured Performa. Geriatric Depression scale was used for the assessment of depression. The data was

collected by home visit, analyzed by computer of statistics Epi info 2000 and SPSS (version17).

RESULTS

This study revealed that 32.4% of individuals were suffering from depression. The median GDS score calculated was 5. Mean age was 68.07+/-12.98. Depression in elderly is associated with poor socio economic status, unemployment, disrupted marital status, illiteracy, and substance abuse. (Table 1)

DISCUSSION

Our study showed no significant relationship between age and prevalence of depression similar to Hussaini¹. Illiteracy leads to unproductive life and cause greater difficulty in getting jobs, leading to depression, which was well depicted in our study similar to the study done earlier. Elderly suffering from acute/chronic illnesses showed higher prevalence of depression i.e. 61.5% similar to Hughes et al⁴. Foley DJ³ et al found depressed mood associated with insomnia same as shown in our study. Thus we can conclude that depression in elderly is associated with poor socio economic status, unemployment, disrupted marital status, illiteracy, and substance abuse.

CONCLUSION

By the end of the study we concluded that prevalence of depression in geriatrics is significantly high. It's mainly associated with substance abuse, unemployment, disrupted mental status, illiteracy and poor economic status.

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Table 1: Depression in relation to demographic and bio- social characteristics of the respondents (n=182)

Characteristics of respondents	Percentage of depression	p value
Age 60 to 70 yrs >70 yrs	54.39% 45.61%	N.S
Sex Male (n=75) Female (n=107)	41.2% 58.7%	N.S
Socio economic status Class I (n=30) Class II (n=38) Class III (n=22) Class IV (n=52) Class V (n=40)	9 (28.6%) 10 (27.9%) 11 (53%) 28 (55.3%) 26 (65.2%)	P<0.05
Marital status Living with spouse (n=120) Either spouse expired (n=52) Other (n=10)	39 (33%) 36 (68%) 8 (80%)	P<0.05
Education Illiterate(n=141) Literate(n=21)	77 (55%) 5 (26%)	P<0.05
Occupation Still working (n=8) Not working(n=154)	2 (26.2%) 83 (54.4%)	P<0.05
Substance abuse Yes(n=70) No (n=92)	41 (58%) 29 (32.4%)	P<0.05