

DEPRESSION AND DEMENTIA

Although it is sometimes difficult to distinguish between them and they can occur together, dementia and depression are different conditions. The purpose of this sheet is to help people to identify depression and to provide information that will help them raise issues with their clinicians.

What is the relationship between dementia and depression?

Dementia and depression can occur separately or together. Sometimes it can be difficult to distinguish between them because the signs and symptoms are similar. However, dementia and depression are different conditions requiring different responses and treatment.

Dementia involves the impairment of memory, understanding and reasoning that interfere with normal social or occupational functioning. Many conditions cause dementia, including Alzheimer's disease, vascular dementia and dementia with Lewy bodies, to name a few. These dementia conditions are generally not reversible but progression might be slowed, in some types of dementia, through the management of risk factors and/or medication.

Dementia-like symptoms can sometimes arise from other medical conditions which can be treated. In all situations where symptoms of memory impairment and confusion are noticed, or other intellectual functions have changed significantly, it's vital to get an accurate diagnosis from an appropriate medical practitioner.

What is depression?

Depression is not just a low mood or feeling sad, but a serious condition that needs treatment. People with depression generally feel sad, down or miserable most of the time. They find it hard to engage in or be interested in normal day-to-day activities. Depression has serious effects on physical as well as mental functioning.

Depression is common and affects over one million people in Australia each year. In its most severe form, depression can interfere with memory and concentration. However, these symptoms are reversible with treatment of the depression.

How do you know if a person is depressed?

A person may be depressed, if for a period of more than two weeks they experience:

1. Feeling sad, down or miserable most of the time
OR

2. Loss of interest or pleasure in most of their usual activities

AND experience some of the following symptoms:

- Weight gain or loss
- Disturbed sleep
- Feelings of agitation and restlessness
- Slowed movement and reactions
- Tiredness or loss of energy
- Feeling worthless
- Feeling guilty for no real reason
- Poor concentration, indecisiveness
- Recurrent thoughts of death, thinking about suicide
- Bodily discomfort or pain in the absence of a physiological cause
- Feelings of stress and anxiety
- Feelings of confusion
- Memory disturbance

What causes depression?

Depression has a number of causes which are common to people of all ages, including genetic factors, ongoing stress, social isolation and drug and alcohol use. Older people may also experience depression as a result of illness and major life changes such as loss of a partner, retirement, moving into nursing care or coping with increasing frailty

Is it dementia or depression?

There are many symptoms common to both dementia and depression which can lead to an incorrect

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diagnosis in an older person. These include:

- impaired ability to think and concentrate
- memory disturbance

If a person or someone close to them is concerned about these symptoms, they should talk to a doctor to ensure that a correct diagnosis is made, because the treatments for depression and dementia are different. A wrong diagnosis of dementia could mean a person with depression doesn't get the support and treatment needed to recover. Likewise, incorrectly diagnosing dementia as depression could lead to inappropriate treatment and unrealistic expectations of improvement in the person concerned.

Co-occurrence of depression and dementia

Sometimes depression and dementia occur together and it's important to be able to identify when these two conditions are present at the same time. Dementia can contribute to depression through the slow erosion of confidence and self-esteem as a person's ability to manage their physical and social environment is affected.

Other changes that can contribute to depression in a person with dementia include:

- loss of independence and increasing reliance on others
- inability to go out alone
- loss of ability to undertake enjoyable activities
- loss of ability to carry out everyday tasks
- high anxiety and agitation
- confusion and loss of memory

Although depression affects mood, it can also lead to poor memory and difficulties making decisions and organising and initiating activities. For a person with dementia, depression not only affects their mood, but may also worsen their symptoms of dementia.

Depression is three to four times more common in people with dementia than in older people without dementia, but it can go unrecognised for a number of reasons.

- Often it is incorrectly assumed that it's 'normal' for older people to be depressed, especially those with dementia.
- It can be difficult to distinguish symptoms of depression from those of dementia.

- People with dementia can have problems communicating with their doctors and carers or may not be able to describe their own symptoms very well.

Recognising depression in the presence of dementia

An accurate diagnosis involves more than simply identifying the symptoms. Factors which need to be taken into account include:

- the number of symptoms present
- the type of symptoms – particularly feelings of hopelessness, guilt and worthlessness
- the length of time the symptoms have been experienced

Dementia usually gets worse slowly over a period of months or years. If there is a noticeable change in behaviour and functioning over a few weeks, depression might be the reason.

Depression affects how a person functions in everyday life. It can be difficult to diagnose in the presence of dementia and in all instances, should be diagnosed and treated by a doctor.

How is depression treated?

Options for treatment include medication and 'talking therapies' such as counselling, cognitive therapy and behavioural interventions. It's important to understand the cause of the depression in order to determine the most appropriate treatment.

Depression which has a physiological basis may not respond to counselling and psychosocial interventions alone and may require medication. Depression in which the primary cause is psychological or environmental may be more responsive to psychosocial treatments and strategies to improve the environment rather than medication.

In some instances, depression may have both physiological and psychosocial causes and appropriate treatment may include both medication and therapy.

For further information about treating depression in dementia with medication, see sheet *Drugs used to relieve behavioural and psychological symptoms of dementia*.

What can you do to reduce the risk of depression in dementia?

In addition to professional treatments there are a number of things that you can do to both reduce the risk of depression and to maintain and/or improve the quality of life of a person with dementia.

- Adapt the person's home and immediate environment to make it more manageable
- Minimise change and keep to a predictable routine
- Minimise stress and anxiety by simplifying or eliminating tasks or activities that have become too difficult
- Reduce exposure to overstimulating or threatening situations
- Provide support for the person so he/she can carry out normal activities for as long as possible
- Ensure that healthy meals with lots of fresh fruit and vegetables are available everyday
- Provide vitamin B supplements if deficiency is present
- Encourage regular exercise
- Make sure a small amount of time is spent in the sun each day
- Make sure that something enjoyable is done every day
- Make sure that there is regular social contact
- Get a pet if appropriate care is available
- Encourage a period of relaxation or meditation every day

What help is available for families?

If families think that their relative with dementia is experiencing depression, they should tell the person's doctor or senior staff at the aged-care facility. It will be helpful if the symptoms that have led to their concern can be clearly described. Key indicators of depression are changes in mood (including agitation, anxiety and sadness), fluctuations in weight and sleep disturbance.



This sheet was produced in association with *beyondblue*: the national depression initiative.

For information and advice about depression and available treatments go to the *beyondblue* website at **beyondblue.org.au** or call the *beyondblue* info line on **1300 224 636**

FURTHER INFORMATION

Alzheimer's Australia offers support, information, education and counselling. Contact the National Dementia Helpline on **1800 100 500**, or visit our website at **fightdementia.org.au**



For language assistance phone the Translating and Interpreting Service on **131 450**