You're Never Too Old to Feel





Emotional Health in Older Adults: A Guide for Professional Caregivers

More And More Older Adults Are Receiving Treatment To Improve Their Mental Health.

Today, of the nearly 35 million Americans age 65 and older, an estimated 2 million have a depressive illness (National Institute of Mental Health, 2003). Among adults age 55 and older, 11.4 percent meet the criteria for having an anxiety disorder (Surgeon General's Report on Mental Health, 1999). It can be difficult at times for you to tell the difference between



the many different emotional problems that your resident or patient may have. But, many emotional problems are highly treatable in the elderly. Thus, it is important that the right name be given to the right symptoms so the correct treatments can be given. The following information will help you recognize signs of distress and the ways in which elderly people can be helped.

Why is this brochure so important for you and the older adults you care for?

- By knowing more about emotional health, you will be in a better position to discuss it with the older adults you care for and make more informed recommendations about their care.
- In addition, some of the most difficult and undesirable behaviors that you may face as a caregiver may really be symptoms of emotional distress. If you can treat the cause of the behaviors, the behaviors (symptoms) may improve.

Think About The Older Adult You Care For

Take a moment to think about the older adult you care for.

- Does he or she appear to be feeling out of sorts?
- Does he or she seem to be experiencing unfamiliar or uncomfortable feelings?

What Causes These Feelings?

Changes in the way an older adult feels can be caused by many factors.

- Illness, medication, genetics and even events that arise in daily life can affect mood.
- Events affect people differently. What seems to be a minor incident to one person may be quite traumatic for another. Also, events that would have



seemed unimportant in the past may take on more meaning as we get older. In other words, there is no 'right' or 'wrong' when it comes to reactions or feelings.

Certain Types Of Events Are Likely To Stir Up Negative Feelings.

Below is a list of problems that commonly cause distress in older adults. Have you seen any of these issues?

- Health Care Concerns (i.e. poor health, loss of mobility, loss of bodily control, memory problems, fears of being a burden to loved ones)
- Issues relating to aging (i.e. uncertainty about what the future holds, end of life issues, concern about disabled or dependent children)

- Loss (i.e. loss of companionship, loss of independence, loss of control over one's life)
- Conflict (i.e. disagreements with family or friends)
- Financial issues (i.e. changing jobs, retirement)
- Social life (i.e. social isolation, worries about making new friends)

It is normal for people to have ups and downs, but when an older adult's ability to enjoy life or be productive is affected by his/her mood, it is time to speak to a professional about helping him or her feel better.

- Housing Concerns (i.e. moving, loss of home, going into a new type of residential setting such as a nursing home)
- World events (i.e. recent terrorist attacks)

Common Mood and Functioning Changes

People may experience changes in mood and functioning in a variety of ways. It can sometimes be difficult for people to put their feelings and experiences into words. Below you will find descriptions of common mood changes or changes in functioning that can affect an older adult's ability to enjoy life or be productive. Read the following descriptions and see if any of them sound familiar.

ANXIETY

Anxiety is a feeling of worry that is so strong, it prevents a person from functioning the way he or she usually does. People who are anxious often feel keyed-up, jittery, nervous and irritable. They may not be able to relax or sleep well. They may feel nausea, have diarrhea, an increased startle response (be easily frightened) or elevated heart rate. They may be more distracted than usual and have poor attention. When the situation causing the fear is identified, people may start avoiding the situation.



Earl's Story

Earl entered the nursing home a year ago. Everyone who knew Earl liked him. He was friendly to staff and was active in

activities. Now he seems very irritable. He snaps at the staff and doesn't seem to remember when his favorite activity times are, so he misses them even though he wants to go. He often paces around the home or lies awake at night.

You may think that Earl is suffering from dementia because he seems so forgetful, but he is suffering from anxiety. An anxiety disorder is an illness that can keep an older adult from enjoying life. If the story above sounds like someone you care for, he or she may have an anxiety disorder as well.

ANXIETY CHECKLIST

The checklist below contains symptoms of anxiety. Read the list and ask yourself if the older adult you care for is experiencing any of the following:

- Excessive worry
- Feeling restless or on edge
- Decreased concentration
- Forgetful
- Irritability
- Sleep disturbance
- Avoidance of daily life activities due to emotional distress

Remember, Anxiety is a treatable illness. If you think the older adult you care for may be suffering from Anxiety, you can help him or her to feel better. See the last section of this guide for information on treatment.

DEPRESSION

Depression is not just a passing feeling of sadness. It is a persistent sad feeling that is accompanied by a loss of interest in activities, changes in sleep and appetite, crying spells, feelings of hopelessness, guilt or worthlessness, increased thoughts of death, suicidal thoughts, decreased energy, decreased concentration and sometimes memory problems.

DEPRESSION CHECKLIST

Read the list and ask yourself if the older adult you care for is experiencing any of the following:

- Sad or empty mood
- Loss of interest in activities
- Change in sleep or appetite
- Feelings of guilt
- Decreased concentration
- Thoughts of death or suicide
- Disruption of daily life due to distress

Mary's Story

Mary has not been feeling quite like herself lately. She has been feeling blue and can't seem to get interested in



gardening and cooking, although she used to love these activities up until a few months ago. She just can't seem to get the energy up to see her friends. She hasn't been eating or sleeping well and is starting to look thin and tired. She has always considered herself emotional, but now she is crying more easily than usual and about things that would not have upset her before.

Mary is suffering from depression, an illness that can rob her of her ability to enjoy life. If the story above sounds like it could be written about the older adult you care for, he or she may be suffering from depression as well.

Remember, Depression is a treatable illness. If you think the older adult you care for may be suffering from Depression, you can help him or her to feel better. See the last section of this guide for information on treatment options available to older adults.

DEMENTIA AND PSEUDODEMENTIA

Dementia is not just mild forgetfulness. It is a change in thinking skills that may include significant memory loss, decreased word finding, confusion, decreased ability to use familiar objects, decreased ability to plan and organize, and difficulty performing tasks that were previously familiar and easy.

Pseudodementia, on the other hand, is a condition that results from depression. Symptoms of Pseudodementia mimic those found in Dementia Dementia is an illness caused by changes in the brain that result in a gradual impairment of memory, judgment, attention and other thinking skills. It is important to receive the correct diagnosis because while Dementia is not reversible. Pseudodementia is. An incorrect diagnosis can keep an older adult from getting the right treatment

Although Dementia cannot be cured, there are treatments available that may slow down the rate at which the disease

Irma's Story

Since her husband died eight months ago, Irma appears to be slowing down.



She no longer reads the newspaper and is suddenly having trouble knitting although she has enjoyed this hobby for many, many years. Her family has noticed that she asks the same questions several times and appears to have forgotten conversations they had on the phone. One time Irma turned on the oven and forgot about her dinner until the smoke alarm went off.

Before labeling her as demented, it is important to find out if her symptoms are caused by depression.

progresses. Also, support groups and services are available for caregivers to help decrease stress. As mentioned above, pseudodementia symptoms can be reversed with proper



Margaret's Story

Margaret has lived in the assisted living residence for two years and during that time, she has been able to take care of herself,

dressing, feeding and bathing. One day, her aide knocks on her apartment door and finds Margaret's hair is uncombed and she has buttoned her blouse incorrectly. In addition, she is confused about the date and asked the aide if she had seen her father today although he had been deceased for several years.

If the story above reminds you of the older adult you care for, he or she may have delirium as well. identification and treatment. It is important to distinguish dementia from pseudodementia. If the older adult you care for appears to be suffering from these symptoms, help him or her to consult the appropriate professional caregiver for diagnosis and to learn about treatment options.

DELIRIUM

Delirium is a reversible and sudden change in mental status that has a medical basis (i.e., a new medication, dehydration, etc.). Delirium may involve altered consciousness, irritability, impaired

attention, poor judgment, hallucinations, delusions or increased motor activity. One of the differences between delirium and the other emotional problems is that the behaviors come on very suddenly.

Remember, Delirium is a treatable illness. If you think the older adult you care for may be suffering from Delirium, you can help him or her take steps to feel better. See the last section of this guide for information on treatment options and resources for more information. As a caregiver, you are in a wonderful position to help the older adult you care for. You may see him or her often enough to notice changes. Use this list of treatment ideas to give to the older adult who may need help. If you have a professional supervisor, talk these over with him or her before speaking to the older adult.

Treatment

There are a variety of treatments available today that help people feel better, adjust to difficult circumstances and improve functioning. Some of the more popular treatments are listed below.

MEDICAL INTERVENTION

As mentioned earlier, emotional changes may have a medical cause. One of the first recommended steps to take in seeking treatment is to see a medical doctor to discuss symptoms. The doctor may wish to perform tests to determine what is causing the symptoms.

PSYCHOLOGICAL INTERVENTION

Seeing a psychologist or other licensed mental health professional is also an important step in helping an older adult feel better. A psychologist can help someone talk about how he or she is feeling, understand why the feelings developed and find ways to help him or her feel better.

MEDICATION INTERVENTION

A medical doctor specializing in emotional health may prescribe medication to assist in controlling the older adult's symptoms and improving his/her mood. This method is often used in addition to psychological treatments. Some of the medications take effect in a short time while others may take several weeks. It is important that the individual have an idea of when they can expect to feel better so that she or he does not give up prematurely. You may need to remind the older adult that enough time has not passed to see improvement. Remember: one should always talk to a doctor before stopping any medication that has been prescribed. Some medications may cause harmful side effects if discontinued abruptly.

Resources for More Information

American Psychological Association

750 First Street NE, Washington, DC 20002-4242 800-374-2721; 202-336-5500 Online Help Center: www.apahelpcenter.org

Gerontological Society of America

1030 15th St. NW, Suite 250, Washington, DC 20005 202-842-1275 · www.geron.org

Alzheimer's Association National Office

225 N. Michigan Ave., Floor 17, Chicago, IL 60601 Nationwide Contact Center: 800-272-3900 · www.alz.org

American Geriatrics Society

The Empire State Building 350 Fifth Avenue, Suite 801, New York, NY 10118 212-308-1414 · Referral Service: 800-563-4916 www.americangeriatrics.org

Eldercare Locator 800-677-1116 · www.eldercare.gov/eldercare/Public/Home.asp

National Mental Health Association

2001 N. Beauregard Street, 12th Floor Alexandria, VA 22311 800-969-6642 · www.nmha.org

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This guide, along with a guide and short video for older adults, are available for free download from our website, www.ltccc.org. Limited hard copies of the guides and video are also available. Please email info@ltccc.org or call Barbara at 212-385-0355 for more information.

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Important Things to Remember...

As a caregiver, it is important to remember that mood changes are not an unavoidable part of normal aging. Treatment can be effective at any age. Symptoms do not usually go away on their own. The older adult you care for can feel better.

Many people still feel it is wrong or a sign of weakness to talk about emotional issues. Many older adults feel that there is a stigma attached to having emotional problems or needing help. But it is important to remember that nowadays, many people of all ages are getting help with emotional issues and are glad that they did.

As a caregiver, you can help the older adult you care for overcome these and other hurdles and take control of their mental health care. You can help them to live life to its fullest, no matter what stage they are in their lives, or where they live.

Remember, you are never too old to feel good!



Visit www.ltccc.org to watch the video on emotional health for the elderly or for more information on elder and long term care issues.