



What is depression?

Feeling sad once in a while is different from having depression. People who are seriously depressed feel little joy in life or from things they used to enjoy, and this unhappy mood is present nearly every day and lasts for two weeks or more. Depression may cause additional symptoms such as:

- Lack of interest in social activities
- Feeling tired or unmotivated
- Sleeping too much or too little
- Changes in appetite or body weight
- Feeling worthless, empty, or hopeless
- Thoughts of death or suicide
- Feeling guilty or a burden
- Unexplained aches or pains
- Reduction in sex drive
- Feeling restless, nervous, or irritable
- Trouble concentrating, remembering, or making decisions

If you think you might be depressed, talk to your doctor

Like other health conditions, depression can cause physical and emotional symptoms. When you are older, depression may last longer, make other health conditions worse, and even lead to premature death. Occasional thoughts of death are normal, but a person who is depressed may think about death often and may be at risk for suicide.

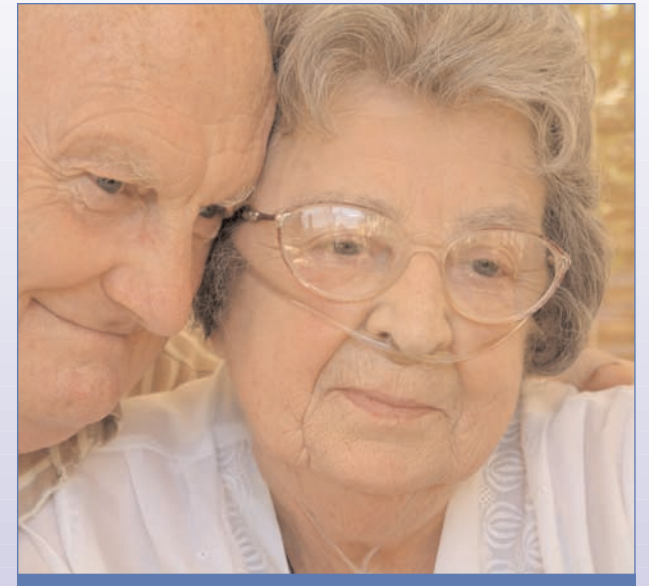
Talk to your doctor if you answer "yes" to either of these two questions:

- During the past month, have I been bothered by feeling down, depressed or hopeless?
- During the past month, have I been bothered by little interest or pleasure in doing things?

Many people do not talk to their doctors or loved ones about depression, or may not realize they are suffering from a treatable condition. As a result, they do not get help. But treatment is available and it often works.

How will my doctor help?

Depression is not a natural part of getting older, and your doctor can help you feel better. Your doctor may ask about how you feel, do a physical exam, and review the medicines and over-the-counter products you are taking. Your doctor will also check to see if the way you feel is being caused by a separate medical problem.



When you're feeling down...

You can get help and feel better. Many people feel sad, worried, or lonely at some time in their lives. This can happen after difficult life events, such as the loss of loved ones, an illness or injury, or unhappy situations or relationships. But when sad feelings occur nearly every day, are severe, and last for two weeks or more, it may help to discuss it with your doctor.



The Alosa Foundation



Balanced data about medications

The Independent Drug Information Service (iDiS) is supported by the PACE Program of the Department of Aging of the Commonwealth of Pennsylvania.

This material is provided by the nonprofit Alosa Foundation, which is not affiliated in any way with any pharmaceutical company. These are general recommendations only; specific clinical decisions should be made by the treating physician based on assessment of the individual patient.

visit our website: www.RxFacts.org



The Alosa Foundation



Balanced data about medications

How is depression treated?

The most common treatments include counseling, also called talk therapy or psychotherapy, and antidepressant medications.

Counseling

Counseling helps people understand their feelings, deal with troubling relationships or problems, and make healthy choices. Counseling works as well as medications for some people, especially those with mild depression, and is generally a good option.

It can also be used along with antidepressant medication. Spending time with friends, family, and support networks can also help relieve symptoms of depression.

Antidepressant medications

Many **antidepressant medications** are available. When used as directed, most commonly used medications are similarly effective. Antidepressants start to work in 4-6 weeks, so it is important to follow your doctor's instructions and take your medicine as directed, even if you do not feel better right away. Medications work differently in older people, so your doctor may start with a low dose and adjust the type or dose over time.

Some common antidepressants are:

Drug class	Examples
Selective serotonin reuptake inhibitors (SSRIs)	citalopram* (Celexa)
	sertraline* (Zoloft)
	paroxetine* (Paxil)
	escitalopram (Lexapro)
	fluoxetine* (Prozac)
Serotonin-norepinephrine reuptake inhibitors (SNRIs)	venlafaxine* (Effexor)
	duloxetine (Cymbalta)
Dopamine-norepinephrine reuptake inhibitors	bupropion* (Wellbutrin)
Noradrenergic and specific serotonergic antidepressants	mirtazapine* (Remeron)
Tricyclic antidepressants (TCAs)	amitriptyline* (Elavil)
	imipramine* (Tofranil)
	nortriptyline* (Pamelor)
	desipramine* (Norpramin)

*Available as an affordable generic

Side effects are common and are different for different medications. Common side effects with SSRIs include upset stomach, restlessness, trouble sleeping, headache, and sexual dysfunction. Other drugs will have different side effects. Many side effects become less severe or go away with continued use. Some people find that starting on these drugs initially makes them feel worse, and may even cause them to think about hurting themselves. This may be a medication side effect. Call your doctor immediately to talk about these feelings or any other side effects you may be having.

It is important to continue taking your medicine after you start feeling better, usually for at least 6 months. Stopping your medicine too quickly can make you feel sick and cause dizziness, upset stomach, fatigue, aches, chills, anxiety, and irritability. Your doctor will work with you to decide which medicine is best for you, how long to take it, and how and when to stop taking it.

What can you do?

You can do many things to help yourself feel better.

- Make time to relax.
- Identify problems and work on fixing them.
- Think positively.
- Be physically active, 30-60 minutes per day, most days of the week.
- Spend time outdoors.
- Get involved with groups or volunteer work.
- Spend time with friends, family, and people who can support you.

Remember, depression is not a normal part of getting older, and treatment is available. Treatment takes time, so be patient. Follow your doctor's instructions, stay committed to your goals, and talk about how you feel.

If you need help

Many resources are available for you. Call or go online for more information.

American Geriatrics Society

www.healthinaging.org
1-800-563-4916

Geriatric Mental Health Foundation

www.treatmenthelps.org
1-877-654-7850

National Institute of Mental Health

www.nimh.nih.gov
1-800-421-4211

National Mental Health Association

www.nmha.org
1-800-969-NMHA (1-800-969-6642)

If you are in crisis and need help right away, call this 24-hour help line:

National Suicide Prevention Lifeline

1-800-273-TALK (1-800-273-8255)
