



Mental Health and Well-being in Aging

What you can do to help

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Part 1:
Understand that good mental health is a critical component of older adults' overall well-being.

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Part 2:
Be familiar with mental illnesses that may occur in elderhood; have tips for investigating an individual's mental wellness.

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Part 3:
Have a toolkit for promoting good mental health for older adults in care communities.

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Part 4:
Be able to link individuals and families to necessary and appropriate community mental health resources.

SERIES OBJECTIVES

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Part 2 – Objective

Be familiar with mental illnesses that may occur in elderhood and have tips for investigating an individual's mental wellness .

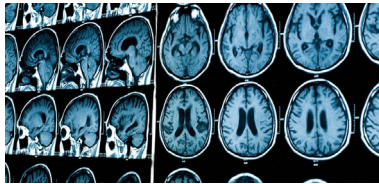
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Being aware of common mental health problems in aging can help you identify them.



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Serious mental illnesses include schizophrenia, schizoaffective disorder, bipolar disorder, and psychotic depression.



Serious mental illness negatively impacts brain structures

Image from <https://parkinsonsnewtoday.com/sci/biology/parkinsons-psychosis-linked-specific-brain-area-volume-study/>

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Antipsychotics are not approved by the FDA to treat psychosis/agitation in people with dementia.



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Symptoms of psychotic illnesses:

Delusions

- Beliefs that aren't reality

Hallucinations

- Vivid perceptions that aren't real

Disorganized thinking/speech

- Conversation is broken and disjointed
- "Word salad"

Motor behavior

- Agitation, pacing, silliness
- Catatonia: no reaction to environment

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Is it psychosis or delirium or dementia?

Psychosis can look like delirium or dementia!

There can be hallucinations and delusions with both.

Delirium:

- A TEMPORARY and REVERSIBLE condition (NOT a long-term mental illness).
- First consideration when there is a very fast onset of hallucinations or delusions.
- Acute medical emergency that requires FAST medical attention to rule out UTIs, blood infections, dehydration, and other biological causes.

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Medications as a cause?

Review medications with MH professional (*Psychiatrist or PNP is recommended*)

- Any new?
- Sudden discontinuance?
- Possible interactions?
- Negative side effects?
- Overdose? (intentional or accidental)
 - Body composition, weight, metabolism and absorption rates all change with age.

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Diagnostic Overshadowing

Happens when health providers attribute physical health symptoms or unrelated mental health symptoms to the underlying severe mental illness.

Dismissing health complaints as symptoms of depression or anxiety (stomach aches, muscle pain, lethargy). Thyroid conditions can present with same symptoms as depression.

Disregarding reports of plausible abuse as delusions.

Contributing sudden onset of hallucinations as dementia or related to SMI.

Be aware of dual diagnosis with substance abuse

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PERSONALITY DISORDERS

Defined by the **DSM-5** as "an enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual's culture, is pervasive and inflexible, has an onset in adolescence or early adulthood, is stable over time, and leads to distress or impairment."

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Cluster A symptoms (odd, eccentric)

Symptoms include pervasive patterns:

Paranoid:

- distrust and suspiciousness of others (motives are interpreted as malicious).

Schizoid:

- disinterest in social relationships and restricted range of emotions in social/interpersonal settings

Schizotypal:

- social and relational deficits, issues with developing close relationships, cognitive distortions and eccentric behaviors

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Cluster B (dramatic, emotional, erratic)

Symptoms include pervasive patterns:

- Antisocial** disregard or violation of other's rights
- Borderline:** instability in relationships, self-image, affect, impulsive
- Histrionic:** excessive emotionality, theatrical and attention-seeking behavior.
- Narcissistic:** grandiosity, need for admiration, lack of empathy.

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Cluster C Symptoms

Symptoms include pervasive patterns:

- Avoidant**
 - social inhibition, feelings of inadequacy, hypersensitivity to negative evaluation
- Dependent**
 - excessive need to be taken care of leading to submissive and clingy behavior, fear of separation
- Obsessive-Compulsive**
 - preoccupied with orderliness, perfectionism, mental and social control at the expense of flexibility, openness and efficiency.

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Depression

According to the American Psychiatric Association:

- "Depression (major depressive disorder) is a common and serious medical illness that negatively affects how you feel, the way you think and how you act."
- Depression causes feelings of sadness and/or a loss of interest in activities once enjoyed.
- It can lead to a variety of emotional and physical problems and can decrease a person's ability to function at work and at home.

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Depression

Symptoms must last at least two weeks for a diagnosis of depression.

- Feeling sad or having a depressed mood
- Loss of interest or pleasure in activities once enjoyed
- Changes in appetite — weight loss or gain unrelated to dieting
- Trouble sleeping or sleeping too much
- Loss of energy or increased fatigue
- Increase in purposeless physical activity (e.g., hand-wringing or pacing) or slowed movements and speech (actions observable by others)
- Feeling worthless or guilty
- Difficulty thinking, concentrating or making decisions
- Thoughts of death or suicide


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Depression has far-reaching impacts for adults *(of any age)*

- Most prevalent mental health problem in aging
- More than just a passing mood
- Complicates treatment of other diseases
- Not normal aging
- Very treatable!

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Elder suicides do occur in assisted living settings



This provides 24/7 free and confidential support for people in distress and for those offering help to others.

1-800-273-TALK (8255)
suicidepreventionlifeline.org

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but excessive anxiety
onion.


- Pain
- Reduced quality of life
- Poor problem-solving skills
- Increased use of medical services
- Difficulty with daily life
- Higher medical costs

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Anxiety may be overlooked because symptoms resemble other ailments.



Psychological



Physical



Behavioral

Mental Health Association of Maryland, Missouri Department of Health, & National Council for Behavioral Health. (2013). *Mental Health First Aid USA, Revised First Edition.*

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Most Common Treatments for Mental Illness

Medications

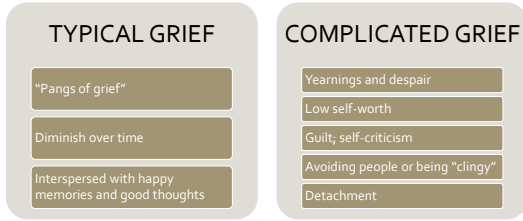
- Antipsychotics
- Anti-anxiety
- Anti-depressants

Psychotherapy or Talk-Therapy (many different models)

- Cognitive Behavioral Therapy (CBT)
 - Thoughts-Feelings-Behaviors
 - Evidenced based and well known for efficacy

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Some residents may experience **complicated grief**.



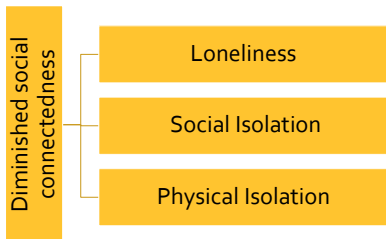
Shear (2005)

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Feeling **socially connected** is vital to whole-person health.



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LONELINESS
The percentage of American adults stating they are lonely has soared from 20% to 40% in a generation. (U.S. Surgeon General, 2017)

HEALTH
From immunity to inflammation, cognitive impairment to stroke, our social connections play a role in disease: risk and preventive.

LONGEVITY
People with strong social connections live longer. And without strong relationships, life expectancy shrinks.

Why is Connectedness Important?


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Social connectedness contributes to positive mental health outcomes.

- 1. Happiness**
70% of our happiness comes from relationships
(Murray & Peacock, 1996)
- 2. Self-esteem**
Positive relationships help us thrive emotionally, increase our self-esteem and self-acceptance
(Pinker, 2016)
- 3. Affinity**
Singing in groups improves happiness and well-being and sparks rapid social bonding
(Pearce, Luoma, & Dunbar)

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Feelings of shame and social distance are harmful to social connectedness.



May result in social isolation or defensive behaviors

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THANK YOU FOR ALL THAT YOU DO!

Questions/Comments/Concerns?

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