

## **EP19.01**

### **Late-life depression: a diagnostic challenge**

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**Background & Aims:** Late-life depression is a serious health problem that reduces quality of life, increases mortality and causes excessive use of healthcare resources. In Europe, about 12.3% of the elderly are depressed. However, it seems to be underdiagnosed and incorrectly treated. The aim of this paper is to review the diagnostic approach in late-life depression.

**Methods:** ; Narrative review, with research in PubMed and UpToDate websites, of reviews and systematic reviews published in the last 10 years in English, Portuguese and Spanish. MeSH terms “depressive disorder/diagnosis” and “aged” were used.

**Results:** The diagnosis criteria in late-life depression are also applied for other life stages. It is recommend to pay special attention to changes of humor or interests, with at least 2 weeks of duration and involvement of social relations, associated with disproportionate physical symptoms. Elderly patients with major depression usually have somatization, anorexia, weight loss, psychomotor abnormalities, anxiety and suicidal ideation. There are several factors that difficult the diagnosis of depression in the elderly, mainly, coexistent medical illness with overlapping depression symptoms, drugs adverse effects, several somatic complaints, weak communication ability and lack of time during consultations to evaluate mental health disorders in patients with complex health problems.

**Conclusions:** Depression isn't a normal consequence of ageing. It should be borne in mind that somatic complaints are often the first manifestation of depression in the elderly. Suicidal rates are higher in the elderly than in others age groups, strengthening the role of family doctors in early diagnosis and treatment of late-life depression.

Keywords: Depression Diagnosis; Elderly; Late-life Depression