

RESEARCH ARTICLE

**Evaluation of Prevalence of
Geriatric Depression among
Residents of Nursing Homes in
Ahwaz, 2016**

Hatam Boostani 1, Hamzeh Rostami 2, Mehrnaz kherad 3,

1- Department of psychiatry, Golestan Hospital, Ahvaz
Jundishapur University of Medical Sciences, Ahvaz, Iran

2- Department of psychiatry, Golestan Hospital, Ahvaz
Jundishapur University of Medical Sciences, Ahvaz, Iran

3- student research committee, ahvaz jundishapur
university of medical sciences ahvaz, iran

Correspondence

Mehrnaz kherad
student research committee,
ahvaz jundishapur university
of medical sciences ahvaz,
iran.

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ABSTRACT

Introduction: In the U.S nearly 50% of the elderly living in nursing-homes with depressive disorders (a third of them with major depression), respectively. The incidence of depression and its severity in elderly living in private homes far less than nursing-homes. Since, according to the 2007seniors 26.7% of the total population are old. By the year 2021will reach more than 10%. We decided to assessed prevalence and factors affecting depression in the elderly living in nursing-homes in Ahvaz. **Methods:** This cross-sectional study on elderly residents nursing-homes in Ahvaz. Among elderly nursing-home residents GDS questionnaire which contains thirty questions is yes or no forms were distributed and collected the required information. And chi-square regression methods were used to analyze the data. **Results:** In this study, 180 elderly residents of nursing-homes in the city of Ahvaz participated. Including 98 males and 82 females. The mean age 76 years (minimum 62, maximum 89). Overall, 73 patients (40.55%) of elderly depression that 54.79% of men and 45.20% of the women had depression. 50.79% of seniors over 12 months in a nursing-home resident who had depression and 54.83% of the elderly who usually a week, visitors were not depressed. **Conclusion:** Given the high prevalence of depression among the elderly living in nursing-homes and also a significant correlation between depression in older adults with increased length of stay and lack of visitors. It appears to reduce depression in the elderly living in nursing-homes pay special attention to these two factors.

INTRODUCTION

Graying of hair (hair whitening) is a term which refers to the increasing growth of elderly population to a proportion of general population in recent years (1). Today, the world population of people over 60 years old is estimated more than 600 million people and it will reach more than 1 billion people in the year 2020 (2). According to the statistics, the elderly population of Iran in 2006 comprises 7.26 percentage of total population and this figure will increase to more than 10 percent by 2021. Due to an improvement of hygienic conditions, the average life expectancy has increased and the population of people below 15 years old, for the first time, will be equal to the population of people above 60 years old in 2050 (3). The old age is regarded as the final stage of life. The old age age is recognized as the second childhood indicating the importance of caring for the elderly. Approximately 20 percent of elderly diseases are caused by mental and neurological disorders among which dementia and depression are the most prevalent. Depression is a common disease which 12% of the older adults suffer from it

(6) and is one of the most prevalent causes of suicide among the elderly. The elderly victims mostly committed suicide in the first attack of depression (7&8). Since the relationship between health care centers and psychiatric care centers is a new issue, there has not been much research in this regard. However, there are findings indicating the high prevalence of this disorder in these centers. Today, approximately 50 % of the elderly in adult day care centers suffer from depression disorders (one-third of these individuals with diagnosable major depression) (9). The prevalence and intensity of depression among the elderly residing in private homes has been much less than the elderly residing in day care centers (10).

MATERIALS AND METHODOLOGY

The present research was carried out on the elderly residents of Ahwaz nursing homes in 2015. The research inclusion criteria are:

1. The individual should be above 65 years old.
2. The individual should be a resident of Ahwaz nursing center.

The research exclusion criteria are:

3. The presence of diagnosable mental illness or psychiatric disorder in an individual.

4. The occurrence of recent tragedies for an individual such as the death of immediate family members.

The research data was collected using data collection forms including demographic data (age, gender, residence time in nursing home, ethnicity, education level, etc.) and GDS questionnaire consisting of 30 questions. After obtaining the necessary authorizations from university and coordinating with four nursing homes of Ahwaz called Salehin, Mehrjooyan, Tolu-e-Hamdali and Hasti nursing homes, the data collection forms were distributed among the elderly who had the necessary inclusion criteria. If the elderly could not read or write, the data collection distributor would

RESULTS

The demographic characteristics of the elderly patients with depression are given in table 1. In total, as we can see in table 2, 73 persons (40.55%) out of 180 suffer from depression. The research findings indicated that there is a significant relationship between

read and explain all the questions to him or her. Also, if the elderly did not have a command of Farsi language, an interpreter explained the questions to him or her, simultaneously. After collecting completed forms, they were classified into three groups in terms of their obtained scores including 0-9 as "normal", 10-19 as "mildly depressed" and 20-30 as "severely depressed". The elderly who were unwilling to participate in the research were eliminated from the study. The descriptive statistics were used to report the prevalence rate of depression at various levels. Further, the Chi-squared test was used to assess relationship with demographic characteristics. All the research analyses were performed using SPSS software, version 17.0.

residency time and having no visitors with depression ($P < 0.05$). However, there was no significant relationship between gender, age range, education level and ethnicity/race with depression ($P > 0.05$).

Table 1: Frequency distribution of subjects in terms of gender, age, education level, having visitors per week, ethnicity and residence time in nursing home

Variable		Frequency (Percent)	Total
Gender	Male	98 (54.4 %)	180 (100%)
	Female	82 (45.6%)	
Age	60-75	70 (38.9%)	180 (100%)
	75-90	110 (61.1%)	
Educational level	Illiterate	140 (77.8%)	180 (100%)
	Elementary	21 (11.7%)	
	Junior high school	13 (7.2%)	
	Diploma	6 (3.3%)	
	Post-diploma	0 (0%)	
Visitors per week	Has	149 (82.8%)	180 (100%)
	Doesn't have	31 (17.2%)	
Ethnicity/race	Arab	54 (30.0%)	180 (100%)
	Persian	126 (70.0%)	
Residence time	2-6 months	62 (34.4%)	180 (100%)
	6-12 months	55 (30.6%)	
	12-36 months	33 (18.3%)	
	More than 36 months	30 (16.7%)	

Table 2 Prevalence rate of depression among the elderly in terms of intensity of depression

Variable		Mild depression	Average depression	Severe depression	Total
Gender	Male	60	30	10	180 (100%)
	Female	47	25	8	
Age	60-75	40	24	6	180 (100%)
	75-90	67	31	12	
Educational level	Illiterate	84	45	11	180 (100%)
	Elementary	12	4	5	
	Junior high school	7	4	2	
	Diploma	4	2	0	
	Post-diploma	0	0	0	
Visitors per week	Has	93	46	10	180 (100%)
	Doesn't have	14	9	8	
Ethnicity/race	Arab	32	15	7	180 (100%)
	Persian	75	40	11	
Residence time	2-6 months	43	19	0	180 (100%)
	6-12 months	33	18	4	
	12-36 months	17	8	8	
	More than 36 months	14	10	6	

DISCUSSION and CONCLUSION

In this study, the prevalence of depression was obtained to be 40.55 %. The prevalence rate of mild depression and severe depression was calculated 30.6% and 10.0%, respectively. In a study by Mobasheri, 64.9%, 15.8% and 3.5% of the elderly indicated mild, average and severe depression, respectively. In another study by Sadeghi, the prevalence rate of mild and severe depression was reported as 20.1%, and 6.5%, respectively. A study by Kashfi on the elderly residents of Shiraz nursing homes, 65.0%, 25.8% and 9.2% of the elderly had mild, average and severe depression, respectively. A study by E'temadi on elderly residents of Tehran nursing homes demonstrated that 32.5% of the elderly suffered from depression. The diversity of prevalence rate of depression is caused by various methods used and cultural differences (11-13). In this study, the prevalence rate of depression was 40.24% and 40.81% among females and males, respectively. The research findings indicated that there is no significant relationship between gender and prevalence rate of depression. Studies by Kashfi and E'temadi revealed that prevalence rate of depression was more among females than males (11&12). The prevalence rate of depression among the elderly aged

between 60-75 and 76-90 was 42.85% and 49.09%, respectively. This indicates that there is a significant relationship between prevalence rate of depression and an increase in the age of the elderly. However, in this study, there was no considerable relationship between age and prevalence rate of depression. These findings are in agreement with Mobasheri and Sadeghi studies. In the study by Kashfi, the prevalence rate of depression decreases with an increase in the elderly age (12&14). In present research, although 40% of illiterate and 42.5% of literate elderly suffered from depression, there was no significant relationship between literacy and prevalence of depression. These findings are in agreement with the results of studies by Mobasheri and E'temadi (11&14). In this study, there was an increase in prevalence rate of depression among the elderly residing in nursing homes with an increase in the residency time so that 34.5%, 40%, 48.48% and 53.33% of the elderly with a residency time of 2-6 months, 6-12 months, 12-36 months and more than 36 months, respectively, suffered from depression. In this study, there was a considerable relationship between residency time and prevalence of depression. However, in the study by Sadeghi, there was no significant relationship between residency time and prevalence of depression. There

has been little research carried out on the relationship between residency time of the elderly and depression. Therefore, the distinction between present research and previous studies findings should be evaluated using further studies (13). The present research findings revealed that 40.74% and 40.47% of the Arab and Persian speaking elderly suffered from depression, respectively. Also, there was no significant relationship between ethnicity/race and depression. The prevalence rate of depression was more among the elderly who had no visitors during the weeks compared with those who had visitors.

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