

**135 - DEPRESSION IN RESIDENTS OF LONG-STAY INSTITUTIONS FOR THE ELDERLY IN THE CITY OF NATAL / RN ACCORDING TO GERIATRIC DEPRESSION SCALE**

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**INTRODUCTION**

The aging process has occurred in a very significant nowadays in the world, including in developing countries (VERMELHO, 2002). According to statistical projections of the World Health Organization during the period 1950 to 2025, the group of elderly people in Brazil will have 15-fold increase, while the total population of 5, the sixth being placed on the number of elderly people. (CHELONI, et al., 2003).

This fact warns the new profile of morbidity and mortality that affects the country. It is known that the elderly often have multiple and chronic health problems, lasting several years, characterized with physical or mental illness. Among the disorders of mental order that most affect the elderly, depression is one of the most common psychiatric problems and is considered one of the greatest threats to the balance of well-being. (COUTINHO, et al., 2003; SMELTZER e BARE, 2005).

Depression is a mental disorder that affects the human being in its entirety, without separation between the mental, social and physical (COUTINHO, et al., 2003). Multifactorial and is difficult to measure morbidity in all age groups, the elderly, the symptoms are a psychic and somatic, especially with physical complaints, which makes diagnosis and treatment (CUNHA, et al., 2004; GAZALLE, et al., 2004; ROACH, 2003).

The institutionalization of the elderly in long-term care services is a model of exclusion and cause a major deterioration in functional capacity and autonomy of these (SILVESTRE & NETO, 2003). For the elderly, the process of institutionalization can be seen as loss of freedom, abandonment by children, the approach of death, as well as anxiety about the changes and to conduct routine treatment by officials (FREIRE JÚNIOR & TAVARES, 2005), who associated with social isolation and the denial of feelings on an environment that it is not pleasant, contribute to the emergence of diseases, including depression (ANDRADE et al., 2005).

According to Louzã Neto, apud Coutinho et al (2003), it is estimated that 15% of the elderly population have some symptoms of depression, of which 2% of the severe type. In Brazil, more than 10 million people suffer from this condition, depression being considered as one of the greatest threats to the balance of well-being (COUTINHO et al., 2003). Chenoli (2003), in a study of institutionalized elderly in the city of Mossoró/RN, found the prevalence of depression in 51% of respondents, according to the results of the scoring Geriatric Depression Scale (GDS) of 30 items. In another study conducted in Salvador, Bahia, using the GDS short version with 15 questions, was reported rate of 21.1% of depressive symptoms in elderly residents in long-stay institutions. (SANTANA & BARBOZA FILHO, 2007).

Almeida and Almeida (1999) warn that health professionals should be familiar with the characteristics of depression in the elderly and prepared to investigate the presence of depressive symptoms from complaints related to physical and emotional disorders. Thus, it will be possible diagnose and promoting actions of early intervention and effective. (GAZALLE, et al., 2004).

Considering that depression leads to physical and psychological harm and negative consequences for the quality of life of affected individuals, it is necessary to a study that seeks to determine the prevalence of the disease, allowing more appropriate intervention in the diagnosis and treatment.

This research aimed to identify the frequency of depressive symptoms among residents in institutions for the aged (RIA) and characterize the sociodemographic characteristics associated with depressive symptoms.

**METHODOLOGY**

We conducted a descriptive study with a quantitative approach in three nursing homes, for charity in the city of Natal/RN.

The study population consisted of 99 elderly residents in long-stay institutions. A sample of 26 elderly were selected according to the following inclusion criteria: age 60 years or older, male and female, have good general health and has no mental limitations and / or hard of hearing and speech, be classified by institution as independent or partly dependent, be able to answer questions and take part in the study voluntarily, signing the consent form.

The instrument used for data collection was a form consisting of questions related to the sociodemographic characteristics of study subjects and the Geriatric Depression Scale of Yesavage, a simplified version with 15 questions (GDS-15). The Brazilian version of GDS-15 provides valid measures for the detection of depression in the elderly, according to the criteria of the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) and the 10th revision of International Classification of Diseases (CID-10), and monitoring of symptoms with the passage of time (ALMEIDA & ALMEIDA, 1999; BATISTONI, NERI & CUPERTINO, 2007; PARADELA, 2002).

The collection procedure was as follows: the sending Application for Authorization to carry out research in the institutions, sending the research project for the Ethics Committee of the Universidade Federal do Rio Grande do Norte - UFRN, which gave its assent; visit the institution to establish contact with the elderly with which the Consent Form, in accordance with Resolution 196 / 96, followed by signature of participants and application of this instrument. The data were coded, and descriptive analysis of the study variables (gender, age and length of residence in the LPI). The cutoff points are: normal or no symptoms - less than 5 points, mild depression - between 5 and 10 points, severe depression - up 10 points (ALMEIDA & ALMEIDA, 1999).

**RESULTS**

According to Table 1 was predominantly female, with 16 elderly (61.5%). According to the score of the Geriatric Depression Scale, showed that 80% (n = 8) of elderly males had mild and female with 75%. The severe depression in males had no cases, however females had 6.3% of severe depression. Thus, one can observe that the percentages of mild depression (score between 5 and 10 points in the GDS-15 were higher among males but among females appeared symptoms of severe depression (over 10 points in the GDS - 15).

Table 1 - Distribution of frequency of symptoms of depression in the elderly according to the results of the GDS-15, by sex.

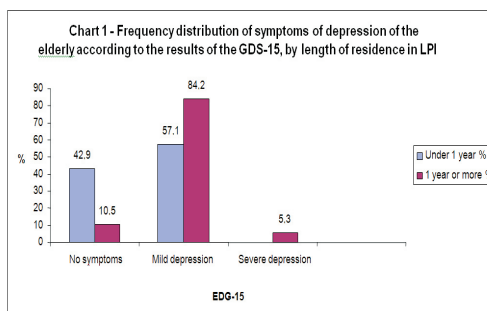
GDS-15 \ Sex	Men		Women	
	N	%	N	%
No symptoms	2	20	3	18,7
Mild depression	8	80	11	75
Severe Depression	-	-	2	6,3
Total	10	38,5	16	61,5

According to table 2 it was found that was a high prevalence of symptoms of mild depression in the elderly aged over 71 years accounting (83.3%), followed by the elderly between 65 and 70 years reaching a prevalence of 66.7%.

Table 2 - Distribution of frequency of symptoms of depression in the elderly according to the results of the GDS-15, by age appeared symptoms of severe depression (over 10 points in the GDS-15).

GDS-15 \ AGE	< 65		65 - 70		> 71 years old	
	N	%	N	%	N	%
No symptoms	1	50	2	33,3	2	11,1
Mild Depression	1	50	4	66,7	15	83,3
Severe Depression	-	-	-	-	1	5,6
Total	2	7,7	6	23,1	18	69,2

The chart 1 demonstrated that it was a high prevalence of depression among the elderly over a year institutionalization (89.5%), followed by 57.1% for those with less than a year of residency.



**DISCUSSION**

Depression in the elderly may arise from the response to a drug, as a result of disease or combination of reasons such as physical or psychosomatic. Multifactorial and is difficult to measure morbidity in all age groups, the elderly, the symptoms are a psychic and somatic, especially with physical complaints, which makes diagnosis and treatment (CUNHA, et al., 2004; GAZALLE, et al., 2004; ROACH, 2003).

The results of this study suggest a high prevalence of depressive symptoms measured by GDS-15. A survey conducted in Salvador, Bahia, by Santana and Barbosa Filho (2007), using the GDS short version with 15 questions, applied to the institutionalized elderly was reported 21.1% rate of depressive symptoms in elderly residents of long-stay institutions . In another study using the GDS - 30, was found that 51% of residents in LSIE (CHELONI et al., 2003). The rates of depressive symptoms in people hospitalized or institutionalized (31%) are higher than among the elderly living in the community - 23% (COUTINHO et al., 2003). Rates similar to those found by Porcu et al. (2002).

Concern about the damage that can lead to the institutionalization of the elderly is reflected in recent government policies, seeking more and more, to encourage these people stay with the family. This position is clearly explicit in the National Policy for the Elderly, Law No. 8842/94 (BRAZIL, 1994) and, more recently, the Statute of the Elderly (BRAZIL, 2003). The latter, when dealing with duties of the company and the government in the elderly, 3rd paragraph determines the "priority assistance for the elderly by their own families, to the detriment of care nursing homes, except those who do not have the need or conditions maintenance of survival.

The rate of depressive symptoms in men and women are not statistically different, as found in studies of Porcu et al. (2002), Cheloni et al. (2003) and Santana and Barboza Filho (2007). But Andrade et al. (2005) found a prevalence of 85.7% of women among elderly respondents with symptoms of depression.

The characteristics of the study population, including age, differ from what the literature has shown, since it is found higher prevalence of depression among younger people - under 65 years (CERQUEIRA, 2003; OLIVEIRA, GOMES & OLIVEIRA, 2006 ). There are also differences in the ratio residence time / depression (ANDRADE et al., 2005). In our study we obtained a greater number of cases of depression among the elderly living in RIAs for over 1 year, however, those institutionalized for less than 1 year had a significant prevalence (57.1%).

We suggest carrying out further research to produce comparative data of the situation of institutionalized elderly in all regions of Brazil, thereby to know whether there are specific concerns related to cultural difference, and studies that encourage early identification of cases, ensuring proper treatment of them.

**CONCLUSION**

This study showed a high prevalence in both sexes, we observed that 80% of elderly men and 75% female predominance symptoms of mild depression in elderly men over the age of 71 years and over year of institutionalization. Thus, this study demonstrates the need for appropriate measures on the diagnosis and treatment in elderly subjects in Natal, whereas

among the various disorders that affect the elderly, depression, often undiagnosed and untreated, deserves special attention because it presents high frequency and negative consequences for the quality of life of affected individuals.

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#### DEPRESSION IN RESIDENTS OF LONG-STAY INSTITUTIONS FOR THE ELDERLY IN THE CITY OF NATAL / RN ACCORDING TO GERIATRIC DEPRESSION SCALE

##### ABSTRACT

**Introduction:** Depression causes physical and psychological harm and negative consequences for the quality of life of affected individuals, thus justifying the conduct of study that seeks to know the prevalence, allowing more appropriate intervention in the diagnosis and treatment. **Objective:** To identify the prevalence of depressive symptoms in residents of institutions for the aged (RIA) and characterize the sociodemographic characteristics associated with depressive symptoms. **Methodology:** A descriptive and quantitative. To collect data we used the Brazilian version of the Geriatric Depression Scale containing 15 questions. The sample consisted of 26 elderly residents of three long-stay institutions for the elderly located in Natal /RN. **Results:** According to the score of the Geriatric Depression Scale, showed that 80% of elderly males had mild and female with 75%. The severe depression in males had no cases, however females had 6.3% of severe depression. **Conclusion:** This study showed a prevalence in both sexes, predominantly mild depression in males and the elderly above 71 years with more than a year of institutionalization. Thus, we suggest further studies to support the idea that the institutionalized elderly are more vulnerable to develop different types depression, requiring intervention that could help mitigate. For being considered a disease that affects humans in its entirety, without separation between the psychological, social and physical, the depression is a morbidity often undiagnosed, despite its relevance.

**KEYWORDS:** Elderly, Depression, Institution for the Aged

## DÉPRESSION CHEZ LES RÉSIDENTS DES ÉTABLISSEMENTS POUR PERSONNES ÂGÉES SELON L'ÉCHELLE DE DÉPRESSION GÉRIATRIQUE

### RÉSUMÉ

**Introduction:** La dépression provoque des dommages physiques et psychologiques et des conséquences négatives pour la qualité de vie des personnes touchées, ce qui justifie la conduite d'études qui cherche à connaître la prévalence, ce qui permet une intervention plus appropriée dans le diagnostic et le traitement. **Objectif:** Déterminer la prévalence des symptômes dépressifs chez les résidents des établissements pour personnes âgées et de caractériser les caractéristiques sociodémographiques associés aux symptômes dépressifs. **Méthodologie:** Un descriptif et quantitatif. Pour recueillir les données, nous avons utilisé la version brésilienne de l'Échelle de dépression gériatrique contenant 15 questions. L'échantillon était constitué de 26 résidents âgés de trois établissements pour personnes âgées situé à Natal /RN. **Résultats:** Selon le score de l'échelle de dépression gériatrique, a montré que 80% des hommes âgés présentaient doux et féminin avec 75%. La dépression sévère chez les garçons n'avaient pas les cas, cependant les femmes avait 6,3% de dépression sévère. **Conclusion:** Cette étude a montré une prévalence dans les deux sexes, la dépression légère prédominance chez les hommes et les personnes âgées plus de 71 ans avec plus d'un an de l'institutionnalisation. Ainsi, nous suggérons de nouvelles études pour appuyer l'idée que les personnes âgées en institution sont plus vulnérables à développer une dépression types différents, nécessitant une intervention qui pourrait aider. À atténuer pour être considérée comme une maladie qui affecte l'être humain dans son ensemble, sans séparation psychologique, social et physique est une morbidité souvent non diagnostiquée, en dépit de sa pertinence.

**MOTS-CLÉS:** âgées, depression, résidents des établissements pour personnes âgées.

## DEPRESIÓN EN LOS RESIDENTES DE INSTITUCIONES PARA LOS ANCIANOS EN CIUDAD DE NATAL/ RN SEGÚN LA ESCALA DE DEPRESIÓN GERIÁTRICA

### RESUMEN

**Introducción:** La depresión causa daños físicos y psicológicos y las consecuencias negativas para la calidad de vida de las personas afectadas, lo que justifica la realización del estudio que pretende conocer la prevalencia, lo que permite una intervención más adecuada en el diagnóstico y tratamiento. **Objetivo:** Determinar la prevalencia de síntomas depresivos en los residentes de instituciones para los ancianos y caracterizar las características sociodemográficas asociadas con los síntomas depresivos. **Metodología:** Estudio descriptivo y cuantitativo. Para recoger los datos se utilizó la versión brasileña de la Escala de Depresión Geriátrica que contiene 15 preguntas. La muestra consistió de 26 residentes mayores de tres instituciones para los ancianos ubicado en Natal /RN. Resultados: De acuerdo a la puntuación de la Escala de Depresión Geriátrica, mostró que el 80% de los pacientes hombres presentaron suave y femenino con un 75%. La depresión severa en los hombres no tenían casos, sin embargo las mujeres tenían 6,3% de depresión severa. **Conclusión:** Este estudio mostró una prevalencia en ambos sexos, predominantemente leve depresión en los hombres y las personas de edad arriba de los 71 años con más de un año de institucionalización. Por lo tanto, le sugerimos otros estudios para apoyar la idea de que los ancianos institucionalizados son más vulnerables a desarrollar diferentes tipos de depresión, que requieren una intervención que podría ayudar a mitigar. Para ser considerado una enfermedad que afecta al ser humano como un todo, sin separación psicológica, social y física es una morbilidad con frecuencia no diagnosticada, a pesar de su relevancia.

**PALABRAS CLAVE:** Ancianos, depresión, residentes de instituciones para los ancianos.

## DEPRESSÃO EM RESIDENTES DE INSTITUIÇÕES DE LONGA PERMANÊNCIA PARA IDOSOS NO MUNICÍPIO DE NATAL/ RN, SEGUNDO ESCALA DE DEPRESSÃO GERIÁTRICA.

### RESUMO

**Introdução:** A depressão acarreta danos físicos e psicológicos e conseqüências negativas para a qualidade de vida dos indivíduos afetados, justificando assim a realização de estudo que busque conhecer a sua prevalência, permitindo intervenções mais adequadas no diagnóstico e tratamento. **Objetivo:** Identificar a prevalência de sintomas depressivos em residentes de instituições de longa permanência para idosos (ILPI) e caracterizar os aspectos sociodemográficos associados à sintomatologia depressiva. **Metodologia:** Estudo descritivo com abordagem quantitativa. Para a coleta de dados foi utilizada a versão brasileira da Escala de Depressão Geriátrica contendo 15 questões. A amostra consistiu em 26 idosos residentes em três ILPI localizadas no município de Natal/RN. **Resultados:** De acordo com a pontuação da Escala de Depressão Geriátrica, observou-se que 80% dos idosos do sexo masculino apresentaram depressão leve e no sexo feminino com 75%. Quanto à depressão grave, o sexo masculino não apresentou casos, no entanto o sexo feminino obteve 6,3% de depressão grave. **Conclusão:** Este trabalho apontou uma prevalência em ambos os sexos, predominado a depressão leve no sexo masculino e nos idosos acima de 71 anos com mais de um ano de institucionalização. Desta forma, sugerimos a realização de novos estudos para subsidiar a idéia de que o idoso institucionalizado é mais vulnerável a desenvolver diferentes tipos de depressão, necessitando de intervenção que possa amenizá-la. Por ser considerada uma doença que afeta o ser humano na sua totalidade, sem separação entre o psíquico, o social e o físico a depressão é uma morbididade freqüentemente não diagnosticada, apesar de sua relevância.

**PALAVRAS - CHAVE:** Idoso, Depressão, Instituição de Longa Permanência para Idosos

PUBLICAÇÃO NO FIEP BULLETIN ON-LINE: <http://www.fiepbulletin.net/80/a1/135>