



Partners in Quality Care

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Mental Health Statistics:

In 2014, about:

- One in five American adults experienced a mental health issue
- One in 10 young people experienced a period of major depression
- One in 25 Americans lived with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression



Objectives:

- Describe mental health
- Describe physical health
- Describe the connection between mental and physical health

In the constitution of The World Health Organization (WHO) principles, it states that health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. With this principle in mind, this newsletter will explore the connection with mental and physical health.

MENTAL HEALTH OVERVIEW

According to the Centers for Disease Control (CDC)-Mental health is “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” It is estimated that only about 17% of U.S adults are considered to be in a state of optimal mental health. ***There is emerging evidence that positive mental health is associated with improved health outcomes. Loneliness and social isolation have both been associated with poor health.***

Mental illness is defined as “collectively all diagnosable mental disorders” or “health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning.” Depression is the most common type of mental illness, affecting more than 26% of the U.S. adult population. It has been estimated that by the year 2020, depression will be the second leading cause of disability throughout the world, trailing only ischemic heart disease.

Mental health has an impact on physical health and vice versa. Evidence has shown that mental disorders, especially depressive disorders, are strongly related to the occurrence, successful treatment, and course of many chronic diseases including diabetes, cancer, cardiovascular disease, asthma, and obesity and many risk behaviors for chronic disease; such as physical inactivity, smoking, excessive drinking, and insufficient sleep.

(<https://www.cdc.gov/mentalhealth/basics.htm>)

PHYSICAL HEALTH OVERVIEW

Physical health takes into account the various body systems and how they are functioning. One indicator of physical health is vital signs which measure temperature, pulse, respirations and blood pressure. Physical health is also looked at in relation to the presence or absence of chronic disease such as diabetes, heart disease, respiratory disease, cancer, and others and how well chronic conditions are managed. You sometimes hear the phrase “I am going for my physical” or “my physical exam” with my physician or health care provider. When you go for a physical exam you usually expect the health care provider to perform an assessment to check for wellness and/or problems with your various body systems while asking you about complaints you may have with pain, discomfort or other indicators of abnormal body function.

Urinary Tract Infections (UTI's) are among the most common infections in the elderly. But the symptoms may not follow the classic pattern. Agitation, delirium, or other behavioral changes may be the only sign of a UTI in elderly men and women. This age group is also more likely to develop serious complications as a result of UTIs.



MENTAL HEALTH and MENTAL ILLNESS

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. Over the course of your life, if you experience mental health problems, your thinking, mood, and behavior could be affected. Many factors contribute to mental health problems, including biological factors, such as genes or brain chemistry; life experiences, such as trauma or abuse; family history of mental health problems. Poor mental health can affect your ability to make healthy decisions and fight off chronic diseases. Mental illness is more than just being depressed. It covers a wide range of problems, spanning from ones that affect mood to those that affect thinking or behavior. Examples include depression, anxiety disorders, schizophrenia, eating disorders, bipolar depression, and addictive behaviors. While anxiety can be a symptom of depression, it can also be a main mental issue for someone. Anxiety and depression can go hand-in-hand; however they can certainly be experienced separately.

PROVIDING ASSISTANCE TO A PERSON WITH A MENTAL ILLNESS:

- As a home care aide, you will work with clients with many different physical ailments and conditions. However, one's physical issues cannot be separated from one's psychological (mental) issues. They are part of a person and make up who that client is.
- Mental illness can affect anyone at any time. It can be chronic and life-long (for example schizophrenia or bipolar disorder), or can affect someone situationally (for example depression can affect a patient when diagnosed with a debilitating medical condition or after the death of a loved one).
- When working with clients, it is important to be open-minded and understanding of their conditions, both physically and emotionally.
- There are certain mental illnesses that you may encounter more than others. If your clients are suffering from a physical, chronic illness, it is not uncommon that they may experience some level of depression.
- If you are assisting a client with a mental illness, talk to your supervisor about the mental illness-what signs to look for regarding a worsening in condition, possible side effects of medications, and how to best assist your client according to their specific mental health condition. Understanding the specific condition and how to work with your client will help you and your client feel more comfortable with the care you provide. Follow the plan of care for your specific client and observe, record and report as directed on the plan of care.
- Assist the client as you would any other client-be sure the client gets plenty of rest, eats well balanced meals, is physically cared for the best way possible, stays mentally active, has activities to do, spends time with others, etc. If a client's life is stable and in order, it will help with the potential mental turmoil they may be experiencing.

Suicide is the 10th leading cause of death in the United States. It accounts for the loss of more than 41,000 American lives each year, more than double the number of lives lost to homicide.

The toll-free, 24-hour National Suicide Prevention Lifeline: **1-800-273-TALK (1-800-273-8255)** or **1-800-799-4TTY (1-800-799-4889)**.

- Depression, especially in middle-aged or older adults, can co-occur with other serious medical illnesses such as diabetes, cancer, heart disease, and Parkinson's disease.
- Depression can make these conditions worse and vice versa. Sometimes medications taken for these physical illnesses may cause side effects that contribute to depression.
- A doctor experienced in treating these complicated illnesses can help work out the best treatment strategy.

Depression and Aging

Depression is a common problem among older adults, but it is NOT a normal part of aging. In fact, studies show that older adults feel satisfied with their lives, despite having more illnesses or physical problems. However, important life changes that happen as we get older may cause feelings of uneasiness, stress, and sadness. For instance, the death of a loved one, moving from work into retirement, or dealing with a serious illness can leave people feeling sad or anxious. After a period of adjustment, many older adults can regain their emotional balance, but others do not and may develop depression.

Recognizing Symptoms of Depression in Older Adults

Depression in older adults may be difficult to recognize because they may show different symptoms than younger people. For some older adults with depression, sadness is not their main symptom. They may have other, less obvious symptoms of depression, or they may not be willing to talk about their feelings. Therefore, doctors may be less likely to recognize that their patient has depression. Sometimes older people who are depressed appear to feel tired, have trouble sleeping, or seem grumpy and irritable. Confusion or attention problems caused by depression can sometimes look like Alzheimer's disease or other brain disorders. **Older adults also may have more medical conditions, such as heart disease, stroke, or cancer, which may cause depressive symptoms.** Or they may be taking medications with side effects that contribute to depression.

Types of Depression

There are several types of depressive disorders.

Major depression involves severe symptoms that interfere with the ability to work, sleep, study, eat, and enjoy life. An episode can occur only once in a person's lifetime, but more often, a person has several episodes.

Persistent depressive disorder is a depressed mood that lasts for at least 2 years. A person diagnosed with persistent depressive disorder may have episodes of major depression along with periods of less severe symptoms, but symptoms must last for 2 years to be considered persistent depressive disorder. Other forms of depression include psychotic depression, postpartum depression, and seasonal affective disorder.

Causes and Risk Factors for Depression

Several factors, or a combination of factors, may contribute to depression.

- **Genes**—People with a family history of depression may be more likely to develop it than those whose families do not have the illness.
- **Personal history**—older adults who had depression when they were younger are more at risk for developing depression in late life than those who did not have the illness earlier in life.
- **Brain chemistry**—People with depression may have different brain chemistry than those without the illness.
- **Stress**—Loss of a loved one, a difficult relationship, or any stressful situation may trigger depression.

For older adults who experience depression for the first time later in life, the depression may be related to changes that occur in the brain and body as a person ages. For example, older adults may suffer from restricted blood flow, a condition called ischemia. **Over time, blood vessels may stiffen and prevent blood from flowing normally to the body's organs, including the brain. If this happens, an older adult with no family history of depression may develop what is sometimes called "vascular depression." Those with vascular depression also may be at risk for heart disease, stroke, or other vascular illness.**