

Hospitalization increases risk of depression and dementia for seniors

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People over age 65 who have been hospitalized are at significantly greater risk for dementia or depression, finds a new study in *General Hospital Psychiatry*.

"There appears to be a bidirectional relationship between adverse mental health and bad medical outcomes," said lead study author Dimitry Davydow, M.D., a psychiatrist at the University of Washington. Among [older people](#), [dementia](#) and [depression](#) appears to increase the risk of hospitalization, which might lead to further [cognitive decline](#) or depression and subsequent risk for re-hospitalization, perpetuating a vicious cycle, Davydow explained.

Davydow and colleagues from the University of Michigan analyzed data from the National Health and Aging Trends Study, a nationally representative sample of nearly 7200 community-dwelling adults ages 65 years and older. They found that an estimated 3.1 million older Americans—1 in 12—may have dementia while approximately 5.3 million—1 in 7—may have depression. Another 5 million may have milder cognitive impairment, said Davydow.

The researchers also found that those who were hospitalized for a medical or surgical condition in the previous year had about a 40 percent greater risk of dementia, and a 60 percent greater risk of depression.

"You're talking about 13 million Americans who are potentially at risk—they're more likely to have chronic medical problems and because of their depression and/or cognitive impairment, are less able to adequately care for themselves, more likely to be hospitalized and more likely to have bad outcomes after their hospitalization," Davydow said.

"The 3 Ds—dementia, depression, and delirium—are thought to both lengthen the stay of older patients who are already hospitalized and contribute to re-hospitalization," commented David Steffens, MD, president of the American Association for Geriatric Psychiatry. Steffens also said that hospitalizations and re-hospitalizations in older adults with cognitive deficits and depression are also a huge financial strain on healthcare systems, particularly Medicare.

Both Davydow and Steffens agreed that screening for these conditions and providing interventions for patients and their caregivers has the potential to not only improve quality of care but reduce costs as well. "That kind of approach is good for the patient and good for society," said Steffens.

More information: Davydow DS, Zivin K, and Langa KM.

"Hospitalization, depression and dementia in community-dwelling older Americans: findings from the National Health and Aging Trends Study." Gen Hosp Psychiatry. 2014. [www.ghpjournal.com/article/S01 ... \(13\)00345-9/abstract](http://www.ghpjournal.com/article/S01... (13)00345-9/abstract)

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