# Depression and an ageing population



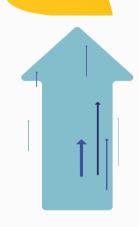
**Major depressive disorder** (MDD) and **dementia** commonly **co-occur** within the ageing population and their overlap is complex<sup>1,2</sup>



MDD is a risk factor for dementia, although depression can appear years before other symptoms of dementia<sup>3</sup>



Patients with depressive symptoms have a **1.2–2.4x** increased risk of developing dementia<sup>4–8</sup>



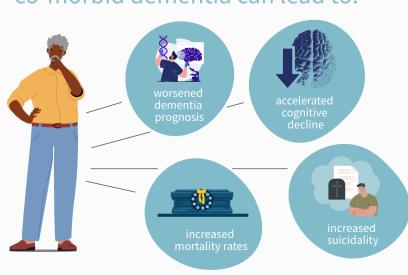
MDD and co-morbid dementia can reduce QoL and have a negative impact on caregiver burden<sup>9,10</sup>

54

%

Patients with co-morbid depression and dementia have a **54%** lower QoL than the general older adult population<sup>9</sup>

### **Inadequate treatment** of MDD and co-morbid dementia can lead to:<sup>11-15</sup>



#### Non-pharmacological approaches

in the treatment of depressive symptoms in dementia:16,17



Cognitive stimulation



Occupational therapy



Massage/touch therapy



Exercise and social interaction/cognitive stimulation



Multidisciplinary care



Reminiscence therapy

## Treating patients with MDD and co-morbid dementia can be challenging<sup>17-20</sup>



Depression with Alzheimer's disease is under-diagnosed as:17



Cognitive symptoms related to depression undermine neuropsychological assessment<sup>19</sup>



MDD features/functional impairments may be less noticeable<sup>18</sup>

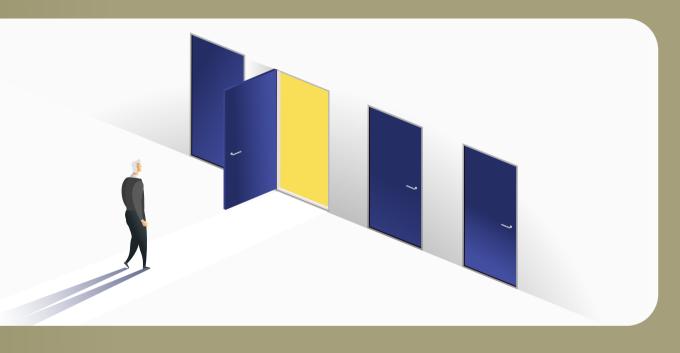


**Symptoms** of depression are **underestimated**<sup>20</sup>

There is **limited evidence** supporting the efficacy of antidepressants in patients with MDD and co-morbid dementia<sup>21</sup>



Depression should not automatically be assumed to be an inevitable "part of dementia" 22



#### References

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