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RESEARCH ARTICLE

ASSESSMENT OF COGNITIVE IMPAIRMENT, QUALITY OF LIFE, IN DEPRESSED GERIATRIC PATIENTS ATTENDING TERTIARY CARE HOSPITAL

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ABSTRACT

People aged 60 years and above are defined as Geriatric people. According to community based mental health, prevalence of depressive disorders in elderly Indian population varies between 13% and 25%. Previous research reported a 15.7% prevalence of cognitive impairment among urban population aged 60 year old and above in India. Persistent depression has shown significant association with cognitive decline in perspective study. Treatment of depression positively affects quality of life in old age patient.

Objectives

- To assess severity of depression, To assess presence of cognitive impairment, To assess quality of life, To assess correlation of cognitive impairment and quality of life

Methods

- Geriatric Depression Scale, Standardized Mini Mental State Examination, WHO Quality Of Life

Result

- Geriatric depression and severity: Out of 100 patient, 57 had mild depression and 43 had severe depression; Male (N= 47) and Female (N= 53)
- Cognitive impairment in geriatric depressed patient (N = 100) : 53 had no cognitive impairment (MMSE >23) , 29 had mild cognitive impairment (MMSE 19-23) , 14 had moderate cognitive impairment (MMSE 10-18) , 4 had severe cognitive impairment (MMSE <10).
- Quality of life in depressed geriatric patients: In physical health 52% , In psychological health 43 % . In social health 55%, In environmental health 57% had Good Quality of Life.

Conclusion

- More cognitive impairment is seen in severely depressed geriatric patient and quality of life is also poor in depressed geriatric patients.

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INTRODUCTION

People aged 60 years and above are defined as Geriatric people ("WHO | Definition of an older or elderly person, 2016) Due to available health care increasing number of people are living beyond age 60 (MOHFW, 2011). World Health Organization estimated that the overall prevalence rate of depressive disorder among the elderly generally varies between 10% and 20% depending on cultural situations (Rangaswamy, 2001). According to community based mental health, prevalence of depressive disorders in elderly Indian population varies between 13% and 25 % (Nandi, 1976; Ramachandran, 1982). Independent studies clearly showed cognitive function decline with increasing age (Deary, 2009; Glisky, 2007).

Previous research reported a 15.7% prevalence of cognitive impairment (10.5% mild impairment, 5.2% moderate to severe impairment) among urban population aged 60 year old and above in India (Folstein, 1975). Persistent depression has shown significant association with cognitive decline in perspective study (Patemit, 2002).

In community samples, the co-occurrence of depression and cognitive impairment doubles every 5 years after the age of 60 years, and they are estimated to co-occur among at least 25% of persons older than 85 years (Arve, 1999). Quality of life can be seen as a complex interaction between the individual and factors in his environment from objective and subjective view (De Levan, 1999).

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MATERIAL AND METHODS

Inclusion criteria:

- Patient attending psychiatric OPD having age > 60 years.
- Geriatric Depression Scale score > 10.

Exclusion criteria

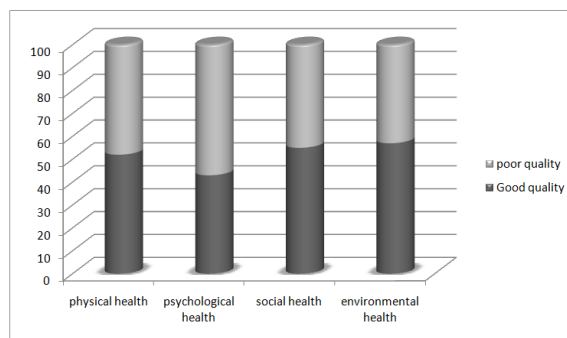
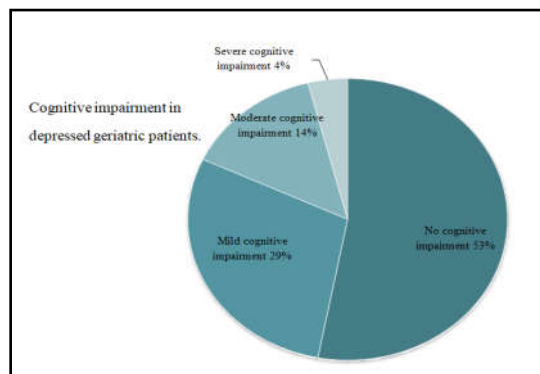
- Geriatric Depression Scale score < 10.
- Presence of active psychotic symptoms.
- Patient with acute confusion state due to general medical condition, substance intoxication or withdrawal.

Instrument

- Geriatric Depression Scale
- Standardized Mini Mental State Examination
- WHO Quality of Life

RESULTS AND DISCUSSION

Geriatric depression and severity: Out of 100 patients, 57 had mild depression and 43 had severe depression, Out of 100 patients 47 were male and 53 were female. Cognitive impairment in geriatric depressed patients (N = 100): 53 had no cognitive impairment (MMSE >23), 29 had mild cognitive impairment (MMSE 19-23), 14 had moderate cognitive impairment (MMSE 10-18), 4 had severe cognitive impairment (MMSE <10). Quality of life in depressed geriatric patients: In physical health 52%, in psychological health 43%, in social health 55%, in environmental health 57% of patients had Good Quality of Life, while in physical health 48%, in psychological health 57%, in social health 45%, in environmental health 43% of patients had bad quality of life. In present study, majority of patients (65%) were between 61 to 70 years of age. 35% patients were of more than 70 years. In present study, severe depression was found more in age group between 70 to 75 years. (50%) Da Canhota CM et al. (2005) also found more severe depression in those who were above 70 years of age.



Conclusion

More cognitive impairment is seen in severely depressed geriatric patients, Quality of life is poor in depressed geriatric patients, Impairment seen in all domains, psychological health being most commonly affected.

REFERENCES

"WHO | Definition of an older or elderly person". *Who.int*. Retrieved 2016-04-04.

Arve S, Tilvis RS, Lehtonen A, et al. Coexistence of lowered mood and cognitive impairment of elderly people in five birth cohorts. *Aging Milano*. 1999;11:90-95

De Levan N. 1999, Quality of life and depression: Symmetry concepts: *Quality of life research* 1999; 8, 283-29

Deary J, Corley J, Gow AJ, Harris SE, Houlihan LM, et al. 2009 Age-associated cognitive decline. *British Medical Bulletin* 92: 135-152. [PubMed] [Google Scholar]

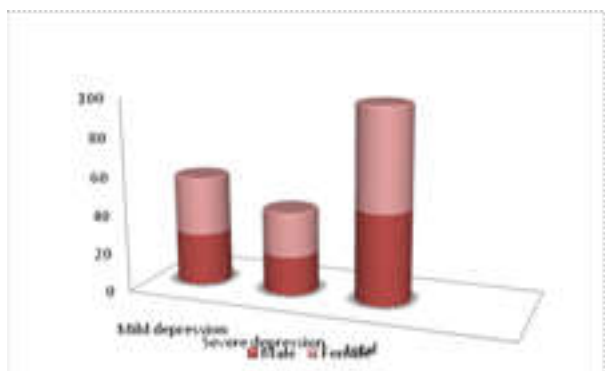
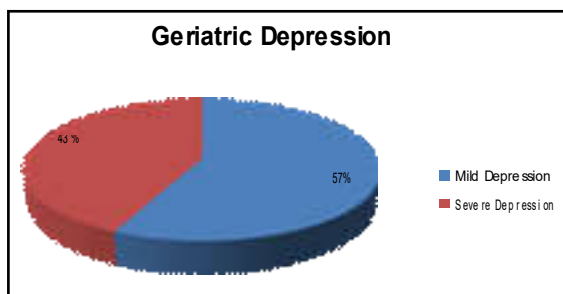
Folstein, M.F., Folstein S.E., McHugh, P.R. 1975. "Mini-mental state". A practical method for grading the cognitive state of patients for the clinician. *Journal of Psychiatric Research* 123, 189-198

Glisky EL 2007 Changes in cognitive function in human aging In *brain aging: Models, methods, and mechanisms*. CRC Press, Boca Raton FL, USA: pp: 3-20

MOHFW. Ministry of health and family welfare. New Delhi: Director General of Health Services, Government of India; 2011. National Program for Health Care of the Elderly NPHCE: Operational Guidelines 2011.

Nandi DN, Ajmany S, Ganguli H, Banerjee G, Boral GC, Ghosh A, et al. The Incidence of mental disorders in one year in a rural community in West Bengal. *Indian J Psychiatry*. 1976;18:79-87.

Patemiti, S., Verdier-Taillefer, M., Dufouil, C., & Alperovitch, A. 2002. Depressive symptoms and cognitive decline in elderly people. *The British Journal of Psychiatry*, 181, 406-410.



Ramachandran V, Menon SM, Arunagiri S. Socio-cultural factors in late onset depression. *Indian J Psychiatry*. 1982;24:268-73

Rangaswamy SM, editor. Geneva, Switzerland: World Health Organization; 2001. The World Health Organization WHO. World Health Report: Mental Health: New Understanding New Hope. World Health Day, 2001. *Indian J Psychiatry*. 2001;43:1-4
