

# *What is Normal Aging?*



# Learning objectives

Through this workshop you will be able to

- Recognize normal aging
- Recognize common experiences of aging including adjustments to change and loss
- Identify the stages of grief with an emphasis on the unique nature of grief in older adults
- Use techniques to support the emotional and adjustment of older adults to the experience of aging
- Identify the causes of depression and respond to the signs and symptoms suggesting depression
- Respond to difficult behavior changes of older family members

Note: The information in this education program is to provide general information and raise awareness. Only a licensed medical professional can make a diagnosis and provide treatment.

# Change and experience of loss

- Aging means change - physical, psychological, relationships, social, environment, situation, behavior, spiritual, and intellectual.
- Everyone adjusts to aging differently
- People who did not like change when they were younger don't generally like it any better as they age
- The challenge for older adults (and their caregivers) is accepting and adjusting to changes or building "resilience"

# Common changes

- Retirement
- Physical changes of vision, hearing, taste, touch, and smell
- Health
- Mobility
- Memory
- Death of spouse, other family, and friends
- Home and personal possessions
- Income

# Loss experience

Many older adults feel they are losing

- Independence
- Self-esteem
- Image
- Confidence
- Respect



# Older adult response to loss or change

- Physical complaints
- Denial
- Guilt
- Loneliness
- Sense of helplessness
- Overly-critical, suspicious, paranoid behaviors
- Rigidity
- Stubbornness
- Selective memory
- Regression to an early stage
- Reminiscence
- Rage
- Depression and anxiety
- Grief

# Grief

- Grief starts when loss is experienced & the relationship changes due to the illness or injury
- Everyone experiences loss & grief differently
  - Emotional release: crying, angry outbursts, and other behavior
  - Loneliness and a sense of isolation
  - Physical symptoms: headaches, muscle aches and pains; more frequent colds or other distress
  - Panic
  - Guilt related to the loss
  - Hostility
  - Feel 'stuck' and unable to resume usual activities

# Signs and symptoms suggesting depression

A pattern of several symptoms most of the time and nearly every day for several weeks

- Depressed mood
- Feelings of worthlessness, hopelessness, helplessness, and/or inappropriate guilt
- Changes in eating habits with significant weight loss or gain
- Changes in sleeping habits (sleeping too little; disturbed sleep; or sleeping too much)
- Decreased energy or increased fatigue
- Change in movement – either slowed or agitated

# Signs and symptoms suggesting depression,<sup>2</sup>

- Inability to concentrate or make decisions
- Memory loss, confusion, disorientation
- Irritability, short-temperedness
- Persistent sadness or anxiety
- Neglect of self care
- Too much concern with physical problems
- Chronic aches or pains not related to diagnosed illness
- Loss of pleasure in daily activities
- Withdrawal from usual activities and relationships

# Possible causes of depression

Losses - may be manageable by themselves, but overwhelming when combined with other losses

- Loved ones
- Health
- Physical strength and stamina
- Financial stability and independence
- Rewarding job/career
- Increased family responsibilities
- Physical Illness

# Possible causes of depression,<sup>2</sup>

- Research has established a clear link between brain chemistry and depression
- Medical illnesses can increase the likelihood of depression
- Known causes include Parkinson's disease, thyroid changes, strokes, diabetes, and certain forms of cancer
- Hormonal changes
- Medications
  - Some blood pressure medications increase risk
  - Medication interactions may cause side effects that can trigger depression

# Possible causes of depression, 3

- Lack of physical activity
- Lack of emotional and social outlets
- Poor stress management tools
- History of a major depression increases risk of recurrence
- Family history of depression
- Substance abuse: alcohol, prescription and non-prescription drugs

# How common is depression in older adults?

- As many as 65% of older adults may have depression, do not realize they are depressed, and/or do not seek treatment
- Often goes undiagnosed because person or family will not report symptoms or deny the signs are a problem
- Doctors may not know to look for the signs
  - Few doctors specialize in older adult medicine and may assume symptoms are signs of normal aging

# How common is depression in older adults? 2

- Significantly more women than men report symptoms
- National Institute of Mental Health study suggests
  - 2-3% living in the community not in hospitals or nursing homes
  - 8-10% who go to primary care hospitals and clinics
  - Between 20-25% in hospitals
  - 33% living in nursing homes

For more information:

[www.aagpgpa.org/p\\_c/depression.asp](http://www.aagpgpa.org/p_c/depression.asp)

# Treatment

## American Association for Geriatric Psychiatry

- Depression is one of the most successfully treated illnesses, usually with medication
- When properly diagnosed and treated, more than 80% improve
- Untreated, depression is likely to persist and may cause
  - Distress
  - Disability
  - Wasted health care dollars
  - Substance abuse
  - Increased risk for suicide
  - Medical complications of chronic illness or even death

# Suicide rates and older adults

- Depression is the most common risk factor for suicide
- Older adults have the highest suicide rate of any group in America – 50% higher than the general population
- Each year, 6,000 older Americans kill themselves
- Older adults are less likely than younger people to seek or respond to offers of help designed to prevent suicide
- Older adults make fewer suicide gestures but more often succeed at suicide attempts, planning over a period of time
- The highest rates of suicide occur in persons over age 70

*As many as 70% of older persons who completed suicide visited their primary care doctor within the previous 4 weeks. As many of 40% saw a doctor within the week before the suicide.*

# Suicide rates and older adults,<sup>2</sup>

## Gender, Race/Ethnicity

- Suicide rates do not increase with age among women
- White men - 45% more common among those aged 65 to 69 years, 85% more common among those aged 70 to 74, and more than three and a half times more common among those 85 and older than among white men aged 15 to 19 years
- Suicide rates among black men peak late in life
- No data found for older Hispanic/Latino older male suicide

# Risk of suicide

- A pattern of behavior over a period of time
- Talk about or preoccupation with death
- Give away prized possessions
- Take unnecessary risks
- Have had a recent loss or expect one
- Increase use of alcohol, drugs or other medications
- Fail to take prescribed medicines or follow required diets

# Risk of suicide, 2

- Acquire a weapon
- Make comments such as "my family would be better off without me"
- Neglect self-care and personal hygiene
- Take a sudden interest in putting affairs in order
- Give away possessions (although sometimes older adults begin to "pass along" family items which may be normal)
- Take a sudden interest or disinterest in religion

# Dealing with Depression

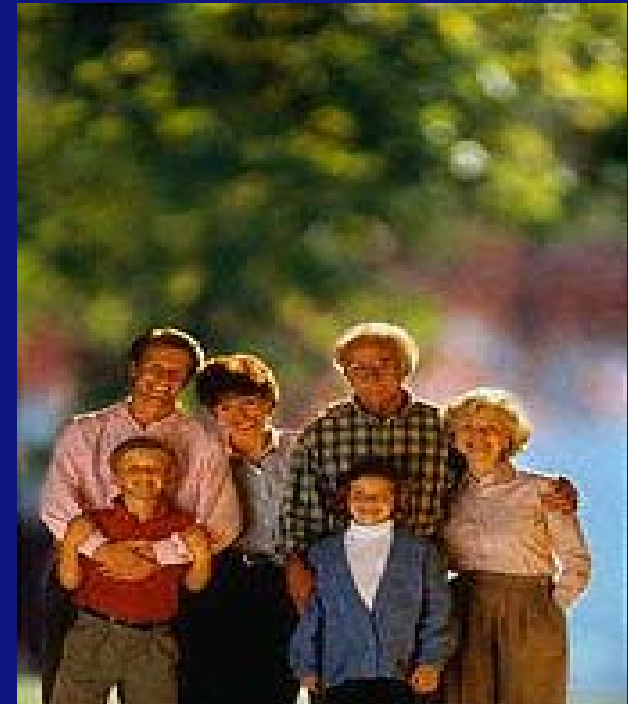
- Recognize signs and symptoms
- Don't accept that depression is normal as people grow older
- Avoid use of term 'depression' when talking with older adults; focus on symptoms
- Most importantly, seek treatment

# Involve a doctor and get treatment

- Talk to a physician
  - Ask about possible side effects of medications
  - Talk about changes in how the person is feeling and changes in usual behavior and routines
  - Ask about a referral to a mental health professional who understands older adults
- Medications can be very successful
- Find support systems from friends, family and the community

# Behavior changes and what to do

- Changes in a person's usual behavior and routine can indicate a change in health and mental status
- Be observant and think about what the behavior may mean
- Practical steps to take



# Difficult behaviors

- Restlessness
- Agitation
- Combativeness, aggressiveness
- Restlessness and wandering
- Mood swings
- Hallucinations
- Mistrust
- Over-controlling behavior
- Critical and Demanding behavior



# Possible causes of difficult behaviors and how to cope

Look for the cause of the behavior, including major changes and losses

- Pain, undiagnosed physical illness such as constipation, urinary tract infections, dehydration, etc
  - Watch for signs of pain or illness and seek medical care
- Medication side effects
  - Ask the doctor to change the dosage or switch to another medication
- Lack of proper nutrition - Is it related to physical illness or that food does not taste good?
  - Make sure dentures are properly fitted
  - If cooking is a problem, check with the Area Agency on Aging about congregate meals in senior centers or home delivered meals through Meals on Wheels

# Is it normal aging or dementia or Alzheimer's Disease?

## The Normal Aging Brain

- Age of loss varies with individual, although not much loss before age of 70
- Some memory loss is normal but gradual - "Senior Moments" and "It's on the tip on my tongue"
- Short term memory most affected
- Long term memory least affected
- Forget names but not faces

# Is it normal aging or dementia or Alzheimer's Disease? <sup>2</sup>

- Confuses timing of events
- Affected by
  - Poor nutrition
  - Life long stress
  - Other illnesses such as Parkinson's Disease
  - Depression
  - Alcoholism

# Dementia

- Neurological disorder that causes general and progressive problems affecting
  - Memory
  - Learning new information
  - Communicating
  - Making good judgments
  - Coordination
- Usually accompanied by personality and behavior changes

# Dementia, 2

- Onset is gradual
- Condition gets progressively worse
- Other medical conditions such as hypothyroidism and B12 deficiency are ruled out

# Alzheimer's Disease

- Disease of the brain
- Causes injury to nerve cells in the brain
- Results in disrupted memory, thinking and functioning
- Everyone who has Alzheimer's Disease has dementia
- Not everyone who has dementia has Alzheimer's Disease
- Not the same progression for everyone but predictable stages
- Somewhat greater risk for people with family history of Alzheimer's Disease

# Possible causes of difficult behaviors and how to cope

**Uncomfortable environment** – Is it too cold, hot, bright, loud, etc?

- Adjust the temperature, dim lights, close blinds, turn volume down

## **Fatigue**

- Provide an atmosphere and opportunity for rest. Ask the doctor if medication might be appropriate

**Sensory loss** - Visual problems or hearing loss may result in hearing or seeing things. Insufficient lighting may play tricks. Unfamiliar noises or changes in the surrounding may lead to fear

- Provide corrective lenses or hearing aids as needed

# Possible causes of difficult behaviors and how to cope,<sup>2</sup>

## Lack of activity

- Encourage physical activity as tolerated

## Feelings of powerlessness and loss of control

- Provide assistive devices and allow the elder to make choices as appropriate

## Confusion or memory Loss

- Maintain a calm environment and reassure the person.  
Use memory aids

# Possible causes of difficult behaviors and how to cope,<sup>3</sup>

- Be consistent
  - Keep household furnishings and objects in the same place
  - Do things the same way at the same time each day
  - When changes must be made, prepare and support the elder

# Caregivers help older adults

- Helping maintain independence and self-sufficiency
- Reducing risk
  - Health: regular checkups and immunizations to prevent illness: influenza, tetanus, and others; dental care; diet and exercise (stretching, balance, endurance, and strength)
  - Safety: removing obstacles to prevent falls, checking smoke alarms, checking water temperature; regular driving tests, monitoring citations, observing affects of alcohol
- Using health care, family and community support
- Increasing knowledge of illness or disability

# Caregivers help older adults, 2

- Reinforcing a sense of productivity and involvement
- Helping make choices to determine the course of his/her own life
- Being supportive
- Bringing a positive attitude
- If necessary, learning how to perform first aid and CPR; lift without injury; use hoist and chair lifts; do bed transfers and use bathroom chairs
- *Taking care of yourself and clearly defining your role and limitations*
- Use resources such as Area Agency on Aging

## When I Am Old....

When I am old I shall wear purple.  
With a red hat that doesn't suit me.  
And I shall spend my pension on brandy and summer  
gloves.  
And satin sandals, and say we've no money for butter.  
I shall sit down on the pavement when I'm tired.  
And gobble up sample in shops and press alarm bells.  
And run my stick along public railing.  
And make up for the sobriety of my youth.  
I shall go about in my slippers in the rain.  
And pick the flowers in other people's gardens.  
And learn to spit.  
But maybe I ought to practice a little now,  
So people who know me are not too shocked and surprised.  
When suddenly I am old and start to wear purple.

*-Jenny Joseph*

# Resources For Caregivers

## Call

- 2-1-1 throughout Texas. Provides information and access to health and human service information for all ages
- 1-800-252-9240 to find local Texas Area Agency on Aging
- 1-800-677-1116 - Elder Care Locator to find help throughout the U.S.

## Online

- Family Caregivers Online [www.familycaregiversonline.net](http://www.familycaregiversonline.net)
- Online education, resources, links, frequently asked questions
- Benefits Check-up [www.benefitscheckup.org](http://www.benefitscheckup.org) for an online way to determine benefits for which someone qualifies.

To schedule a caregiver presentation for your church, business, library, civic group, or other

- Contact Zanda Hilger, (817) 581-5890



## Family Caregivers Online

An education and information resource for family caregivers of older adults

### To Increase Text Size



### Tools

[Fact Sheets](#)

[Worksheets / Documents](#)

[Legal Forms](#)

### Resources

[Phone Numbers](#)

[Links](#)

[FAQs](#)

[Online Caregiver Education](#)

[Seminar Schedule](#)

### Publications

[Monthly Publication](#)

[Senior News Source](#)

[For Employers / HR Professionals](#)

[en Espanol](#)

[Contact Us](#)

You are a caregiver if you are a relative or friend who helps someone age 60 and older with physical care, emotional support, daily activities, managing medications, doctor visits, shopping, legal issues or financial matters.

As a service of the Area Agencies on Aging this site provides education and resources for caregivers of older adults.

*Funded by the Texas Department of Aging and Disability Services (DADS) through the following local area agencies on aging*

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# What assistance is available through the Area Agency on Aging (AAA)?

## Caregiver Services

- Information and referral
- Caregiver education and training
- Caregiver respite
- Caregiver support coordination
- Case management
- Transportation assistance

## Services for persons age 60 and older

- Benefits counseling
- Ombudsman - advocacy for those who live in nursing homes and assisted living facilities
- Home delivered meals
- Congregate meals
- Light housekeeping

- Written by: Zanda Hilger, M. Ed., LPC, Family Caregiver Education, Area Agency on Aging, Revised 2007.
- Includes materials adapted from As People Grow Older, Jane Oderberg and Sue Smith, 1995.

# Sources

- [www.Feelingblue.com](http://www.Feelingblue.com) (The Aurora Depression Self-Test)
- [www.Depression-screening.org](http://www.Depression-screening.org) (sponsored by the National Mental Health Association)
- For free brochures on depression and its treatment, call 1-800-421-4211. Brochures are also available online at [www.nimh.nih.gov/publicat/depressionmenu.cfm](http://www.nimh.nih.gov/publicat/depressionmenu.cfm)
- For a free brochure, "Depression: A Serious but Treatable Illness", call 1-800-222-2225
- Go to [www.familycaregiversonline.net](http://www.familycaregiversonline.net) for more information about this and Other training programs; internet links; frequently asked caregiver questions; legal forms; phone numbers; fact sheets; and more