

A Study on Phenomenology of Depression in different age groups

Dr. Bondona Timungpi¹, Dr. Priyaranjan Avinash², Dr. Anantprakash Saraf³

¹(Deptt. of Psychiatry, LGBRIMH, Tezpur, Assam, India)

²(Deptt. Of Psychiatry, LGBRIMH Tezpur, Assam, India)

³(Deptt. Of Psychiatry, LGBRIMH Tezpur, Assam, India)

Abstract:

Background: Depression has been viewed as a heterogeneous condition, with differences in phenomenological and psychopathological aspects with respect to age, sex and other socio-demographic variables. Possible reasons for differential presentations may be age or sex related biological factors; also psychological and socio-cultural factors. Many studies have been conducted throughout world to determine and delineate these factors, with variable results.

Materials and Methods: A total of 96 patients (39 males and 57 females) diagnosed as Depressive episode (uni-polar major depression) according to the ICD-10 criteria, were administered Hamilton Depression Rating Scale (HAM-D17). Various phenomenological factors were correlated with socio-demographic variables and significance was determined by Pearson's Chi-square test.

Results: statistical analysis revealed age is significantly correlated with genital symptoms (p =correlated with genital symptoms ($p=0.005$); psychic anxiety ($p=0.011$) and somatic anxiety ($p=0.021$); with decrease in these symptoms as the age progresses. Also the severity of depression was found to be less with increasing age ($p=0.013$). Females were found to be more likely to report somatic symptoms, both gastrointestinal ($p=0.007$) and general ($p=0.038$). Suicidality, guilt feelings and agitation symptoms were found to be reported less by older depressives. Symptoms of suicidal feelings, agitation and anxiety (both psychic and somatic) were found more common in females and they were more likely to have severe depression. Unemployed were more likely to be depressed. Severity of depression was found to be less in married male as compared to married females, but this was not statistically significant.

Conclusion: Our study has found heterogeneity in presentations of depression with age, sex and socio-demographic variables; somatic symptoms in females were more irrespective of age.

Key Word: Depression; Symptoms; Age; Sex; HAM-D17.

Date of Submission: 11-02-2020

Date of Acceptance: 26-02-2020

I. Introduction

Depression has been viewed as a heterogeneous condition, with differences in phenomenological and psychopathological aspects with respect to age, sex and other socio-demographic variables³. Prevalence of major depression is lower in later life lead to discussions whether depression manifests itself differently in older adults (like non-dysphoric depression). Possible reasons for differential presentations may be age or sex related biological factors; also psychological and socio-cultural factors^{4,5}. Many studies have been conducted throughout world to determine and delineate these factors, with variable results. The rationale for our current study lies in the conceptualization of depression across different age groups and gender in northeast-east India.

II. Material And Methods

This is a cross-sectional study carried out in Lokopriya Gopinath Bordoloi Regional Institute of Mental Health, Tezpur, India from September 2014 to January 2015. Sample collection was done on OPD basis. Informed consent was taken before proceeding for sample collection. Semi structured Socio-demographic proforma used in the Institute was applied and HAM-D17.

Study Design: Descriptive study

Study Location: LGBRIMH, Tezpur, Assam is a specialized mental health care Institute.

Study Duration: September 2014 to January 2015.

Sample size: 96 patients.

Sample procedure: Purposive sampling.

Subjects & selection method: The study population was drawn from consecutive patients diagnosed as Depressive episode (unipolar depression) according to ICD-10, who have visited LGBRIMH, Tezpur during five

month study period. A total of 96 patients (39 males and 57 females) participated in the study. Three age groups were decided i.e. 18-39 years, 40-59 years and 60 years and above; keeping at least 30 patients in each group.

Inclusion criteria:

1. Patient diagnosed as F 32 according to ICD- 10 criteria.
2. Either sex
3. Aged \geq 18 years,.

Exclusion criteria:

1. Bipolar depression
2. Patients with co-morbid physical illness

Procedure methodology

After obtaining informed consent from patients, semi-structured socio-demographic proforma was applied to determine factors associated with depression. The Hamilton Rating Scale for Depression also called HAM-D17, containing 17 items was used to rate the severity of their depression by probing mood, feelings of guilt, suicide ideation, insomnia, agitation, anxiety, weight loss, and somatic symptoms. It is a questionnaire designed for adults. The scoring was obtained and various phenomenological factors were co-related with socio-demographic variables and significance was determined by Pearson's Chi-square test. Comparison among the three age groups was done. Comparison was done based on gender; however not based on different age groups.

Statistical analysis

Statistical analysis of the data was done with the help of SPSS 20. Phenomenological factors were correlated with socio-demographic variables. Significance was determined by Chi-square test. The level $P < 0.05$ was considered as the cutoff value or significance. Mean age is 47.09 with standard deviation 17.132. Gender predominance of females about 58.5%; and 73.4% sample were married. Symptoms severity of depression on HAM-D and the percentage of distribution in different age groups was determined.

III. Result

Statistical analysis revealed age is significantly correlated with genital symptoms (p =correlated with genital symptoms ($p=0.005$); psychic anxiety ($p=0.011$) and somatic anxiety ($p=0.021$); with decrease in these symptoms as the age progresses. Also the severity of depression was found to be less with increasing age ($p=0.013$). Females were found to be more likely to report somatic symptoms, both gastrointestinal ($p=0.007$) and general ($p=0.038$). Suicidality, guilt feelings and agitation symptoms were found to be reported less by older depressives. Symptoms of suicidal feelings, agitation and anxiety (both psychic and somatic) were found more common in females and they were more likely to have severe depression. Unemployed were more likely to be depressed. Severity of depression was found to be less in married male as compared to married females, but this was not statistically significant

Table no 1: AGE

Mean	47.09
Std. Deviation	17.132
Range	67
Minimum	18
Maximum	85

Table no 2: EDUCATION

Illiterate	38	40.4 %
Up to HSC	46	48.9 %
Graduation & above	10	10.6 %

Table no 3: OCCUPATION

Employed	8	8.5 %
Self-employed	24	25.5 %
Unemployed	62	66.0 %

Diagram no. 1: Showing number of participants in different age groups.

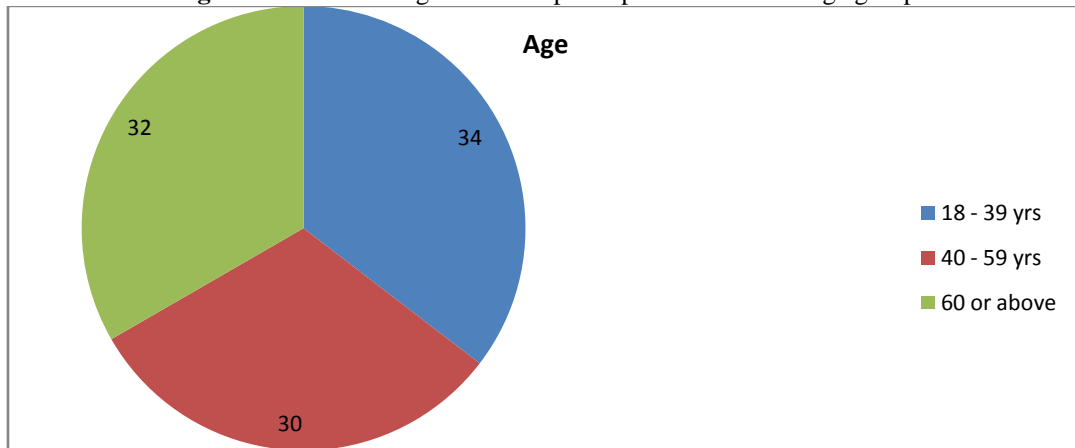


Diagram no. 2: Shows percentage of symptom severity in study population.

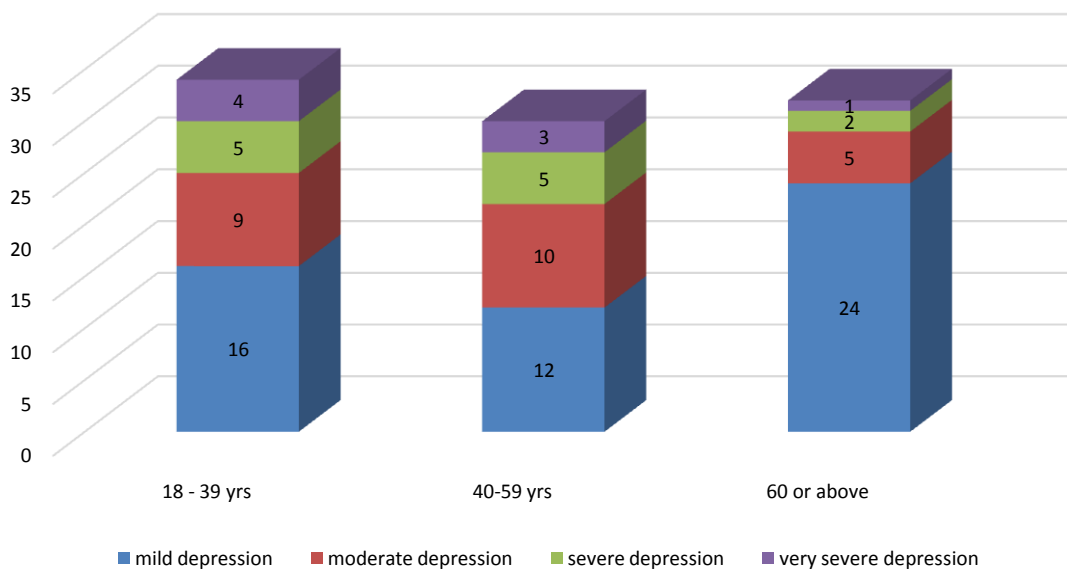
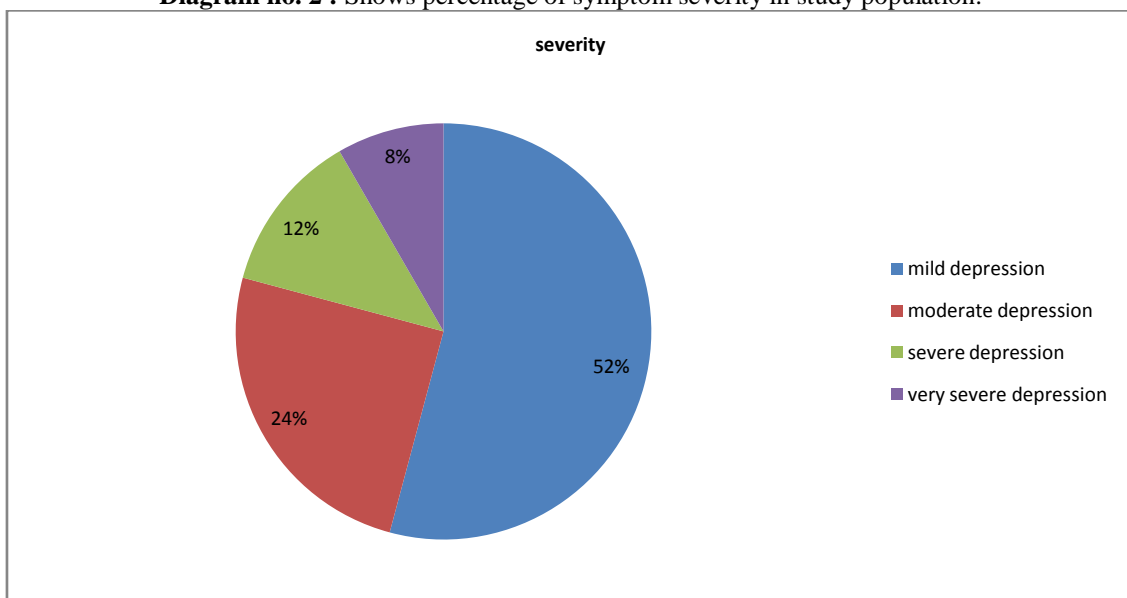


Diagram no. 3: Shows distribution of number of patients with their symptoms among different age groups

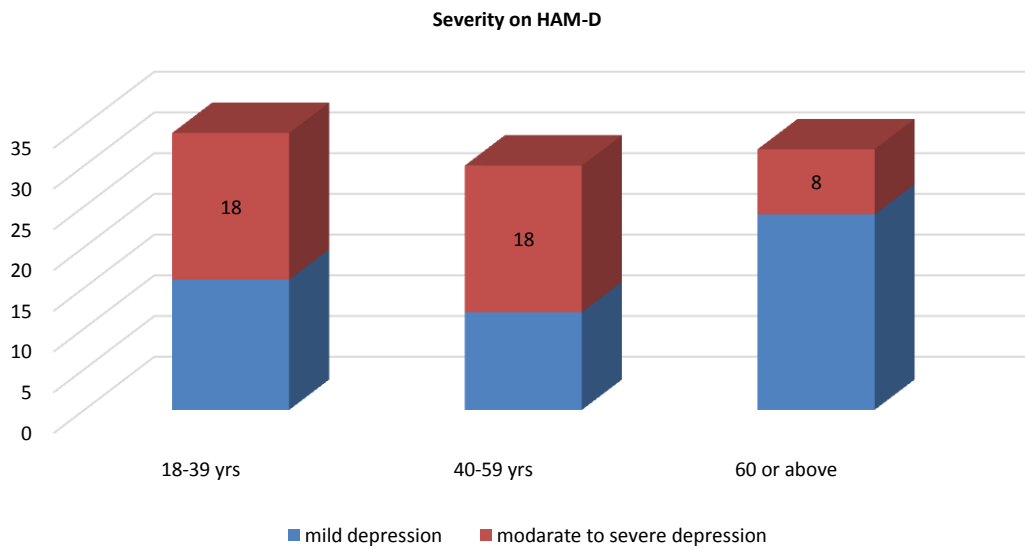


Diagram no. 4: Shows distribution of symptom severity in different age groups

Pearson Chi-Square Tests		
Age	Chi-square	Severity on HAM-D 8.711
	df	2
	Sig.	.013*
* The Chi-square statistic is significant at the .05 level.		

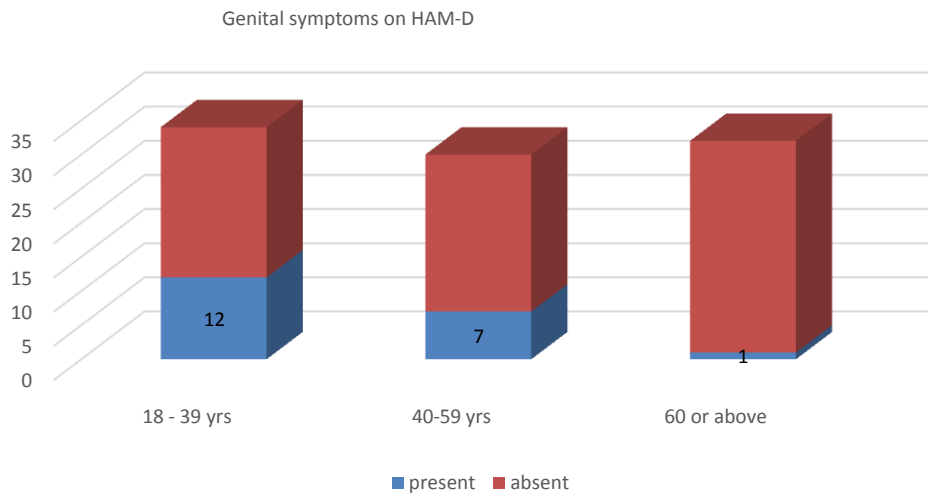


Diagram no. 5: Showing distribution genital symptoms in different age groups

Pearson Chi-Square Tests		
Age	Chi-square	Genital symptoms 10.509
	df	2
	Sig.	.005*
* The Chi-square statistic is significant at the .05 level.		

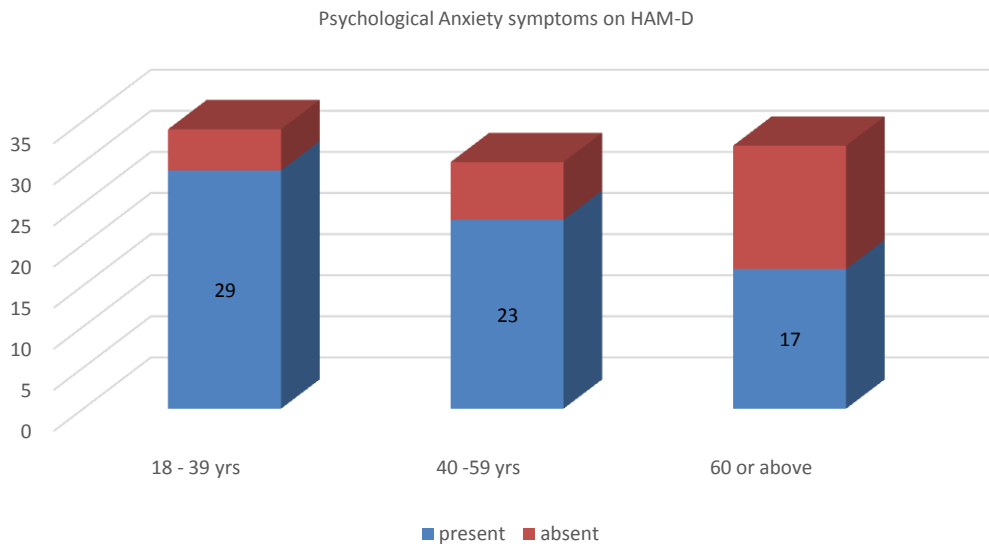


Diagram no. 5: Showing distribution of anxiety symptoms in different age groups

Pearson Chi-Square Tests		
Age	Chi-square	Psychological Anxiety 8.935
	df	2
	Sig.	.011*
*. The Chi-square statistic is significant at the .05 level.		

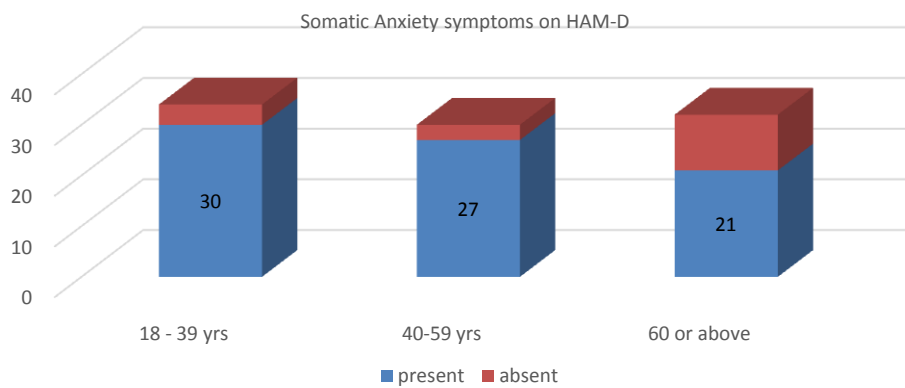


Diagram no. 7: Showing distribution of somatic symptoms in different age groups

Pearson Chi-Square Tests		
Age	Chi-square	Somatic Anxiety 7.725
	df	2
	Sig.	.021*
*. The Chi-square statistic is significant at the .05 level.		

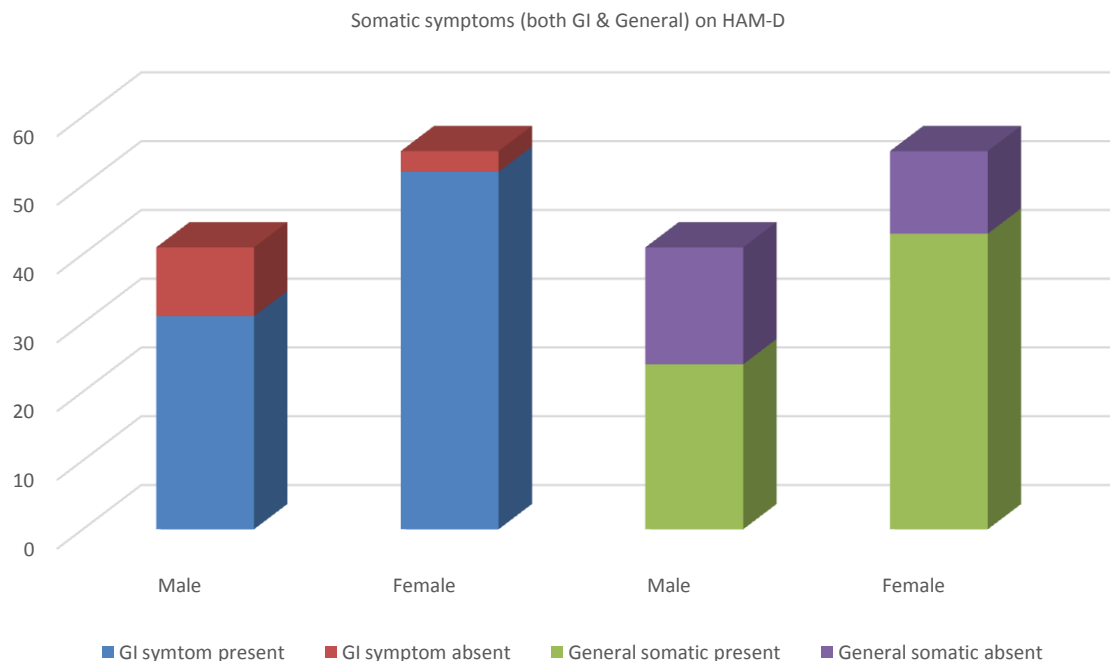


Diagram no. 8: Showing comparison between male and female in presentation of somatic symptoms.

Pearson Chi-Square Tests		
		GI Somatic symptoms
Sex	Chi-square	7.194
	df	1
	Sig.	.007*
		General Somatic symptoms
Sex	Chi-square	4.300
	df	1
	Sig.	.038*

IV. Discussion

Explanation of less genital complains in elderly may be due to decrease of sexual desire and sexual function with ageing, lack of a living partner⁷. Symptom severity is found to be low as age progresses and the possible reason may be psychological maturation or age related factors reduce vulnerability to low self- esteem⁴. Also hesitancy to report. Tendency of older people to express somatic instead of psychological complaints like anxiety, guilt.²Psychomotor retardation and co-morbid vascular or neurodegenerative conditions might lead to less instances of agitation, suicidality¹.Overall may lead to lesser scores on HAM-D in elderly. The increased likelihood of severe depression among women might be explained by increased stress sensitivity, maladaptive coping strategies, and multiple social roles of women.^{6,9} Prior anxiety disorders are more common in women.⁹ More prevalence of somatic symptoms may be related to social acceptance of women to acknowledge pain and distress, high body vigilance.⁸

V. Limitations

- comparatively low sample size.
- subject taken only from OPD set up.
- purposive sampling method
- unable to compare symptoms gender wise in each age group

VI. Conclusion

This study has found heterogeneity among presentations of depression with age; sex and other socio-demographic variables. Older adults have mild symptoms as compared to younger adults. Females are more likely to have severe depression.

This study would be helpful in clinical practice with better individualised management of depression, according to his specific needs varying with respect to socio-demographic determinants.

References

- [1]. Regan CO, Kearney PM, Savva GM, Cronin H, Kenny RA. Age and sex differences in prevalence and clinical correlates of depression: first results from the Irish Longitudinal Study on Ageing. *International journal of geriatric psychiatry*. 2013;28(12):1280-7.
- [2]. Berry JM, Storandt M, Coyne A. Age and sex differences in somatic complaints associated with depression. *J Gerontol*. 1984;39(4):465-7.
- [3]. Hybels CF, Landerman LR, Blazer DG. Age differences in symptom expression in patients with major depression. *International journal of geriatric psychiatry*. 2012;27(6):601-11
- [4]. Wallace J, Pfohl B. Age-related differences in the symptomatic expression of major depression. *The Journal of nervous and mental disease*. 1995;183(2):99-102
- [5]. Othieno CJ, Okoth RO, Peltzer K, Pengpid S, Malla LO. Depression among university students in Kenya: prevalence and sociodemographic correlates. *Journal of affective disorders*. 2014;165:120-5
- [6]. Akhtar-Danesh N, Landeen J. Relation between depression and sociodemographic factors. *Int J Ment Health Syst*. 2007;1(1):4.
- [7]. Hegeman J, Kok R, van der Mast R, Giltay E. Phenomenology of depression in older compared with younger adults: meta-analysis. *The British Journal of Psychiatry*. 2012;200(4):275-281.
- [8]. Barsky AJ, Peekna HM, Borus JF. Somatic symptom reporting in women and men. *J Gen Intern Med*. 2001;16(4):266-75.
- [9]. Sadock B, Sadock V. Kaplan & Sadock's comprehensive textbook of psychiatry. Philadelphia: Lippincott Williams & Wilkins; 2000 .

Dr. Bondona Timungpi, etal. "A Study on Phenomenology of Depression in different age groups." *IOSR Journal of Nursing and Health Science (IOSR-JNHS)*, 9(01), 2020, pp. 59-65.