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**THE PREVALENCE OF LATE-LIFE DEPRESSION AND PHYSICIANS' ATTITUDE TOWARD IT IN PRIMARY CARE SETTINGS OF CHINA**

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Late-life depression is associated with physical and psychological comorbidity, functional and cognitive impairment, and increased mortality due to suicide and other causes. However, studies in the west show that the identification of depression in older people is problematic and consequently the illness is underdiagnosed and undertreated. We investigated the prevalence of late-life depression and physicians' attitude toward it in primary care settings of China.

The survey was performed in urban primary care settings of Hangzhou, China. 1000 patients aged  $\geq 55$  years and 300 primary care physicians were recruited, of which 689 patients and 247 physicians provided complete data. The Geriatric Depression Scale (GDS-30) was used for investigating the prevalence of late-life depression in patients, and the Depression Attitude Questionnaire (DAQ) for investigating physicians' attitudes and knowledge about depression.

Of the 689 patients, 23.4% ( $n=161$ ) scored  $\geq 11$  on the GDS-30, including 3% ( $n=21$ ) who scored  $\geq 21$ . Among the physicians, 72% ( $n=178$ ) endorsed that "Becoming depressed is a natural part of being old", and 70% ( $n=173$ ) of them thought "Working with depressed patients is heavy going"; in their clinical practice. Only 6.6% of physicians prescribed anti-depressants.

Primary care physicians in China are ill prepared to diagnose and treat depression in older adults, which presents at high rates in primary care clinics. How to improve their attitudes and clinical practice is crucial to the well-being of older people in China.