

Gonzalez¹

R. Resydem Colaborative Group⁵. ¹ *Hospital Psiquiatrico Dr. Villacian, Valladolid, Spain* ² *Ayuntamiento de Malaga, Malaga, Spain* ³ *Dpto. Medicina Preventiva. Universidad de Valladolid, Valladolid, Spain* ⁴ *Dpto. Neurociencias, Pfizer, Spain* ⁵ *Multicentrico, Spain*

Objectives: To know prevalence of depression in Spanish nursing home(NH) by analysing the clinical profile of residents from RESYDEM study (Identification of patients with cognitive deterioration and dementia in NH).

Design/methods: A multicentral, transversal, observational study was carried out in April 2005. 71 geriatrician from 54 NH representing the Spanish state participated. Depression was analysed in patients history and determined by NPI of Cummings, NH version.

Results: 1037 residents were randomized, 1020 were used by clinical data analysis. 941 were used to determine depression prevalence. Median age 83.4yo, 66.6% were women, 70.9% with basic educational level, 57.4% widows, 25.7% single, 41.5% had some degree of functional deterioration, 22.1% had delirium. In 26.4% were documented Stroke(17.9% TIA). 61.7% had dementia.

Depression appears in 31.4% of elderly institutionalized with the only diagnosis of depression or independent of others. There were no significant differences in age groups. However, was most frequent in women. 95.7% of patients with diagnosis of dementia had at least one drug for depression. Most used anti-depressants were trazadone (23%), citalopram (20.9%), sertraline (15.8%), fluoxetine (10.1%). No tricyclic anti-depressant reached 1% of consumption.

Conclusions: Depression affects practically one in three institutionalized elderly in Spain

Institutionalized elderly with depression are largely treated with ISRS. It is believed that the use of trazadone is linked with the effects on sleep and anxiety.

The high prevalence of depression, its overlapping with other processes and the comorbidity of residents requires a careful search and approach in NH which implies a challenge for professionals in order to treat it.

P415

Analysis of symptomology in neuropsychiatric patients with dementia

R. Lopez Mongil¹, J.A. Lopez Trigo², J. Castrodeza Sanz³, T. Leon Colombo⁴, S. Tamames Gonzalez³, C. Hernan Garcia³, C. Rodriguez Gay³, J.L. Elguero Angulo¹, S. Marban Garcia¹, G. Gomez De La Cruz¹

R. Resydem Collaborative Group⁵. ¹ *Hospital Psiquiatrico Dr. Villacian, Valladolid, Spain* ² *Ayuntamiento de Málaga, Unidad de Ememoria y Demencias, Valladolid, Spain* ³ *Departamento de Medina Preventiva. Universidad de Valladolid, Valladolid, Spain* ⁴ *Dpto. Neurociencias, Pfizer, Spain* ⁵ *Multicentrico, Spain*

Objectives: Determine the presence of neuropsychiatric symptoms (NPS), using the NPI-NH(Neuropsychiatric Inventory Nursing Home(NH) Version), in order to provide a multidimensional profile in behavioural symptoms in residents and to calculate its prevalence in Spanish NH.

Design/ Methods: From randomized population of RESYDEM study (Identification of patients with cognitive deterioration and dementia in NH) a multi-central, cross-sectional and observational study was carried out. 71 geriatrician from 54 NH representative the Spanish state participated. NPS was determined by NPI Cummings NH version. This version includes upsets in sleep and feeding patterns.

992 residents were examined (Median age 83.4yo, 66.6% women, 91.8% received at least one type of treatment, 61.7% with dementia). 523 (52.7%) presented at least one type of NPS. In order of greatest frequency, the following were noted: alterations in sleep patterns (41.7%), depression/dysphoria (31.4%), anxiety (31.2%), agitation/aggressiveness (29.6%), apathy/indifference (25.8%), delirious ideas (23.7%), irritability (22.4%), feeding/appetite upsets (18.5%), anomalous motor behaviour (15.3%), hallucinations (13.8%), disinhibition (11.1%), euphoria (4.4%).

35.9% of residents received benzodiazepines, 26.7% antidepressants. Atypical neuroleptics were used in 15.8%, in contrast with 7.4% of the use of classic ones.

Conclusions: NPS's reached a high prevalence in NH and it is usual that more than one co-exists in the patients.

Alterations in sleep patterns, depression, anxiety, agitation/aggressiveness affect approximately one in three residents.

It is useful and recommendable to evaluate the 12 behavioural areas from the NH version of the NPI scale. This instrument was chosen as a sifting measure to establish neuropsychiatric symptomology in residences.

P416

Adequate use of psychotropic agents at healthcare facility for elderly in Japan

H. Misawa¹, Y. Hamasaki², M. Ochiai². ¹ *Department of General Medicine, Tokyo-Kita Social Insurance Hospital, Kita-ku, Tokyo, Japan* ² *Sagami Hospital, Sagami-hara, Kanagawa, Japan*

Now many elderly people use psychotropic agents for depression or anxiety or delirium or insomnia. Some of them can use those agents without prescriptions of psychiatrists. We wonder if many doctors other than psychiatrists tend to give such drugs without serious consideration. So we tried to invest one healthcare facility for elderly with no psychiatrists and checked prescriptions of psychotropic agents. And we consider adequate use of psychotropic agents for elderly there. We hope this presentation reveal new trend for use of such drugs for elderly people in Japan

P417

Depression and the elderly

E. Panagoulas, K. Dailianis, D. Malidelis, P. Papadopoulos. *Mental Health Center of Peristeri, Athens, Greece*

About two decades ago, "Open Care Centers for Aged Citizens" have been established in Greece. These facilities consider as members everyone older than 65 years and provide social opportunities, entertainment, activities, education and work on artistic objects, as well as basic first degree health care by visitors physicians.

We performed an investigation with Geriatric Depression Scale (GDS 15 and 4) among the members of two such centers in order to examine the probable prevalence of depression in this population. Our sample consisted of 51 persons (38 females and 13 males) with average age 72±5.7 years. Besides the GDS we examined parameters as: marital status, education, known organic (somatic) or mental health problems.

From our results we mention that 23.5% of all (7 females and 5 males) were scored in GDS-15 over 5 and were referred for further psychiatric evaluation about the existence of depression. Only one of them was already diagnosed as depressive before our investigation.