

Psychiatric Disorders in Geriatric Patients

Psychiatric disorders in the elderly include dementia, delirium and depression. The danger lies not only in the base of the disease, but also influence the overall health of humans:

- emergence of new diseases,
- worsening of existing disease,
- increasing the frequency of hospitalizations,
- prolongation of hospitalization,
- overall increase in morbidity and mortality.



Dementia

Dementia is a syndrome that can be caused by more diseases, especially in elderly. It can lead to:

- dehydration,
- malnutrition,
- noncompliance (forgets to take medication),
- loss of self-sufficiency,
- need for help (from family),
- need for institutional care.

The most often causes of dementia in elderly:

- Alzheimer's disease,
- vascular - ischemic dementia,
- dementia in Parkinson's disease,
- alcoholic dementia,
- mixed.

Treatment of Alzheimer's dementia consists primarily in delaying severe stages of disease. Using the brain acetylcholinesterase inhibitors - donepezil, rivastigmine.

Depression

Depression in the elderly is generally quite underrated status, which is based on chronic illness, loss of a loved one (widowhood), life changing situations, loss of life roles, which is often associated with moving to a nursing home. As a result of depression leads to treatment noncompliance (not taking drugs, often intentionally), dehydration, malnutrition and weight loss on the basis of loss of appetite. Depression may be presented by sedation or agitation with aggressive tendencies. In old age also increases the number of suicides - a jump from heights, hanging. Depression should not be underestimated, but treated (psychiatric consultation).

Antidepressives in elderly:

- most preferred are selective serotonin reuptake inhibitors (sertraline, citalopram),
- blocking reuptake of serotonin and norepinephrine (SNRI)
- noradrenergic and specifically serotonergic antidepressants (NASA) - mirtazapine,
- **unsuitable** are tricyclic antidepressants (anticholinergic effects are).

Delirium

Delirious states in elderly are often caused by dehydration, change in environment, or certain drugs (typically antibiotics - fluoroquinolones), hypoxia, infections, psychosocial stress, but also withdrawal delirium.

Treatment of acute delirious state:

- adequate hydration,
- neuroleptics - typically tiapridal, risperidone, haloperidol.

Links

Related Articles

- Special Problems in Geriatric Patients
- Principal Geriatric Syndromes
- Pharmacotherapy in Elderly

Sources

- WikiSkripta.eu. *Psychické poruchy ve stáří* [online]. The last revision 2012-02-14, [cit. 2012-02-16]. <http://www.wikiskripta.eu/index.php/Psychické_poruchy_u_seniorů>.