Dementia and depression can occur separately or together. Sometimes it may be difficult to distinguish between them because the signs and symptoms are similar. However, dementia and depression are different conditions, requiring different responses and treatment. With careful management, the symptoms of anxiety and depression can be treated and treatments are available that can slow the progression of dementia.

What is dementia?
Dementia is a term used to describe a set of symptoms including changes in thinking, memory, behaviour and mood, and difficulties with communication. Many conditions cause dementia, including Alzheimer’s disease, vascular dementia and dementia with Lewy bodies. Dementia is progressive, which means that it will get worse over time. In some types of dementia, progression can be slowed through the management of risk factors and/or medication.

There are over 320,000 Australians living with dementia.1 Dementia is more common in older people but people under 65 can also be affected.

Dementia-like symptoms can sometimes arise from other medical conditions which can be treated. In all situations, where symptoms of memory impairment and confusion are noticed, or other mental abilities have changed significantly, it’s vital to get an accurate diagnosis from an appropriate medical practitioner.

What is anxiety?
Anxiety is more than just feeling stressed or worried. Anxious feelings are a normal reaction to a situation where a person feels under pressure and usually pass once the stressful situation has passed, or the ‘stressor’ is removed.

However, for some people these anxious feelings happen for no apparent reason or continue after the stressful event has passed. For a person experiencing anxiety, anxious feelings cannot be brought under control easily. Anxiety can be a serious condition that makes it hard for a person to cope with daily life. There are many types of anxiety and many people with anxiety experience symptoms of more than one type.

Living with dementia is one of many things – such as a family history of mental health conditions, stressful life events and personality factors – that may trigger anxiety.

Anxiety can be expressed in different ways such as uncontrollable worry, intense fear (phobias or panic attacks), upsetting dreams or flashbacks of a traumatic event.

Some common symptoms of anxiety include:
- hot and cold flushes
- racing heart
- tightening of the chest
- snowballing worries
- obsessive thinking and compulsive behaviour.

There are effective treatments available for anxiety. For more information on anxiety and treatments see the beyondblue Understanding anxiety fact sheet or visit www.beyondblue.org.au/anxiety

What is depression?
While we all feel sad, moody or low from time to time, some people experience these feelings intensely, for long periods of time (weeks, months or even years) and sometimes without any apparent reason. Depression is more than just a low mood – it’s a serious condition that has an impact on both physical and mental health.

Depression affects how a person feels about themselves. A person may lose interest in work, hobbies and doing things he or she normally enjoys. Some people may lack energy, have difficulty sleeping or sleep more than usual, while some people feel anxious or irritable and find it hard to concentrate.

Signs of anxiety
The symptoms of anxiety can often develop gradually over time. Given that we all experience some anxious feelings, it can be hard to know how much is too much. In order to be diagnosed with an anxiety condition, it must have a disabling impact on the person’s life. There are many types of anxiety, and there is a range of symptoms for each.
The good news is, just like anxiety, depression is treatable and effective treatments are available.

Signs of depression
A person may be depressed if he or she has felt sad, down or miserable most of the time for more than two weeks and/or has lost interest or pleasure in usual activities, and has also experienced some of the signs and symptoms on the list below.

It’s important to note that everyone experiences some of these symptoms from time to time and it may not necessarily mean a person is depressed. Equally, not every person who is experiencing depression will have all of these symptoms. The symptoms will not provide a diagnosis – for that you need to see a health professional – but they can be used as a guide.

Some common symptoms of depression include:

- not going out anymore, loss of interest in enjoyable activities
- withdrawing from close family and friends
- being unable to concentrate and not getting things done at work
- feeling overwhelmed, being indecisive and lacking in confidence
- increased alcohol and drug use
- loss or change of appetite and significant weight loss or gain
- trouble getting to sleep, staying asleep and being tired during the day
- feeling worthless, helpless and guilty
- increased irritability, frustration and moodiness
- feeling unhappy, sad or miserable most of the time
- thoughts such as, “I’m a failure”, “Life’s not worth living”, “People would be better off without me”.

As with anxiety, there are effective treatments available for depression. For more information on depression and treatments see beyondblue’s Anxiety and depression: An information booklet or visit www.beyondblue.org.au/depression

What are the links between anxiety, depression and dementia?

More than 3 million Australians are living with anxiety or depression. One in five women and one in eight men will experience depression at some time in their life. On average, one in four people will experience anxiety.

Anxiety and depression are more common in people with dementia than in older people without dementia, but they can go unrecognised for a number of reasons.

- It can be difficult to distinguish symptoms of depression from those of dementia. Many symptoms are common to both dementia and depression, such as impaired ability to think and concentrate and problems with memory, which can lead to an incorrect diagnosis in an older person.
- It is often incorrectly assumed that it’s ‘normal’ for older people to be depressed, especially those with dementia.
- People with dementia can have problems communicating with their doctors and carers or may not be able to describe their own symptoms very well.
- An accurate diagnosis of anxiety or depression in someone with dementia involves more than simply identifying the symptoms. Factors that need to be taken into account include:
  - the number of symptoms present
  - the type of symptoms, particularly feelings of hopelessness, guilt and worthlessness
  - the length of time the symptoms have been experienced.

If a person or someone close to them is concerned about the symptoms of anxiety or depression, they should talk to a doctor to ensure that a correct diagnosis is made because the treatments for anxiety, depression and dementia are different. A wrong diagnosis of dementia could mean a person with anxiety or depression doesn’t get the support and treatment needed to recover. Likewise, incorrectly diagnosing dementia as anxiety or depression could lead to inappropriate treatment and unrealistic expectations of improvement in the person concerned.

Sometimes depression and dementia occur together and it’s important to be able to identify when these two conditions are present at the same time. Dementia can contribute to depression through the slow erosion of confidence and self-esteem as a person’s ability to manage their physical and social environment is affected.

Other changes that can contribute to depression in a person with dementia include:

- loss of independence and increasing reliance on others
- inability to go out alone
- loss of ability to carry out everyday tasks
- high anxiety and agitation
- confusion and loss of memory.

Although depression affects mood, it can also lead to poor memory and difficulties making decisions and organising and initiating activities. For a person with dementia, depression not only affects their mood, but may also worsen their dementia symptoms.

Many people with dementia experience anxiety, which can also make dementia symptoms worse by increasing problems with concentration, fatigue and relationship difficulties, and reducing independence.

Dementia usually gets worse slowly over a period of months or years. If there is a noticeable change in behaviour and functioning over a few weeks, anxiety or depression might be the reason.

Anxiety and depression affect how a person functions in everyday life. These conditions can be difficult to diagnose in the presence of dementia and in all instances, should be diagnosed and treated by a doctor.
What are the treatments for anxiety and depression?

Managing anxiety and depression can greatly improve people’s wellbeing and quality of life. People with anxiety and/or depression can find it difficult to take the first step in seeking help. They may need the support of family, friends and a health professional.

There is no one proven way that people recover from anxiety or depression and it’s different for everybody. However, there is a range of effective treatments and health professionals who can help people on the road to recovery. There are also many things that people with anxiety and depression can do to help themselves to recover and stay well.

The important thing is finding the right treatment and the right health professional that works for you.

Different types of anxiety and depression require different types of treatment. This may include physical exercise for preventing and treating mild anxiety or depression, through to psychological and medical treatment for more severe episodes.

Psychological treatments

Psychological therapies may not only help with recovery, but can also help prevent a recurrence of anxiety or depression. These therapies help build skills in coping with stressful life circumstances and can be provided by a psychologist, psychiatrist or other trained health professional.

- **Cognitive behaviour therapy (CBT)** is an effective treatment for people with anxiety and depression. It teaches people to evaluate their thinking about common difficulties, helping them to change their thought patterns and the way they react to certain situations.

- **Interpersonal therapy (IPT)** is also effective for treating depression and some types of anxiety. It helps people find new ways to get along with others and to resolve losses, changes and conflict in relationships.

Psychological therapies may need to be adapted and may take more time for someone with dementia, due to their thinking and memory problems.

Medication

Antidepressant medication, alongside psychological therapies, can also play a role in the treatment of moderate to severe depression and some anxiety conditions.

Making a decision about which antidepressant is best for a person can be complex. The decision will be made in consultation with a doctor, after careful assessment and consideration. The doctor should discuss differences in effects and possible side-effects of medications. Stopping medication should only be done gradually, with a doctor’s recommendation and under supervision.

Some antidepressant and antianxiety medications can cause particular problems for some people with dementia, such as increasing confusion and memory problems, so it is important the prescribing doctor has experience in treating people with dementia.

A doctor or treating health professional will take into account several factors when suggesting the most suitable treatment. Regular contact with and ongoing assessment by a doctor to check that treatments are working effectively is an important part of managing anxiety or depression. Most people taking medication will also benefit from psychological therapies, which will reduce the likelihood of relapse after the person has stopped taking the medication.

For more information about medications for anxiety and depression for people with dementia see the Alzheimer’s Australia Dementia Q&A Help Sheet *Drugs used to relieve behavioural and psychological symptoms of dementia* available at [www.fightdementia.org.au](http://www.fightdementia.org.au).

Who can assist?

A General Practitioner (GP) is a good first step to discuss your concerns. A good GP can:

- make a diagnosis
- check for any physical health problem or medication that may be contributing to the condition
- discuss available treatments

- if appropriate, work with the person to draw up a Mental Health Treatment Plan so he or she can get a Medicare rebate for psychological treatment
- provide brief counselling or, in some cases, psychological therapies
- prescribe medication
- refer a person to a mental health specialist such as a psychologist, social worker or psychiatrist.

Make sure that the doctor managing your dementia knows if you have anxiety or depression. It is recommended that people consult their regular GP or another GP in the same clinic, as medical information is shared within a practice.

Psychologists are health professionals who provide psychological therapies such as cognitive behaviour therapy (CBT) and interpersonal therapy (IPT). Psychologists are not doctors and cannot prescribe medication in Australia.

Psychiatrists are doctors who specialise in mental health. They can make medical and psychiatric assessments, conduct medical tests, provide therapy and prescribe medication. Psychiatrists often use psychological treatments such as CBT, IPT and/or medication. If the condition requires hospital admission, a psychiatrist will be in charge of the person’s treatment.

Mental health nurses are specially trained to care for people with mental health conditions. They work with psychiatrists and GPs to review a person’s mental health, monitor medication and provide information about mental health conditions and treatment. Some have training in psychological therapies.

Social workers in mental health are specially trained to work with people who are experiencing difficulties in life. Social workers can help people find ways to manage more effectively some of the situations that trigger these conditions such as family issues, financial problems, work stress and living arrangements. Mental health social workers can also provide focused psychological self-help strategies.
Occupational therapists in mental health help people who, because of a mental health condition, have difficulty participating in normal, everyday activities. Mental health occupational therapists also provide focused psychological self-help strategies.

Aboriginal and Torres Strait Islander mental health workers understand the mental health issues of Indigenous people and what is needed to provide culturally safe and accessible services. Some may have undertaken training in mental health and psychological therapies. Support provided by Aboriginal and Torres Strait Islander mental health workers might include, but is not limited to, case management, screening, assessment, referrals, transport to and attendance at specialist appointments, education, improving access to mainstream services, advocacy, counselling, support for family and acute distress response.

The cost of treatment from a mental health professional varies. However, in the same way that people can get a Medicare rebate when they see a doctor, they can also get part or all of the consultation fee subsidised when they see a mental health professional for treatment of anxiety or depression. See beyondblue’s Getting help – How much does it cost? fact sheet at www.beyondblue.org.au/resources

To find a mental health practitioner in your area, visit www.beyondblue.org.au/find-a-professional or call the beyondblue Support Service on 1300 22 4636.

Helpful strategies and tips

In addition to psychological and medical treatment, there are many things that can be done to reduce the risk of anxiety and depression and to maintain and/or improve the quality of life of a person with dementia.

- Adapt the person’s home and immediate environment to make it more manageable.
- Minimise change and keep to a predictable routine.
- Minimise stress and anxiety by simplifying or eliminating tasks or activities that have become too difficult.
- Reduce exposure to overstimulating or threatening situations.
- Provide support for the person so he or she can carry out normal activities for as long as possible.
- Ensure that healthy meals with lots of fresh fruit and vegetables are available every day.
- Provide vitamin B supplements if deficiency is present.
- Encourage regular exercise.
- Make sure a small amount of time is spent in the sun each day.
- Make sure that there is regular social contact.
- Consider getting a pet if appropriate care is available.
- Encourage a period of relaxation or meditation every day.

How family and friends can help

When a person has dementia and anxiety or depression, it can affect family and friends. It’s important for family and friends to look after their own health as well as caring for the person who has dementia.

- Learn about dementia, anxiety and depression and their symptoms to help you recognise warning signs.
- Encourage the person to go to the doctor if their dementia, anxiety or depression gets worse. Make sure you seek support if you think you need it, too.
- Support the person by helping them to follow their medical and mental health plans. Gently remind the person to take any medication regularly and to attend all their medical appointments.
- Look after your own health by eating well, exercising regularly, getting enough sleep and doing things that you enjoy, too.

References

1 Australian Institute of Health and Welfare (2012), Dementia in Australia. Canberra: AIHW.

Where to find more information

beyondblue
www.beyondblue.org.au
Learn more about anxiety and depression, or talk it through with our support service.

 email or chat to us online at www.beyondblue.org.au/getsupport

Alzheimer's Australia
1800 100 500 – National Dementia Helpline
www.lightthedementia.org.au
Provides advocacy, support services, education and information about dementia.

Donate online www.beyondblue.org.au/donations

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