Other Abstracts

Depression Care Management for Chinese Older Adults with Depressive Symptoms

Author: Pun W M[1], Leung A[1], Yung A[2], Chu D[3]

Institution: Department of Nursing Studies, The University of Hong Kong [1],

St. James' Settlement[2],

Hospital Authority[3]

Introduction:
Depression affects the well-being and quality of life of individuals, and it is common for its under-recognition among older adults. The prevalence of depressive symptoms among community-dwelling elders in Hong Kong in 2006 was as high as 20%, however, limited community services are being provided.

Purpose of the Project:
This project aims to address the evidence for effective interventions which were designed to reduce depressive symptoms among community dwelling older adults, and to identify essential components of these interventions that lead to success in depression care.

Material & Methods:
We searched for randomized controlled trials and high quality quasi-experimental studies conducted from 2000 to 2007 through MEDLINE, CINAHL, PubMed, Proguest and British Nursing Index. We used "older adults" "geriatrics", "depression", "behavioral intervention", "multidisciplinary intervention", "collaborative intervention" as medical subject heading (MeSH) terms or key words. Articles abstracts reviewed for eligibility and finally eleven studies matched with the inclusion criteria.

Results:
Collaborative care approach was found to yield the best result to lower older adults' depression than single discipline approach. Improving Mood, Promoting Access to Collaborative Treatment (IMPACT) model was a good example that provided positive outcomes in social, physical, and mental functions of depressed older adults. The key component of collaborative intervention was Depression Care Manager (DCM) who worked with primary care physician and multidisciplinary depression care team and was responsible for screening, assessing the severity of depressive symptoms, providing problem solving therapy, monitoring compliance, relapse prevention and referral according to individual needs.

Conclusion:
Collaborative care model and DCM was found to be an effective strategy in depression care management. This study provided a basic understanding of essential components of depression care management and would support future development of relevant services in Hong Kong. The team is now proposing a pilot depression care management project in Hong Kong with reference to the IMPACT model.