

## FAST FACTS: Differentiating Pain and Depression

Depression, while it is common in older adults, is not a normal part of aging. In fact, the majority of older adults are not depressed. The likelihood of developing depression in later life increases as problems with health, such as decreased mobility and pain, interfere with quality of life. Although everyone feels sad from time to time, to be diagnosed with depression a person must have five or more of the symptoms in the list below for more than 2 weeks. However, following a significant loss, such as the death of a loved one or other life change, a two-month mourning period is preferred prior to diagnosing a person with a major depressive disorder.

- Saddened mood most of the day
- Significantly decreased interest in activities
- Difficulty sleeping
- Weight loss and overall decreased appetite
- Increased agitation/restlessness/irritability
- Fatigue
- Feelings of worthlessness or guilt
- Decreased ability to concentrate
- Suicidal thoughts or wish for death

Consider screening for depression with the **Patient Health Questionnaire 2 (PHQ-2)** (from Kroenke et al, 2001):

- *Over the past 2 weeks, how often have you been bothered by little interest or pleasure in doing things?*
- *Over the past 2 weeks, how often have you been bothered by feeling down, depressed, or hopeless?*

Score each item: 0 = not at all, 1 = several days, 2 = more than half the days, 3 = nearly every day; a score  $\geq 3$  indicates high probability of depressive disorder. The PHQ-9 can be used if a positive PHQ-2. Refer to primary care provider for further evaluation.

Unmanaged pain can look very similar to depression in older adults and can contribute to depression. It is important to recognize pain as different from depression in order to target treatments effectively. **Symptoms of unmanaged pain may include the following:**

- Crying, praying, or calling out
- Increased agitation/restlessness/irritability
- Diminished appetite
- Difficulty sleeping
- Diminished cognition
- Feelings of hopelessness and despair

Routine pain assessment using appropriate assessment tools and effective pain management can relieve associated depressive symptoms in older adults and improve overall quality of life. Effective pain management can be done in combination with treatment for depression.

*Revised December 2023*

### References

Depression and Older Adults <https://www.nia.nih.gov/health/mental-and-emotional-health/depression-and-older-adults>.

Kroenke K, Spitzer R L, Williams J B (2001). The PHQ-9: validity of a brief depression severity measure. *Journal of General Internal Medicine*, 16(9): 606-613.

Kroenke, K. & Spitzer, R.L. (2002). The PHQ-9: A new depression and diagnostic severity measure. *Psychiatric Annals*, 32, 509-521.

Reuben DB, Herr KA, Pacala JT, Pollock BG, Potter JP, Semla TP. *Geriatrics at Your Fingertips*. 25th Pg. 92-97. New York: The American Geriatrics Society; 2023. ISBN: 978-1-886775-77-0.