

Prevalence of late life depression: Do national surveys get it wrong?

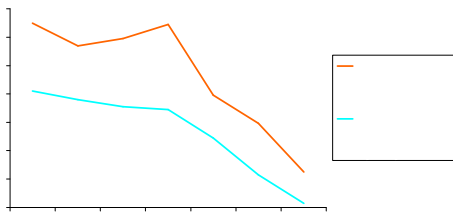
Daniel O'Connor
Aged Mental Health Research Unit
Kingston Centre
Monash University

Ruth Parslow
University of Melbourne

Australian National Survey of Mental Health and Wellbeing

- 1997, ABS, 18+, private dwellings
- 10,641 respondents (78%)
- Kessler Psychological Distress Scale (K-10),
General Health Questionnaire (GHQ-12)
- Composite International Diagnostic Interview
(CIDI) → ICD, DSM diagnoses

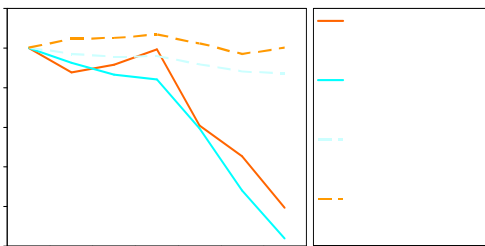
Australian National Survey of Mental Health and Wellbeing



Australian National Survey of Mental Health and Wellbeing

- Similar to other surveys
- Findings plausible
- But.....
- Rates higher in aged-specific surveys
- K-10, GHQ-12 scores stable

Australian National Survey of Mental Health and Wellbeing



Australian National Survey of Mental Health and Wellbeing

Question:

Is this difference in trajectory due to CIDI's
complexity?

CIDI: Anxiety

Generalised anxiety disorder, phobia, panic, OCD, PTSD

- Screening questions
- Supplementary questions
- Symptoms, severity, persistence

CIDI: Generalised anxiety disorder

Screening question:

"In the past 12 months, have you had a period of a month or more when for most of the time you felt worried, tense or anxious about everyday problems such as work or family?"

Supplementary questions:

"Has that period of feeling worried, tense or anxious been going on for 6 months or longer?"

and:

"In the past 12 months, did you have a time when you worried a lot more than most people would do in your situation?"

CIDI: Generalised anxiety

Symptom review:

Think of your worst period when you were worried. During that episode, did you often have any of the following associated problems:

- Did you often
- Feel restless, keyed up or on edge?
 - Get tired easily?
 - Feel more irritable than usual?
 - Have difficulty concentrating?
 -

By contrast, K-10 asks:

In the past 4 weeks, about how often did you feel nervous: Never, some, most, all of the time?"

Ageing and cognition

Reduction with age in:

- Attention span
- Working memory
- Verbal fluency
- Information processing speed

Sensory, physical incapacity

CIDI requires speedy analysis of multiple symptoms, time frames and attribution

Data exploration

Hypothesis: Older people more often endorse simple questions about mental health than complex ones that require more cognitive processing

Method: We compared responses to simple K-10 anxiety and depression items with responses to complex CIDI anxiety and depression screening questions

Analysis: Mapped degrees of inconsistency between K-10 and CIDI with age

Anxiety items

Compared K-10 response:

Anxious in last month all or most of the time

With CIDI screening response:

Worried most of the time for a month or more in the last year

If endorsed K-10, should also endorse CIDI

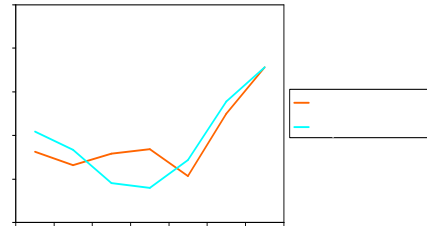
Changes in inconsistency with age

Anxiety item comparison

| | | | |
|--|-----|----|--|
| | | | |
| | | No | |
| | Yes | 83 | |

Disagreement rate = 29%

K10 - CIDI disagreement



Conclusions

- Can't prove causation
- Rates of anxiety and depression probably do fall with age, with an increase in very advanced old age
- Does CIDI exaggerate the rate of decline?
- Need experimental confirmation
- Value of psychological scales like K-10 and GHQ-12