

RESISTANT DEPRESSION IN THE ELDERLY: EFFECTS OF TREATMENT ON SYMPTOMATOLOGY, COGNITIVE FUNCTIONING AND FUNCTIONAL ABILITIES

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Introduction: Severe depression after mid-life has significant clinical, cognitive or functional consequences. These related dimensions may have a different evolution under treatment, and their assessment may be useful to evaluate treatment efficiency.

Objectives: To measure differential treatment effect on clinical, cognitive and functional dimensions in elderly severe depression.

Aims: The relation between these three dimensions has been examined from the inclusion through six weeks of treatment

Methods: Three different treatment (antidepressant, ECT and rTMS) were proposed to ten patients aged more than 60. The clinical, cognitive and functional dimensions were compared at inclusion and J42, and their evolution was also measured. At the end, we tried to assess trends for difference between the three types of treatment. Three types of evaluation were performed: clinical (depression, anxiety and apathy), neuropsychological (memory, attentional and executive functioning) and functional (activities of daily life, autonomy).

Results: This preliminary study put in evidence a common pre-treatment profile of depressive symptoms (mood disorder), cognitive (executive difficulties) and functional (loss of autonomy, physical problems) abilities. Clinical improvement was associated with similar cognitive and functional progression, whatever therapeutic method was proposed.

Conclusions: Repetitive evaluation of symptomatology, cognitive performance and everyday life functioning seems to have a major importance in post midlife depressive episodes. It might be useful to determine if non-pharmacological treatment may result in a different evolution of these dimensions.