



Depressive symptoms in older adults residing in long-term care facilities

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ABSTRACT

Objective: To identify how depressive symptoms manifest in older adults institutionalized in long-term care homes. **Method:** This is an integrative review, the data collection was obtained between the months of August and October 2023. The search for studies consists of the search for scientific articles published in the last ten years (2013-2023), being focused on the guiding question, published in the Portuguese language, and indexed in the following databases: Google Scholar, VHL (Virtual Health Library) and Scientific Electronic Library Online (SciELO). The descriptors used in the search were: Aged; Depression; Senility; Aging. **Results:** A total of 3,390 papers were found, and after screening according to the inclusion and exclusion criteria, 65 publications were selected, which were submitted to an exploratory reading, which is characterized by being a rushed reading, aiming to evidence if the text met the proposed objective, this moment resulted in the exclusion of 35 (thirty-five) papers. Of this amount, 17 (seventeen) articles were



excluded because they did not correspond to the theme, so 7 (seven) were repeated on the data page. Thus, as the final sample of the study, we obtained 6 (six) articles. Conclusion: The varied and often subtle symptoms of depression can go unnoticed, making it crucial to sensitize health professionals and caregivers to recognize and treat these signs early. Promoting a welcoming, nurturing, and socially engaged environment within LTCFs can play a significant role in preventing depression in older adults. Therapeutic intervention, which can include psychotherapy, emotional support, and, in some cases, medication, is key to improving the quality of life for older adults suffering from depression.

Keywords: Elderly, Depression, Senility, Aging.

1 INTRODUCTION

In Brazil, the age range considered an elderly person is from 60 years old. Aging, in turn, is a natural, irreversible and democratic process, everyone will one day suffer the same, however, this process may occur more quickly due to the emergence of some disease. The effects of this process are: loss of 10 to 20% of muscle strength, decrease in bone density and flexibility, decrease in agility, coordination and joint mobility, conditions that in addition to causing dependence in the elderly also make them vulnerable and prone to developing depressive symptoms.⁸

Faced with facing a disabling disease, lack of resources or even preparation to deal with the difficulties in taking care of an elderly person who depends on special care, many families resort to LTCF's (Long-Term Care Institutions for the Elderly), which according to ANVISA (National Health Surveillance Agency), can be defined as governmental institutions or not. of the residential type, intended for the collective domicile of people aged 60 years or over, with or without family support, in conditions of freedom, dignity and citizenship.²

Due to this scenario, the elderly referred to LTCFs tend to manifest depressive symptoms, often due to the abandonment of family and friends. Nurses play an extremely important role in identifying these symptoms in institutionalized older adults, and should promote actions to minimize the damage caused by depression.⁶

Depression is the most frequent mood disorder among older people, and can be characterized as a very intense sadness or persistent decrease in interest or pleasure in performing daily activities. The main factors associated with depression include cognitive decline, functional impairment, impaired quality of life, worsening socioeconomic status, severe disabilities, or characteristics of the environment in which they live.⁴

The theme addressed in the study in question aims to identify how depressive symptoms manifest themselves in institutionalized elderly people in long-term care homes, and through it demonstrate the role of nurses in carrying out preventive measures and care plans against depression.



2 METHOD

This is an integrative review of depressive symptoms in elderly people living in long-term care institutions, with 5 stages as a theoretical framework: formulation of the problem, data collection, evaluation of the data collected, analysis and interpretation of the results.

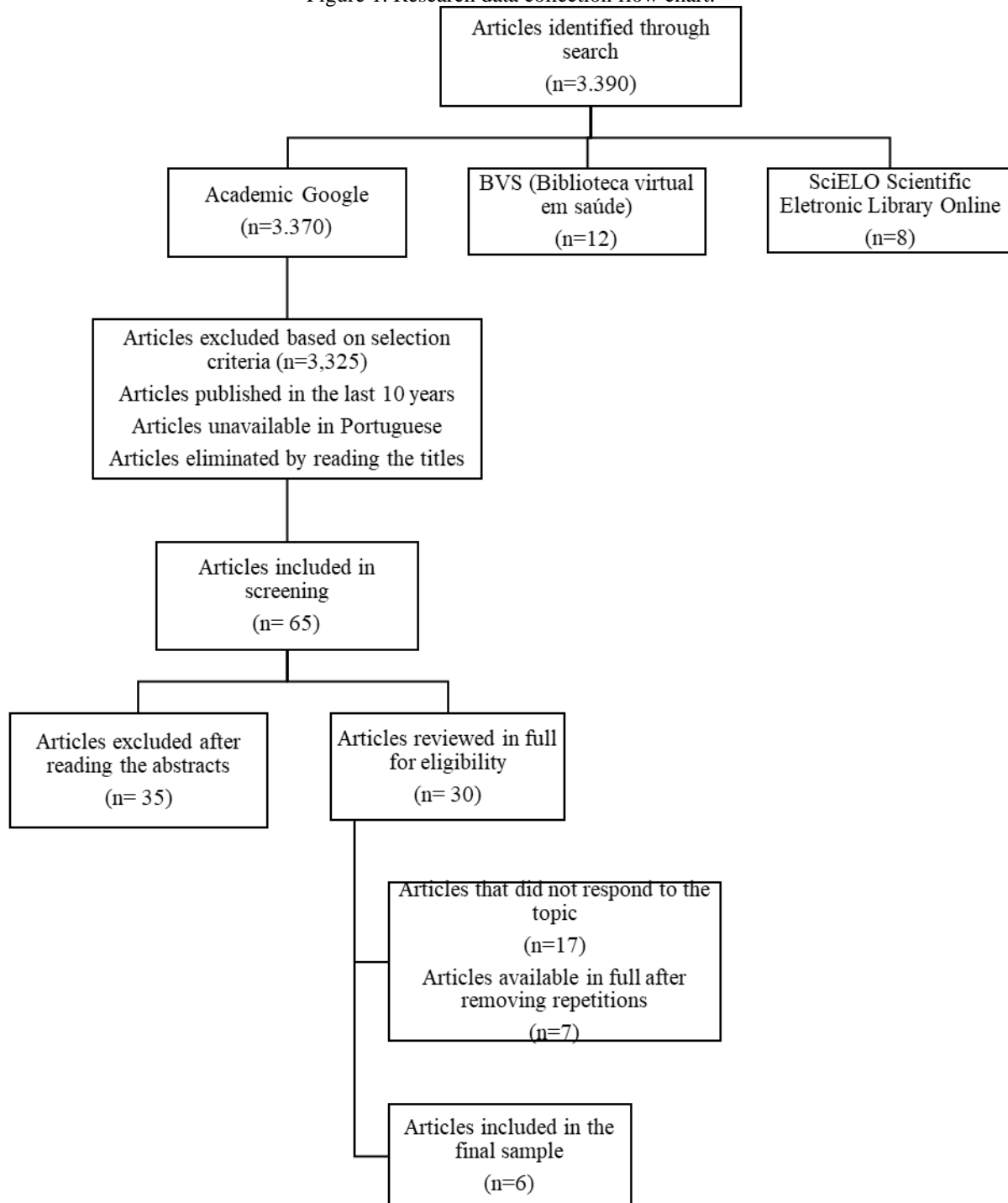
The following question was used: How do depressive symptoms manifest themselves in elderly people institutionalized in long-term care homes? The data collection was obtained between August and October 2023. The search for studies consists of the search for scientific articles published in the last ten years (2013-2023), being focused on the guiding question, published in the Portuguese language, and indexed in the following databases: Google Scholar, VHL (Virtual Health Library) and Scientific Electronic Library Online (SciELO). The descriptors used in the search were: Aged; Depression; Senility; Aging.

It was decided to include only articles published in the last ten years to insert updated data from studies in the area of interest. The choice of the inclusion criterion for articles related to the Portuguese language was due to the proficiency of the researchers. However, articles that were repeated among the databases and literature considered gray and unrelated to the proposed theme, articles that were not available in full, and articles that did not fit within the determined publication period were excluded. The flowchart shown in Figure 1 shows how the data collection and selection of articles took place, up to the final sample.

In the data collection stage, the following information was used as a selection instrument: Study identification data, such as title, author and year of publication, type of scientific journal and methodological characteristics of the study, such as type of study, objective and results.



Figure 1. Research data collection flow chart.



Source: Prepared by the researchers.

3 RESULTS

A total of 3,390 papers were found, and after screening according to the inclusion and exclusion criteria, 65 publications were selected, which were submitted to an exploratory reading, which is characterized by being a rushed reading, aiming to evidence if the text met the proposed objective, this moment resulted in the exclusion of 35 (thirty-five) works. Of this amount, 17 (seventeen) articles were



excluded because they did not correspond to the theme, so 7 (seven) were repeated on the data page. Thus, as the final sample of the study, we obtained 6 (six) articles.

For the analysis of the collected material, two synoptic tables were used, Chart 1 with 6 articles selected in chronological order that subsidized the integrative review, in the period from 2013 to 2023 and Chart 2 with Synthesis of objectives, main results and conclusion of publications.

Chart 1 – Presentation of the articles included in the integrative review.

N	Author / Year Language	Title	Method	Database	Level of Evidence
A1	Lima et al. 2018 Portuguese	A Study on Depression in Old Age	Exploratory research	Google Scholar	IV
A2	Paula et al. 2018 Portuguese	Nurses' actions in the face of depression in institutionalized older adults: prevention subsidies	Integrative review	Google Scholar	V
A3	Silva et al. 2021 Portuguese	Importance of identifying the nursing diagnosis of patients with senile depression in primary care	Experience report	Google Scholar	IV
A4	Pfutzenreuter et al. 2021 Portuguese	Meanings of Living with Depression in Old Age	Cross-sectional study	VHL	V
A5	Lenardt et al. 2021 Portuguese	Depressive symptoms and physical frailty in the elderly: an integrative review	Integrative review	SciELO	V
A6	Candido et al. 2023 Portuguese	Perceived characteristics of the living environment and depressive symptoms in community-dwelling older adults: a cross-sectional study	Cross-sectional study	SciELO	V

Source: Prepared by the researchers.

Table 2 - Summary of objectives, main results and conclusion of publications.

N	Objective	Main Results	Conclusion
A15	To verify the national scientific production on the relationship between depression, the elderly and nursing.	In view of the study carried out, it can be observed in Table 1 that there was no constancy in the publications found, showing oscillation in relation to the year of publication. In the years 2010, 2011 and 2013 there were no publications, and in the following years (2012 to 2016) the publications varied between 1 and 2 in each year.	In short, the results of this study allow us to emphasize the need for a research source that addresses this theme, inserting in the health category openings to assist the elderly and their peculiarities, giving voice to them, in exchange for making an improved search for the condition of the elderly, trying to understand them, understand their signs and symptoms that may develop the depressive condition.
A26	OBJECTIVE: To analyze an integrative review of the scientific literature on the	It was possible to verify an increase in the aging of the population and, consequently, an increase in the number	In view of this perspective, it is necessary for nurses to act in the care and prevention of



	role of nurses in the face of depression in institutionalized older adults, and their prevention subsidies.	of LTCFs. To this end, the emergence of depressive conditions in institutionalized elderly was diagnosed, where institutionalization can bring a feeling of isolation.	depression, since these professionals have greater contact with residents, being able to make care more humanized, welcoming, evaluative and comprehensive. However, there are still few studies related to nursing care for depressed older adults, especially institutionalized ones.
A37	To report the experience of identifying nursing diagnoses related to depression in the elderly in Primary Care, as well as to highlight the importance of nursing care for the promotion of the health of the elderly.	With the elderly depression scale, it was possible to classify it as mild depression. The resulting diagnoses found are: anxiety, fear, stress, and impaired memory.	The importance of the nursing diagnosis in the identification of depression in the elderly is evident, especially when they attend the Basic Health Unit (BHU), as these professionals will be able to use nursing consultations.
A48	To analyze the meanings attributed to the experience of depression by the elderly.	8 narratives were analyzed according to the Content Analysis methodology (Bardin, 2011), and the following categories were systematized: (I) Depression linked to social senses, grouping the narratives that point to the stigma of this psychic illness, mainly related to madness; (II) Feelings related to depression and its repercussions on social ties, including statements about irritability, discouragement and inhibition, and the need to recognize the other in relation to their suffering; and (III) Depression associated with the loss and grief of a lifetime, with a correlation between depression in old age and an accumulation of successive family losses.	The meanings linked to depression in old age identified in this research involve the difficulty of naming this suffering beyond the psychiatric diagnosis and highlight the need for the elaboration of grief and subjective support.
A59	To identify the relationship between depressive symptoms and physical frailty in older people through an integrative literature review.	Of the 486 articles found, 126 were excluded due to duplication, 339 because they did not meet the pre-established criteria, leaving 21 articles that made up the corpus of the review. An association between depressive symptoms and physical frailty in the elderly was evidenced, with the ability to predict each other, and is related to negative outcomes for the health of the elderly, among them: cognitive impairment, limitation of activities, increased mortality, among others.	Depressive symptoms and physical frailty are present among elderly people, with reciprocal association, negatively influencing their clinical condition. The results help to clarify these conditions and provide knowledge for the prevention and development of interventions in the gerontological area, benefiting the health of the elderly.
A610	OBJECTIVE: To verify the association between the perception of the living environment and the presence of depressive symptoms in community-dwelling older adults.	Significant negative associations were observed between the presence of depressive symptoms and the presence of food establishments (OR: 0.52; 95%CI: 0.28-0.98), health clinics and community centers (OR: 0.52; 95%CI: 0.28-0.96), outdoor gyms (OR: 0.38; 95%CI: 0.20-0.72), gyms and/or clubs (OR: 0.42; 95%CI: 0.19-0.89), better quality of sidewalks (OR: 0.37; 95%CI: 0.19-0.71),	It was concluded that there were inverse associations between better perceived characteristics of the environment and the presence of depressive symptoms in elderly people living in the community, demonstrating the importance of promoting strategies to improve the infrastructure of the



		presence of pedestrian signs (OR: 0.39; 95%CI: 0.18-0.84) and daytime walking safety (OR: 0.35; 95%CI: 0.16-0.76) and at night (OR: 0.40; 95%CI: 0.19-0.83).	neighborhood and the presence of depressive symptoms in this population.
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Source: Prepared by the researchers.

4 DISCUSSION

Brazil's population is aging astonishingly. As the age of the population increases, economic, physical, mental and other problems also appear, in addition to the elderly losing autonomy and becoming less active, leading to a decrease in quality of life, which leads to social isolation, which can lead to depression.⁴

In the elderly, depression is a complex syndrome, as the main factors are associated with old age, femininity, functional decline, chronic-degenerative diseases, cognitive impairment, social isolation, abandonment by the family, unsatisfactory social conditions, loss of a spouse, institutionalization, and use of some drugs.⁹

Depressive symptoms in the elderly usually manifest themselves through sudden mood swings, decreased pleasure in performing routine activities, significant weight loss or gain, hypersomnia or insomnia, fatigue, loss of energy, feelings of guilt, memory loss, recurrent thoughts of death and insufficiency.¹

In addition, depression is an important symbolic resource that encompasses a variety of cultural meanings. Depression as a multifactorial phenomenon requires a different epistemological approach to consider new ways of understanding and treating.⁷

Another point worth mentioning is anxiety, which is the complex behavioral stimulus that involves the individual's cognitive and external reactions to discomfort and/or tension in the face of facts interpreted as unknown and strange in relation to age, a disorder characterized by the change of role in the social space. It should be noted that family relationships, practical and professional losses reduce the satisfaction and standard of living of the elderly.⁹

Thus, the high prevalence of depressive symptoms among the elderly highlights the importance of investigating the risk factors that may contribute to the condition, particularly the risk factors that are the target of effective interventions, such as living environments. However, the relationship between the characteristics of the living environment and the presence of depressive symptoms in elderly Brazilians, especially those treated in primary health care (PHC), has not yet been fully clarified.³

Therefore, care for the elderly requires a collaborative effort between multidisciplinary health teams (especially primary care), older adults and their families. Primary care is considered the preferred entity for an integrated health system.⁹



Therefore, nursing plays an increasing role in the care of healthy older adults, aiming to maintain their independence and support their self-care to ensure and provide a better quality of life. The first point in the accompaniment of the elderly is undoubtedly the solidarity of the presence of health professionals, because when there is support in this sector, the elderly feel that they have a certain value, that "I am still important", and when they feel Welcomed, they value life more and are not easily overcome by depression and other illnesses.⁶

5 CONCLUSION

It is noticeable that the identification and understanding of depressive symptoms in older adults living in long-term care institutions is extremely important to ensure the well-being and mental health of this vulnerable group. The varied and often subtle symptoms of depression, such as sudden mood swings, decreased pleasure in performing routine activities, significant weight loss or gain, hypersomnia or insomnia, fatigue, loss of energy, feelings of guilt, memory loss, recurrent thoughts of death and failure, can go unnoticed, making it crucial to sensitize health professionals and caregivers to recognize and treat these signs early.

In addition, the promotion of a welcoming, nurturing, and socially engaged environment within LTCFs can play a significant role in preventing depression in older adults. Therapeutic intervention, which can include psychotherapy, emotional support, and, in some cases, medication, is key to improving the quality of life for older adults suffering from depression.

Ultimately, addressing depressive symptoms in older adults in LTCFs requires a holistic approach that considers not only clinical aspects, but also quality of life, social support, and the promotion of healthy aging. It is believed that this study will contribute positively to other academic research and to health professionals, improving the quality of care provided to the elderly in the early identification of depressive symptoms.



REFERENCES

ABRELPE. PANORAMA DOS RESÍDUOS SÓLIDOS NO BRASIL, Associação Brasileira das Empresas de Limpeza Pública e Resíduos Especiais, 2022. Disponível em: 21/11/2023.

ACRÍTICA. Novo aterro sanitário mata igarapé e coloca em risco a fauna e flora. Manaus, AM. 2023. Disponível em: <<https://www.acritica.com/manaus/novo-aterro-sanitario-mata-igarape-e-coloca-em-risco-a-fauna-e-flora-1.315864>>. Acesso em: 20/11/2023.

BRASIL. Constituição da República Federativa do Brasil de 1988. Brasília, DF: Presidente da República, 2016. Disponível em: <http://www.planalto.gov.br/ccivil_03/constituicao/constituicao.htm>. Acesso em 21/11/2023.

GRIMBERG, E., BLAUTH, P. Coleta Seletiva - Reciclando Materiais, Reciclando Valores. Revista Pólis, nº 31, 103 p., 1998. Disponível em: http://www.lixoecidadania.org.br/lixoecidadania/Files/m_coletaSeletiva/Coleta%20Seletiva.doc. Acesso em: 22/11/2023.

G1 AMAZONAS. Aterro sanitário de Manaus tem 'vida útil' até janeiro de 2024, aponta laudo técnico feito há cinco anos. 2023. Disponível em: <<https://g1.globo.com/am/amazonas/noticia/2023/08/25/aterro-sanitario-de-manaus-tem-vida-util-ate-janeiro-de-2024-aponta-laudo-tecnico-feito-ha-cinco-anos.ghtml>>. Acesso em: 19/11/2023.

G1 AMAZONAS. TCE suspende licenças que autorizavam construção de novo aterro sanitário de Manaus. Manaus, AM. 2023. Disponível em: <<https://g1.globo.com/am/amazonas/noticia/2023/08/28/tce-suspende-licencas-que-autorizavam-construcao-de-novo-aterro-sanitario-de-manaus.ghtml>>. Acesso em: 19/11/2023.

INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA. Glossário. Atlas Geográfico Escolar, 2000. Disponível em: <https://educa.ibge.gov.br/glossario.html?parent_id=372>. Acesso em: 22/11/2023.

KINNAMNAN, T. C. Examining the Justification for Residential Recycling. Journal of Economic Perspectives—Volume 20, Number 4—Fall 2006—Pages 219–232, 2006.

MEDEIROS, G. A.; REIS, F. A. G. V.; SIMONETTI, F. D.; BATISTA, G.; MONTEIRO, T.; SANTOS, L.F.S.; CAMARGO, V.; RIBEIRO, L. F. M. Diagnóstico da qualidade da água e do solo no lixão de Engenheiro Coelho, no Estado de São Paulo. V. 05, no 02, p. 169-186, 2008.

ONU BR – NAÇÕES UNIDAS NO BRASIL – ONU BR. A Agenda 2030. 2015. Disponível em: <<https://nacoesunidas.org/pos2015/agenda2030/>>. Acesso em: 22/11/2023.

PEIXOTO, Karina; CAMPOS, Vânia Barcellos Gouvêa; D'AGOSTO, Márcio de Almeida. A coleta seletiva e a redução dos resíduos sólidos. Rio de Janeiro: Instituto Militar de Engenharia, 2005.c. Acesso em: 21/11/2023.

Secretaria de Desenvolvimento Econômico, Ciência, Tecnologia e Inovação – SEDECTI. População estimada por bairro de Manaus-AM. Mapa da População. 2021. Disponível em: <https://www.sedecti.am.gov.br/wp-content/uploads/2021/09/mapa_da_populacao_por_bairro_de_manaus.pdf>. Acesso em: 21/11/2023.



SEMULSP, Secretaria Municipal de Limpeza Pública. Coleta Seletiva e Pontos de Entrega. Disponível em: <<https://www.manaus.am.gov.br/semulsp/servicos-semulsp/coleta-seletiva-e-pontos-de-entrega/>>. Acesso em: 16/11/2023.