

# FREQUENCY OF DEPRESSION AFTER THE DEATH OF SPOUSE

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## ABSTRACT:

**Background:** Depression in old age is a pathological process. Approximately a fifth of people over 55 years old have mental disorders unrelated to the normal ageing process. The majority copes with ageing and many feel happy and fulfilled.

**Objective:** To assess the frequency and the severity of depression during the first three months after the death of a spouse.

**Design:** This was a hospital based, descriptive study.

**Place and duration:** The study was conducted in the Department of Psychiatry, Sir Ganga Ram Hospital and Free Psychiatric Clinic, Ahbab Hospital, Qila Lachman Singh, Ravi Road, Lahore from June 2003 to Dec 2003.

**Patients and Methods:** One hundred and seven patients, both male and female, aged 45 to 65 years, suffering from depressive disorder diagnosed on the basis of DSM-IV criteria and whose spouse had died during the last three months were assessed for the severity of depressive symptoms by using Hamilton Rating Scale for Depression (HAM-D). A semi-structured interview was used for demographic details.

**Results:** 77 % males and 19 % females scored in the category of severe depression in HAM-D during three months after the death of spouse. Suicidal thoughts and poor drug compliance are also reported to be higher in males as compared to the females.

**Conclusion:** Depression is common after the death of spouse and clinicians should make the strategies to improve the quality of life of the elderly.

**KEY WORDS:** Depression, death, spouse.

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## INTRODUCTION

Depression in the old age is a common psychiatric illness. Approximately, one fifth of people over 55 years old have mental disorders<sup>1</sup>. Majority of people cope with aging and many feel happy and fulfilled. However there is a bias among health professionals and community in general to accept lower functioning

and more symptoms in older people<sup>2</sup>.

Major depressive syndromes have been found to be prevalent, disabling, and often persistent during the stress of bereavement. In one study 350 widows and widowers were evaluated for depressive symptoms and syndromes at 2, 13 and 25 months after the death of their spouse. On the other hand, 126 demographically similar men and women were also evaluated. It was found that Symptomatic Major Depression (SMD) syndromes and Subsyndromal Symptomatic Depression (SSD) were prevalent throughout the first two years of widowhood and are associated with substantial morbidity in widows and widowers during the first 2 years of bereavement.<sup>3</sup>

One study conducted in United States (US) took 48 adult children and spousal care givers of hospice parents and 36 controls. Like in the

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present study, the researchers in the previous study took Hamilton Rating Scale for Depression (HAM-D) for the severity of depression. The results reported that depression and other indices of psychological distress are highest during the care giving period and during the first few months after the death, before decreasing over the duration of the first year.<sup>4</sup>

Self-report measures of grief, depression, and general psychopathology were studied in widows and widowers over a 2.5 year period following death of their partner in California, USA. Results indicated that experience of grief persists for at least 30 months in both older men and women who have lost their spouse.<sup>5</sup> Another study showed that co morbid medical conditions, tendency of the patients to somatise, cognitive deterioration, and multiple life events like bereavement, retirement, moving to smaller housing), all further complicate the diagnostic process.<sup>6</sup>

All these factors lead to different ailments in the elderly. They may lead to physical disorders or medical disorders co morbid with psychiatric disorders. Among the psychiatric disorders, depression is one of the commonest disorder. Although genetic factors play an important role but it might be expected that loneliness of old age would be important predisposing factors for depressive disorder.

The present study aims to assess the frequency and the severity of depression during the first three months after the death of a spouse.

### METHODOLOGY

This was a hospital based, descriptive study, conducted in the Department of Psychiatry, Sir Ganga Ram Hospital and Free Psychiatric Clinic, Ahbab Hospital, Qila Lachman Singh, Ravi Road, Lahore from June 2003 to Dec 2003.

The sample consisted of 107 patients, both male and female, aged 45 to 65 years, diagnosed by the consultant Psychiatrist as suffering from depression according to Diagnostic and Statistical Manual fourth manual (DSM-IV) and whose spouse had died during the last three months. Patients with serious physical

illness and co morbid psychiatric disorders were excluded from the study.

The sample was evaluated on a semi structured interview including the demographic details after obtaining the informed consent. To assess the severity of depression, Hamilton Rating Scale for Depression (HAM-D) was used.

### RESULTS

Out of the total sample, 70 (65 %) were males and 37 (35 %) were females with 54.40±7.62 years mean age. 78 (73 %) belonged to urban background and 29 (27 %) were from rural background. 26 (24 %) were illiterate, 53 (33 %) completed ten years of education and 46 (43 %) patients completed education up to graduate level. 22 (21 %) were employed and 85 (79 %) were unemployed.

Results indicate that 54 (77 %) males and 7 (19 %) female scored higher (26 and above) on HAM-D, whereas 11 (16 %) male and 18 (49 %) female falls in the category of moderate depression and 5 (7 %) male and 12 (32 %) female falls in the category of mild depression on HAM-D. This indicates that majority (80 %) males were having severe depression and majority (49 %) females were having moderate depression. This shows that males are more depressed than females.

Out of the total sample, 28 (40 %) males and 5 (14 %) females reported suicidal thoughts. 24 (34 %) males and 10 (27 %) females reported poor drug compliance. This indicates that suicidal thoughts and poor drug compliance are reported to be higher in males as compared to the females.

Table-I: Percentage of males and females on the three categories of depression: mild, moderate and severe of HAM-D

Categories on HAM-D	Male		Female	
	n	%	n	%
Mild	5	7	12	32
Moderate	9	13	18	49
Severe	56	80	7	19

n = number of cases

## DISCUSSION

Present study shows that males are more depressed than females during first three months after the death of spouse. The results of the present study are similar with the study conducted in California.<sup>4</sup>

One study assesses the frequency of depression during the first 13 months after the death of a spouse. The measures used were Zung Depression Scale (ZDS) and the Hopkins Symptoms Checklist (HSC). The researcher completed assessment on three levels, 2, 7 and 13 months after the death.<sup>9</sup> In spite of using different assessment tools and research design, the results of the present study are in line with the previous one.

Another study reports that there is a significant association between depressed mood, loss of loved one and suicidal behaviour for both males and females. The demographic analyses reported that females were more likely to report suicidal thoughts than males.<sup>10</sup> On the other hand, the results of the present study show that suicidal thoughts are more in males than in females. The results are similar with another study conducted in US.<sup>11</sup>

Present study emphasizes that mental health professionals have to be careful when a patient reports suicidal ideation after the death of spouse and broken relationships because patient feels inadequacy.

Chentsova et al, in one of their study reported that depression and other indices of psychological distress are highest during the care giving period and during the first few months after the death. The results are similar as reported in the present study.<sup>4</sup>

Depression is common after the death of spouse and clinicians should maintain a high index of suspicion for the possibility of depression, particularly in young widows and widowers who have a past history of depression or who experience a full depressive syndrome soon after the loss.<sup>9</sup> Present study also focuses the same issue.

**Limitations of the study:** This is a hospital based descriptive study and the number of fe-

males enrolled are much less 35% as compare to males 65%. Hence there is a need for further studies enrolling equal number of male and female to find out the prevalence of depression after the death of their spouse.

**Suggestions:** The results of the present study raise the importance of education of care givers of male depressed patients after the death of their spouses. In addition physical complaints reported by depressed patients require early recognition and managements. Male depressive patients after deaths of their spouses require special attention with particular emphasis to suicidal ideation and worsening of physical complaints.

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