

Age-Related Ailments Flag Depression

BY MIRIAM E. TUCKER
Senior Writer

NATIONAL HARBOR, MD. — Weight loss, verbally abusive behavior, and moderate pain were all significant predictors of a new diagnosis of depression among established nursing home residents in a longitudinal analysis.

Studies have shown that depression affects 20%-55% of nursing home residents, but the condition frequently goes unrecognized. Developing a set of observable indicators of depression may facilitate earlier diagnosis and treatment by nursing home staffs, said Dr. Lorraine J. Phillips and her associates in a poster at the annual meeting of the Gerontological Society of America.

The data were taken from 13,588 nursing home residents who were among the 127,587 in the Missouri Minimum Data Set (MDS) from Jan. 1, 2003, to March 31, 2005. Among the inclusion criteria were two sequential assessments 90 days apart (excluding admission and discharge), age 65 years and older, no prior diagnosis of depression or use of antidepressants, and no severe cognitive impairment.

Mean age of the study population was 85 years, 74% were female, and 88% were white. More than 66% were widowed, 19.5% married, and 12% had never married. About 49% had less than a high school education, 37% had finished high school, and 14% had a college education.

Documentation of weight loss at the study's first assessment was associated with a significantly increased chance of being diagnosed with depression between the first and second assessments (odds ratio 1.68). Verbally abusive behaviors, such as threatening, screaming, or cursing at others, also predicted a depression diagnosis between the assessments (OR 1.44). Moderate pain was a third significant predictor (OR 1.43), reported Dr. Phillips of the Sinclair School of Nursing at the University of Missouri-Columbia, and her associates.

Conversely, frequent urinary incontinence was significantly associated with a lower incidence of depression (OR 0.70). Post hoc analysis showed a correlation between incontinence and cognitive impairment, suggesting that the lower incidence of depression being diagnosed in nursing home residents can be explained by cognitive impairment impeding the recognition of depression, the investigators said.

Never being married also predicted a lower incidence of depression (OR 0.66), as did age 95 and above (OR 0.70).

The University of Missouri MDS and Quality Research Team funded the research. The team began work in 1993, and members have received funding since 1994 through the Missouri Division of Aging, the Health Care Financing Administration, the National Institute for Nursing Research, the Agency for Health Care Policy and Research, and other groups. ■

Exemestane Shows Scant Effect on Cognition

BY KERRI WACHTER
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SAN ANTONIO — Adjuvant exemestane appears to have little effect on cognitive function in postmenopausal women with breast cancer, but women on adjuvant tamoxifen perform significantly worse than do healthy controls in several cognitive domains after 1 year of treatment, based on results of a sub-study of the TEAM (Tamoxifen Ex-

emestane Adjuvant Multicenter) trial.

After 1 year, researchers found that there were no significant differences in cognition between women who received adjuvant exemestane (Aromasin) and healthy controls after adjustment for baseline neurocognitive test scores and other covariates.

However, those women who received adjuvant tamoxifen performed significantly worse on verbal memory and executive functioning than did

healthy controls. In addition, the tamoxifen groups also performed worse than exemestane users on information processing speed, Dr. Christina M. Schilder reported in a poster presentation at the San Antonio Breast Cancer Symposium.

"Our results suggest that 1 year of adjuvant exemestane treatment is advantageous, compared with 1 year of adjuvant tamoxifen treatment with respect to cognitive functioning in post-



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