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Nota di contenuto	Cover; Half Title Page; Also from Gary J. Kennedy; Title Page; Copyright; Dedication; About the Author; Preface; Acknowledgments; Contents; 1. The Problem of Depression in Late Life; Epidemiology of Depression; Depressive Conditions Other Than Major Depression; Psychotic Depression; Bipolar Depression; Vascular Depression; Mixed Anxiety-Depression; Affective Syndrome of Alzheimer's Disease; Conclusion; 2. What Causes Depression in Late Life and What Makes It Difficult to Treat?; Etiology; What Makes Depression Difficult to Treat?; Conclusion; 3. Pharmacotherapy 6. Diet, Supplements, and ExerciseEvidence Linking Advanced Age, Diet, and Depression; Is There an Antidepressant Diet?; Vitamins, Minerals, and Supplements; Counseling and Behavioral Interventions for a Better Diet; The Evidence on Exercise; Motivating Patients to Exercise; How to Prescribe Exercise; Conclusion; 7. Electroconvulsive Therapy; What Is ECT and How Is the Treatment Performed?; How Does ECT Work?; When Is ECT Indicated and Is It Ever the Treatment of Choice?; Benefits of ECT; Risks and Burdens of ECT; Informed Consent for ECT;

Conclusion

8. Reducing the Risk of Suicide in Late LifeSuicide Rates among Older Adults; Risk of Suicide among Older Adults; Collaborative Care, SSRIs, and Suicide Prevention in Primary Care; Reducing Suicidality Beyond Primary Care; Reaching Males; Insights from the Armed Services; Conclusion; 9. Prevention of Depression: Implications forCollaborative Care; The Disease Burden of Depression; The Challenge of Risk Identification for Depression; Examples Specific to Depression; Prevention: When and with Whom?; Intervention for the Depressive Prodrome: Where to Begin? Collaborative Care Management: Implications for Depression Prevention

Sommario/riassunto

Written for a broad range of mental health professionals, this book explains why depression can be challenging to treat in older adults and describes the most effective interventions. Noted geriatric psychiatrist Gary J. Kennedy draws on extensive clinical experience and research to present current best practices in pharmacotherapy, psychotherapy, other psychosocial and lifestyle interventions, and electroconvulsive therapy. Depressive disorders complicated by psychosis, mania, dementia, and bereavement are addressed in detail, as is suicide prevention. Kennedy emphasizes the importance of int