Post-Stroke Depression

Depression: It's Not Just Down in the Dumps

Did you know...
- Depression rates are highest for seniors living in LTC Homes?
- An average of 25% of LTC residents have had a stroke?
- Up to half of all people who have had a stroke will experience some degree of depression?
- Other causes for depression include grief, medications, Parkinson’s & Alzheimer’s disease, alcohol abuse and sleep disorders.

Post-Stroke Depression

Be aware...
- Residents may become depressed right after a stroke or not until years later.
- Sometimes the signs of depression are mistaken for the effects of the stroke or aging.
- Signs of depression can be overlooked when a resident has difficulty speaking or thinking.
- It’s important for a doctor to decide if the resident is depressed.

YIELD:

Signs of Depression
- Appetite and weight changes
- Trouble sleeping or always feeling tired
- HAdeaches, chronic pain, digestive problems
- Memory and concentration problems
- Problems making decisions
- Feeling sad, anxious, guilty, irritable or hopeless
- Feeling worthless
- Loss of interest in everything
- Withdrawing from others
- Confusion, feeling of living in a fog
- Negativity, feeling gloomy and dark

The Impact of Depression
- Depression can:
  - Decrease energy and motivation
  - Decrease thinking ability
  - Decrease ability to care for and about oneself
  - Decrease participation in rehabilitation
  - Increase death from stroke
  - Lead to suicidal thoughts

CAUTION:

Remember! Many times, depression is not recognized or treated so it is important that you are aware of the signs of depression and share this information with the team.

On the Road To Recovery

Go

- The first step is to tell your team if you notice the signs of depression.
- The resident will need to be seen by a doctor.
- The most common treatments are medications and counseling.

- Expect the resident to get better gradually and offer gentle encouragement. Even though activity and company are needed, too many demands can cause feelings of failure.
- Medications may take up to six weeks before you notice a change.
- What you can do
- Talk to the resident’s family and friends. Find out what they were like before the stroke or other illness.
- Remind family that depression is a medical illness.
- Find activities that make the resident feel better (exercise, music, watching videos, reading).
- Help resident plan and structure the day.
- Break large tasks into smaller ones and encourage resident to do as much as possible.
- Always communicate with caring and hope. Be accepting. Take the time to listen and let the resident talk about how they feel.
- Be positive. Let the resident know when you see improvement.
- If the resident is feeling pain, make sure they have pain treatment.
- Have regular team discussions. Learn about the resident and share what you know. It can help you identify mood changes.
- If you ever have reason to believe someone is thinking of harming themselves or ending their life, get help immediately.


For more posters and resources on stroke best practices, please contact:
Gwen Brown, Regional Community & LTC Coordinator, Stroke Network of Southeastern Ontario
(613) 549-6666 x 6867 email: gwen.brown@kingstonhsc.ca

STROKE NETWORK of Southeastern Ontario