



Information Sheet

CIHI presents **Series on Seniors** to bring together and profile data and reports from different CIHI areas, on topics related to seniors' health. Seniors in this series are defined as persons age 65 and older.

Who We Are

Established in 1994, CIHI is an independent, not-for-profit corporation that provides essential information on Canada's health system and the health of Canadians. Funded by federal, provincial and territorial governments, we are guided by a Board of Directors made up of health leaders across the country.

Our Vision

To help improve Canada's health system and the well-being of Canadians by being a leading source of unbiased, credible and comparable information that will enable health leaders to make better-informed decisions.

Series on Seniors

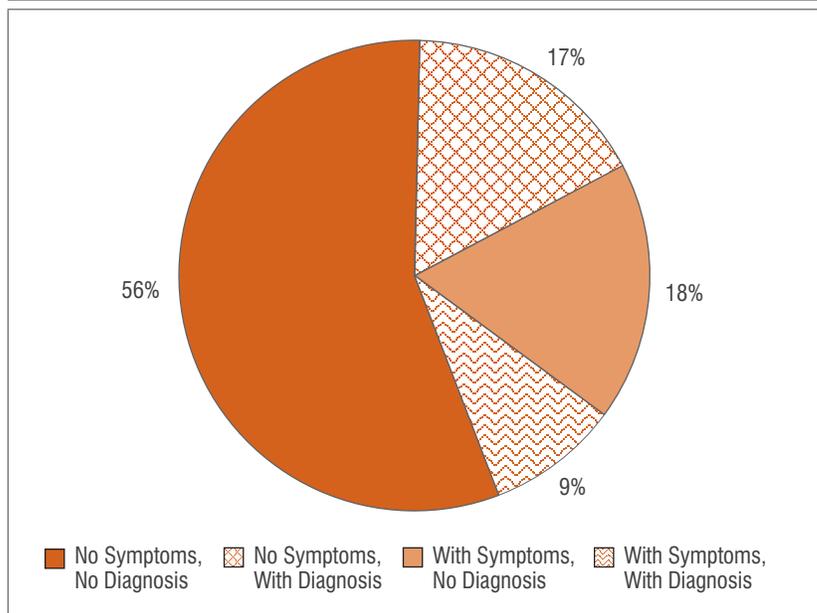
Seniors and Mental Health

Residential Care: Focus on Depression

Based on a sample of nearly 50,000 seniors living in residential care facilities (long-term care, nursing or personal care homes) in five Canadian jurisdictions, we know the following:

- Nearly half (44%) had a diagnosis and/or symptoms of depression.
- Eighteen percent of the total sample had symptoms of depression with no documented diagnosis. These seniors were less likely to receive specialized assessment and treatment.
- Those diagnosed with depression were much more likely to receive antidepressant medications—twice as likely, compared to those with symptoms only and lacking diagnoses.
- Whether diagnosed or undiagnosed, seniors with symptoms of depression were more likely to experience significant medical, social, functional and quality-of-life challenges.

Figure 1: Distribution of Depression Diagnoses and Symptoms in Residential Care Seniors, 2008–2009



Source

Continuing Care Reporting System, Canadian Institute for Health Information.

More information related to this topic can be found in the following CIHI databases:

Continuing Care Reporting System (CCRS)
www.cihi.ca/ccrs

Discharge Abstract Database (DAD)
www.cihi.ca/dad

Home Care Reporting System (HCRS)
www.cihi.ca/homecare

Hospital Mental Health Database (HMHDB)
www.cihi.ca/mentalhealth

Hospital Morbidity Database (HMDB)
www.cihi.ca/morbidity

National Ambulatory Care Reporting System (NACRS)
www.cihi.ca/nacrs

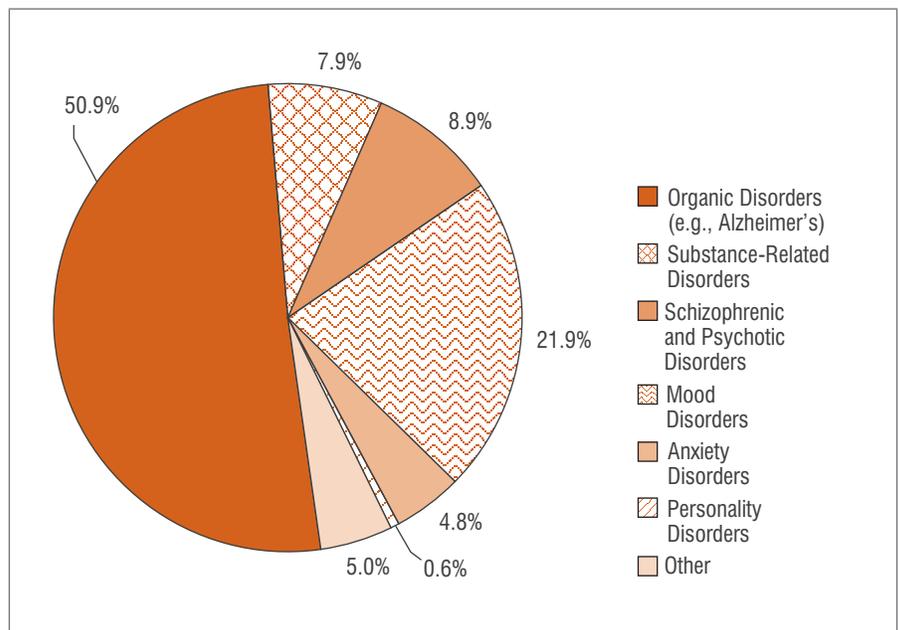
National Prescription Drug Utilization Information System (NPDUIS) Database
www.cihi.ca/drugs

Ontario Mental Health Reporting System (OMHRS)
www.cihi.ca/omhrs

Hospitalizations Related to Mental Health

- In 2005–2006, there were 32,196 hospitalizations for a mental illness among seniors in acute care settings in Canada.
- Organic disorders—those defined by a detectable physiological change in an organ, usually the brain—such as Alzheimer’s made up roughly half (51%) of the mental illness diagnoses among hospitalized seniors.
- The second most common mental illness diagnoses were mood disorders, such as depression (22%), followed by schizophrenic and psychotic disorders (9%).
- Hospital stays for mental illness are much longer for seniors than for other age groups. In 2005–2006, seniors were hospitalized for 29 days on average, compared to 16 days for those age 45 to 64.
- Just fewer than one-quarter (23%) of hospitalized seniors were also concurrently diagnosed with drug- or alcohol-related disorders.

Figure 2: Mental Health Diagnoses Among Hospitalized Seniors, 2005–2006



Source
National Prescription Drug Utilization Information System Database, Canadian Institute for Health Information.

Bibliography

Canadian Institute for Health Information, *Antipsychotic Use in Seniors: An Analysis Focusing on Drug Claims, 2001 to 2007* (Ottawa, Ont.: CIHI, 2009).

Canadian Institute for Health Information, *Depression Among Seniors in Residential Care* (Ottawa, Ont.: CIHI, 2010).

Canadian Institute for Health Information, *Hospital Mental Health Services in Canada, 2005–2006* (Ottawa, Ont.: CIHI, 2008).

Need more information?

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Drug Use: Focus on Antipsychotics

Thirty-eight percent of nursing home residents on public drug programs made claims for antipsychotics, compared to only 3% of residents in the community. The higher prevalence of dementia among nursing home residents is likely a contributing factor. (Data is from 2006–2007, based on three provinces.)