

PREVENTION OF LATELIFE DEPRESSION%0A

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Despite a number of promising risk factors (for example, diet, exercise, vascular risk factors, homocysteine and insomnia), universal prevention of late-life depression (acting to reduce the impact of risk factors at the population level) has no current evidence base, although a population approach might mitigate suicide.

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CONCLUSION: Interventions which work in preventing late-life depression include antidepressant medication in standard doses and Problem-Solving Treatment. When integrated into a care model, such as collaborative care, prevention is feasible but more economic studies are needed.

[Depression in Late-Life: a Focus on Prevention](#)
Depression is a leading cause of disease burden, disability and distress for millions of older adults. Thus, prevention of late-life depression is a priority research area. This article addresses the science of late-life depression prevention with the following: 1) an introduction to the Institute

[Late-Life Depression | Psychiatric Times](#)
Late-life depression is an umbrella term that covers a range of depressive symptoms from mild to severe in an older adult (usually defined as aged 65 years or older). 4,7 The core symptoms are listed in Table 1.

Poor sleep quality and late-life depression among the ...

Table 2 showed that poor sleep quality had significantly direct effect on perceived stress (0.624,P < 0.001) and late-life depression (0.379,P < 0.001). In addition, perceived stress has direct effect on late-life depression (0.329,P < 0.001). Furthermore, these results reveal that the relationship between poor sleep quality and late-life depression was partially mediated by perceived stress. A

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