

Questions and Answers to Depression/Nutrition Case:

1. How do you evaluate decreased intake and possible weight loss?
 - A specific prior weight would be helpful
 - A review of her meals over the last few day and/or shopping habit might help
 - If her clothes are loosely fitted and previously fit well, it may indicate weight loss.
 - Grandson has been with her and should be able to review the last 24 hours of intake including the proportion of food eaten, etc.
2. What factors might be contributing to worsening mood cognition in this patient?
 - Both Depression and Malnutrition can mimic cognitive impairment
 - Social isolation
 - New medications (b-blockers)
 - Alcohol use
3. How do you differentiate depression from dementia in a patient such as this?
 - Onset and trajectory can help in some cases. Depression may develop more more acutely and progress quickly, though patients vary widely.
 - Vegetative symptoms (eg, sleep and appetite disturbances, somatic complaints) are common findings suggestive of depression in older adults. Younger patients are more likely to present with subjective dysphoria or a feeling of sadness.
 - Depression may be marked by inattention to cognitive assessments.
 - Cognitively impaired patients often will make an effort, unless they are trying to conceal their deficits.
4. What else do you want to know about her mental/ neurological health?
 - Personal History of depressed mood
 - Family History of depressed mood
 - Recent losses or changes in social supports
5. What interventions have been shown in randomized controlled trials to improve cognition?
 - Both *cognitive therapy* and several *medication* classes have been shown to improve mood in older adults with depression

6. What interventions have been shown in randomized controlled trials to improve nutritional status?
- Because of the multifactorial nature of nutritional problems in the elderly, few intervention trials have been completed with a goal of improving nutrition.