

Report: Too little mental health care for boomers

WASHINGTON (AP) — Getting older doesn't just mean a risk for physical ailments like heart disease and bum knees: A new report finds as many as one in five seniors has a mental health or substance abuse problem.

And as the population rapidly ages over the next two decades, millions of baby boomers may have a hard time finding care and services for mental health problems such as depression because the nation is woefully lacking in doctors, nurses and other health workers trained for their special needs, the Institute of Medicine said recently.

Instead, the country is focused mostly on preparing for the physical health needs of what's been called the silver tsunami.

"The burden of mental illness and substance abuse disorders in older adults in the United States borders on

a crisis," wrote Dr. Dan Blazer of Duke University, who chaired the Institute of Medicine panel that investigated the issue. "Yet this crisis is largely hidden from the public and many of those who develop policy and programs to care for older people."

Already, at least 5.6 million to 8 million Americans age 65 and older have a mental health condition or substance abuse disorder, the report found — calling that a conservative estimate that doesn't include a number of disorders. Depressive disorders and psychiatric symptoms related to dementia are the most common.

While the panel couldn't make precise projections, those numbers are sure to grow as the number of seniors nearly doubles by 2030, said report co-author Dr. Peter Rabins, a psychiatrist at Johns Hopkins Uni-

versity. How much substance abuse treatment for seniors will be needed is a particular question, as rates of illegal drug use are higher in boomers currently in their 50s than in previous generations.

Mental health experts welcomed the report.

"This is a wake-up call for many reasons," said Dr. Ken Duckworth of the National Alliance on Mental Illness. The coming need for geriatric mental health care "is quite profound for us as a nation, and something we need to attend to urgently," he said.

Merely getting older doesn't make mental health problems more likely to occur, Rabins said, noting that middle age is the most common time for onset of depression.

But when they do occur in older adults, the report found that they're too often

overlooked and tend to be more complex. Among the reasons:

- People over 65 almost always have physical health problems at the same time that can mask or distract from the mental health needs. The physical illnesses, and medications used for them, also can complicate treatment. For example, up to a third of people who require long-term steroid treatment develop mood problems that may require someone knowledgeable about both the medical and mental health issues to determine whether it's best to cut back the steroids or add an antidepressant, Rabins said.

On the other side, older adults with untreated depression are less likely to have their diabetes, high blood pressure and other physical

conditions under control — and consequently wind up costing a lot more to treat.

- Age alters how people's bodies metabolize alcohol and drugs, including prescription drugs. That can increase the risk of dangerous overdoses, and worsen or even trigger substance abuse problems.

- Grief is common in old age as spouses, other relatives and friends die. It may be difficult to distinguish between grief and major depression.

That also means a loss of the support systems that earlier in life could have helped people better recover from a mental health problem, said Dr. Paul D.S. Kirwin, president of the American Association for Geriatric Psychiatry. Adding stress may be loss of a professional identity with retirement, and

the role reversal that happens when children start taking care of older parents.

"There'll never be enough geriatric psychiatrists or geriatric medicine specialists to take care of this huge wave of people that are aging," Kirwin said.

The Institute of Medicine report recognizes that. It says all health workers who see older patients — including primary care physicians, nurses, physicians' assistants and social workers — need some training to recognize the signs of geriatric mental health problems and provide at least basic care. To get there, it called for changes in how Medicare and Medicaid pay for mental health services, stricter licensing requirements for health workers, and for the government to fund appropriate training programs.

Get answers to your health coverage questions

No matter how savvy you are, if you've ever used the health care system, there's a good chance that you've been confused by something relating to your health coverage at one point or another. It could be a letter from Medicare or a private insurance company saying that a service you need isn't covered, or that your coverage is changing. It might be a bill from a doctor or lab that you didn't expect and don't understand. It might be a brochure you read or a sales pitch you heard that left you with a lot of questions.

Health coverage can be confusing. Over the past decade, the number of coverage choices has increased. Television, mail, and the internet now bring us an overwhelming amount of information, and it's not always reliable. So where can you turn for personalized, un-

biased help with health insurance problems? Fortunately, there are free resources in every community that can provide you (or a loved one) with individualized counseling and assistance.

If you have a question about Medicare coverage, a good place to start is the 1-800-MEDICARE hotline. The staff is trained to answer the most commonly asked questions about Medicare benefits, including individualized questions about your coverage. It's a great way to get basic personalized information.

If you need one-on-one counseling to take a closer look at your problem and help you figure out your options, you can contact your local state health insurance assistance program (SHIP). SHIPs exist in every state, though the names of the organizations

vary from state to state. They are designed to provide free, unbiased counseling and assistance to people with Medicare. This help can be as simple as explaining how benefits work. It can involve meeting face to face or over the phone to figure out which prescription drug, Medigap, or Medicare Advantage plans make the most sense for your particular situation, and which additional benefits you might be eligible for. Or, if you disagree with a bill you got or with a decision by Medicare or your Medicare Advantage or drug plan, SHIP counselors can help sort it out and file a request for an exception or an appeal (if needed). Many SHIP counselors are trained volunteers who are members of the community. To contact your

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