

Treating depression in older cancer patients

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Depression in older cancer patients is unfortunately common and often goes unrecognized and untreated. The American Cancer Society estimates about 1 in 4 people with cancer may have clinical depression, that is, not just having a bad day but feeling distress that impairs daily life and that lasts for several weeks or more. This is a problem because depressed cancer patients may feel less motivated to follow treatment plans, may not eat well or exercise, and may not care about getting better.

However, there is hope, according to results published this week in the *Journal of General Internal Medicine* from the [Improving Mood-Promoting Access to Collaborative Treatment \(IMPACT\)](#) study. Cancer patients were divided into two groups, one receiving IMPACT and the other receiving usual care. After six months, 55 percent of IMPACT patients showed a 50 percent or greater reduction in depressive symptoms. Of the usual care patients, about 34 percent showed a reduction in symptoms. In addition, IMPACT patients experienced greater remission rates, less fatigue, more depression-free days, and greater quality of life than the usual care patients.

The IMPACT program differs from usual care in that participants work with a depression care manager in their primary care provider's office or clinic. The depression care manager provides counseling, medication, or a combination of both to the patient and is supervised by a psychiatrist and the primary care physician. The IMPACT program was tested across the country in primary care facilities that serve a variety of socioeconomic and ethnic populations.

With the growing number of older cancer patients and survivors, it is important to have options, especially outside specialized cancer centers. Hopefully, results from the IMPACT study will increase the availability of depression care managers in primary care facilities, which will result in more patients and survivors being treated for this serious medical condition.