

Short Communication

Battling Depression in Elderly During COVID-19

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Aging comes with a myriad of psychological, social, and environmental vulnerabilities. Frailty in older adults brings in the risk of various infections and decrease in all forms of immune response. In addition, elderly have multiple comorbidities and increased hospitalizations which increase the chance of contracting the infection during a pandemic. In a correlation of COVID-19 actuated pneumonia among youthful matured and old patients were found with that movement of sickness and danger of death is multiple times higher in the more established age gathering. Pandemics have noteworthy psychosocial sway. Wellbeing uneasiness, alarm, change issues, discouragement, interminable pressure, and sleep deprivation are the significant branches.

Falsehood and vulnerability offer ascent to mass hysteria. Among them, the older are particularly defenceless. Social confinement of the older as a "genuine general wellbeing worry" due to their profile psychosocial weaknesses. Social separating, in spite of the fact that a significant system to battle COVID-19, is likewise a significant reason for loneliness, particularly in settings like nursing-care or old-age homes which is an independent risk factor for depression, anxiety disorders, and suicide. Social connectedness is essential during the general wellbeing breakdown, all the more so when "ageism" turns into a factor for slander in this minimized populace. This leads to neglect and therapeutic nihilism. Most seniors are not happy with advanced mobile phones or on the other hand the media language, henceforth the safety measures for a pandemic need to be disclosed to them in their own basic terms. Psychological weakness, and problems like wandering, irritability, and psychotic symptoms can exacerbate the frenzy and make it hard for them to follow the precautions of distancing and hand hygiene. Furthermore, people with mental health disorders (including elderly) are more vulnerable and are prone to exacerbations during such a crisis.

Discrimination and lack of health care utilization are other factors contributing to their poor care during the COVID-19 outbreak. The considerable pressure created by "information overload" can prompt suspicion and medicinal services related doubt which may lead them to keep away from isolate, having critical open wellbeing results. Change of focus of elderly people is the easiest way of protecting them from depression like distract them from loneliness like take up cooking or grow your own vegetables? Focusing on a project or goal, even a small one, can give them a welcome break from negative thoughts and worries and add a sense of meaning to their days. Find simple sources of joy. While you can't force them to have fun, you can push them to do things that will boost their mood throughout day. Take a stab at tuning in to elevating music or

finding a reason to laugh by watching funny videos on Youtube or episodes of their favourite sitcom.

Spending time in nature whether it's walking in their house park, or try playing with your grandchildren's or a pet they'll benefit as much as they will. Cut off their utilization of news. Truly, they need to remain educated, however over consuming sentiment news or questionable web-based social networking inclusion will just fuel their pessimism and dread. Breaking point how frequently you check news or web-based social networking and bind themselves to respectable sources. Establishing and maintaining a daily routine, by trying few things as mentioned we can engage elderly people and save them from depression. Mental health is the foundation of general wellbeing, all the more so in the older.

As the requirement for a "viral fix" shrouds significance of mental health the worldwide frenzy just guides in expanding the spread. Lessons learnt from earlier pandemics like SARS have proved that customary telephonic advising meetings, sound contact with family, pertinent and refreshed data, thinking about the overall clinical and mental needs, and regarding their own space and respect are significant segments of mental health care in the elderly. This warrants sensitization at all levels for early detection of mental health care needs and plan appropriate interventions, especially for the vulnerable old aged population.

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