Seniors Underuse Outpatient Mental Health Tx

BY HEIDI SPLETE
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WASHINGTON — Only 2.5% of adults aged 65 years and older use outpatient mental health services, compared with 7.1% of adults aged 18-64 years, Bradley E. Karlin said at the annual meeting of the Gerontological Society of America.

Based on data from the 2001 National Survey on Drug Use and Health, older Americans continue to underuse mental health services, despite their need for them, said Mr. Karlin, a doctoral candidate in clinical psychology at Texas A&M University, College Station.

“One of the most disconcerting findings in the mental health literature is the underuse of mental health services by the older population,” he noted.

Mr. Karlin and his coauthor, Michael Duffy, Ph.D., of Texas A&M University, conducted a logistic regression analysis to identify factors relating to unmet mental health needs and use of outpatient treatment. Older adults identified fewer mental health problems than did younger adults in the survey and had lower rates of serious mental illness. However, only 18% of older adults with serious mental illness and 10% with mental health syndromes used outpatient mental health services.

“Virtually nothing is known about predictors of mental health care in the elderly population. We don’t know who the health seekers are,” Mr. Karlin said. A greater understanding of the role of mental health in aging in the general population may increase the use of outpatient services, and older adults who hear about a friend’s positive experience may be more likely to try outpatient care themselves, he added.

Overall, no differences appeared in the extent to which mental health treatment improves ability to manage daily activities, suggesting that older adults who do use outpatient mental health services derive at least as much benefit as younger adults, Dr. Karlin noted.

Racial Disparity Seen in Elderly Women’s Pain

WASHINGTON — Elderly women reported more pain than men, and black women reported more pain than white women, limited their activity, compared with white women, in two studies totaling 3,800 patients, said Jana M. Mossey, Ph.D., at the annual meeting of the Gerontological Society of America.

She examined two large quality of life studies for the prevalence and nature of pain complaints in minority elders in the community and in institutions. Overall, 60% of the patients had been diagnosed with degenerative joint pain, 47% had been diagnosed with low back pain, and 39% had been diagnosed with chronic pain.

No significant differences surfaced in the prevalence of pain between black males and white males (57% vs. 55%), reported Dr. Mossey, professor of epidemiology and biostatistics at Drexel University School of Public Health, Philadelphia.

About 57% of minority elders reported pain—22% reported pain that did not limit their activities and 35% reported pain that did.

The subjects included 600 community-dwelling adults older than 70 years in Philadelphia (300 African Americans and 300 non-Hispanic whites) and 3,200 chronic pain patients in rural Georgia (760 African Americans and 2,440 non-Hispanic whites).

Those who reported pain, regardless of ethnicity, were 10 times more likely to have poor physical function and three times more likely to use health services and to spend time sick in bed. However, community-dwelling minority elders who reported pain were more likely to be female, to have poor physical and emotional function, and to have more medical problems.

—Heidi Splete