

# Prevalence, Correlates, and Treatment of Mental Disorders among Lebanese Older Adults: A National Study

Georges Karam, M.D., Lynn Itani, M.P.H., John Fayyad, M.D., Aimee Karam, Ph.D., Zeina Mneimneh, Ph.D., Elie Karam, M.D.

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**Objectives:** Data on the mental health of older adults in the Middle East is lacking. Prevalence of mental disorders in Lebanese older adults (age: 60+ years) as well as accounts of their attitude towards seeking professional help for mental disorders were investigated. The results of older adults were compared to a younger age group (18-59 years). **Design:** Cross-sectional nationally representative study, using data from the Lebanese Evaluation of the Burden of Ailments and Needs of the Nation. **Setting:** Community-based epidemiologic survey. **Participants:** Community-dwelling adults (N = 2,857) in Lebanon. **Measurements:** Mental disorders were evaluated using the World Health Organization Composite International Diagnostic Interview. **Results:** The lifetime and 12-month prevalences of having “any mental disorder” in older adults (N = 593) were 17.4% and 10.6%, respectively, and were significantly lower than the prevalence in younger adults (25.7% and 18.5%, respectively). Female sex, low household income, social disability, and exposure to war trauma were significant correlates of 12-month mental disorders in older adults. Of those with a 12-month mental disorder, 16.0% sought professional help for their condition in the past year. **Conclusions:** As shown in other epidemiologic studies, the prevalence of mental disorders in Lebanon was lower in older adults as compared to younger adults. Several factors in epidemiologic studies, however, may contribute to the underdiagnosis of mental disorders in older adults. No significant differences in attitude towards mental health services were found between older and younger age groups. The importance of interventions that improve the social relationships of older adults is highlighted. (Am J Geriatr Psychiatry 2016; 24:278-286)

**Key Words:** prevalence, mood disorders, anxiety disorders, treatment, aging

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Received March 24, 2015; revised September 23, 2015; accepted October 5, 2015. From the Department of Psychiatry and Clinical Psychology, Faculty of Medicine, Balamand University (GK, JF, AK, EK); Department of Psychiatry and Clinical Psychology, St. George Hospital University Medical Center (GK, JF, AK, EK); Institute for Development Research Advocacy and Applied Care (GK, LI, JF, AK, EK), Beirut, Lebanon; and Institute for Social Research, University of Michigan (EM), Ann Arbor, MI, USA. Send correspondence and reprint requests to Dr. Georges Karam, Department of Psychiatry and Clinical Psychology, St. George Hospital University Medical Center, Faculty of Medicine, Balamand University, Ashrafieh, Beirut, Lebanon. Email: [georges.karam@idraac.org](mailto:georges.karam@idraac.org)

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<http://dx.doi.org/10.1016/j.jagp.2015.10.006>

## INTRODUCTION

The demographic shift towards an aging population is well established now in both developed and developing countries.<sup>1</sup> Internationally, the percentage of older adults over the age of 60 years is expected to increase from 11% in 2010 to 22% in 2050.<sup>1</sup> This age group is exposed to a variety of age-specific stressors including a decline in cognitive function and sensory abilities, a drop in social relationships, a change of status (including widowhood), retirement, detachment from professional networks, and medical comorbidities. Exposure to these stressors renders it essential to study mental health among this age group, as mental disorders may be at the forefront of disability.

Recently, and with the recognition of the importance of mental health in older adults, data from large population-based studies started emerging. Of special importance is the World Mental Health Surveys (WMH) initiative (led by Harvard University in the United States and the World Health Organization [WHO]), which includes national studies (26 countries so far) on mental health. As these studies use similar methodologies, they allow for cross-national comparisons. Recently, individual WMH reports specific to older adults and covering a variety of topics have been published from Europe (ESEMeD: comprising Belgium, France, Germany, Italy, the Netherlands, and Spain), the United States, Chile, Australia, and Ukraine.<sup>2-7</sup>

The published WMH studies have shown that the lifetime and 12-month prevalences of mental disorders in older adults are lower than those in younger age groups. The prevalence of having any 12-month mental disorder in the United States was 8.5% for the 65+ years age group, 22.4% for the 45–64 years age group, and 27.6% for the 18–44 years age group.<sup>3</sup> In Chile, the prevalence of any 12-month mental disorder was 11.9% for the 65+ years age group versus 23.8% for the 18–64 years age group.<sup>5</sup> [Appendix S1](#) in the Supplementary Digital Content shows the lifetime and 12-month prevalence of mental disorders in the ESEMeD study and other WMH studies focusing on older adults (from the United States, Chile, and Australia).<sup>2,3,5,6</sup>

The nationally representative studies in the United States and Australia also investigated a variety of correlates of mental disorders in older adults. Of significance, in the U.S. survey female sex, lower educational levels, being currently unmarried, and having

two or more chronic physical conditions were related to 12-month prevalence of mental disorders.<sup>3</sup> In Australia, younger age and having chronic medical conditions were significantly associated with 12-month prevalence of disorders.<sup>6</sup>

In the Middle East region, Lebanon, Iraq, and Saudi Arabia are the only countries included so far within the WMH studies that have included the elderly within their surveys.<sup>8-10</sup> Saudi Arabia is still in the data collection phase, and no study specific to elderly mental health has been published from Iraq. To our knowledge, this study on the Lebanese population is the first nationally representative survey from the Middle East region to evaluate the multiple facets of mental disorders among older adults (those aged 60 years and above).

The goals of this study are as follows. First, we assess the 12-month and lifetime prevalence of mood, anxiety, and any mental disorder across age groups. The 18–59 years age group is compared with those aged 60+ years. Those who are aged 60–75 years are compared with those older than 76 years. The second goal is to assess the correlates of 12-month and lifetime mental disorders in older adults, including age, sex, education, household income, marital status, self-rated mental and physical health, smoking status, living alone or not, disability (cognitive, social, mobility and self-care), and lifetime exposure to war and non-war trauma and having a childhood adversity. Lastly, we evaluated the percentage of adults seeking professional help for mental health, respondents' opinion about seeking this type of help, and the prevalence of psychotropic use.

## METHODS

### Procedures

A nationally representative, multi-stage clustered area probability household sample of Lebanese adults (age, 18+ years) who had no cognitive or physical impairment preventing participation (N = 2,857, 70% response rate) was selected for this study as part of the Lebanese Evaluation of the Burden of Ailments and Needs of the Nation (L.E.B.A.N.O.N.) study. The distribution of the sample was as follows: 13.6% from Beirut, 34.6% from Mount Lebanon, 21.2% from North Lebanon, 18.0% from Southern Lebanon, and 12.6%

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