ORIGINAL ARTICLE

Comparison of Effects of Early Onset Depression and Late-Life Depression on Human Body

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ABSTRACT

Late-life depression is considered as one of the features of older age instead of a treatable disease. This under recognition of this major disorder leads to multiple visits of patients to different medical consultants with different clinical presentations. This research aimed to find out the relevance of age of onset of depression with its serious life-threatening output like brain hemorrhage, suicide etc.

Methods: Then if divide it according to its classifications, there will be two types of depression, first one is early-onset depression that happens before 60 years of age and second one is late-life depression that occurs in elderly 60 years of age or above. Age of onset matters alot while making diagnosis or treating depression because of the differences in treatment response and complications. Depression is directly linked with brain and start effecting whole body including. As the day's passes, it effects more our brain and body as compared to previous day. 196 patients are taken as sample and divide them into different groups according to early and late life depression.

Results: After the research, according to the results that are generated as patients with late life depression show more harmful effects and leads to brain hemorrhage as compared to those who was diagnosed during early-onset of depression.

Conclusion: It is concluded that these hemorrhage and nervous disorder does not occur with early onset of depression but with late onset depression.

INTRODUCTION

Approximately, from 100, 99 people are facing depression in their daily lives. Consistency, severity and stages of depression may vary [1]. Some people are facing severe type of depression and other are facing mild [2]. It some depends upon person's mood and their daily life routine. Now if we check out the proper study of depression then it will be classified into different group as early life depression and late life depression. Both these stages of depression have seen in the people mostly between the age of 45-60 years and above 60 years[3]. From different researches it is proved that, due to depression, many veins and spheres of brain got injured and can cause irreversible brain damage [4]. These findings suggested that late life depression causes several abnormalities in our body including neuro endocrine disorders, cognitive impairment, shrinkage of cerebral areas (because of high cortisol levels that causes enlarged amygdala). [5,6]. These patients face mood swings and their quality of life deteriorates tremendously. Due to changes in their body, they cannot get over their symptoms on their own [7]. Another study demonstrated that due to damage of nerve cells, chances of brain hemorrhage increased multiple times [8,9]. Depression doesn't only effect brain, it weakens heart, immune system and musculoskeletal system Late life depression showed more harmful effects as compared to early life depression. As in old age body becomes more fragile and patients couldn't identify symptoms by considering the symptoms as something that is related to their aging process. We have to do comparison of both of these types of depression versus normal aged people who are depression free so we can have an idea about the severity of this to calculate the exact results of long-life depression [10].

METHODOLOGY

A study held in Benazir Bhutto Hospital Rawalpindi, patients of depression visiting neurologists or psychiatrist from October 2021 to April 2022 were included in study. We took detailed history from patients aiming to find the root causes of depression, symptoms, relevant factors and its consequences on their health and quality of life. Patients who are experiencing depression because of their other diseases like brain disorders, tumors, cardiac issues, blood cancer, pulmonary diseases etc. We have taken detailed question

answer session from their families to check out the exact reason of their depression and from how long they are facing these issues. How many psychological sessions they have attended to get rid of this disease? At which age they got effected with this disease. We also included depression free patients of aged above 60 years who visited hospital for their routine checkup to calculate the difference between the person suffering from disease rather than those who was healthy with their minds and body too. During their visit for their treatment session, they noted down their scale of depression, age, history, gender etc. They record each and everything about them and events of their lives.

RESULTS

After the whole research, results which was declared that about 56 from 198 patients was those suffering with early onset depression, 55 was of primary onset of depression and about 85 patients were those who suffers with most severe issues were from late-life depression. Remaining 84 patients was those who show their healthy behaviors and was not suffering from any kind of depression.

Table 1 show that Early onset of depression or we can say that early stage of depression does not show harmful impacts on human health as compared to long term depression or which is shown at late life stage. As we have seen that from 194, about 84 patients was those who was not having this disorder. They were totally healthy and came for their regular checkup but patients who was suffering from depression was also having different characteristics. Some of them was showing acute pain and disturbed routine of their lives. Their nervous system was not working properly, they were not in their senses and cannot perform their routine tasks easily. They included these types of patients in the category of long onset of depression. Patients who were suffering from mild disorders and was not having severe disorders included in early onset of depression.

Different types of tests get performed to check out the exact calculations, the results were quite different. Values of early, primary and late depression was different as it was 0.789, 0.934, 0.984. By making contrast between these three types of depression and to those who was showing healthy results. It is declared that social scales show lower issues and ratio of events

of social life was independently risky. Further results are shown in

Table 1:

Control	ED	Control (P) PD	Control	LD	Control		
(n= 84)	(n=56)	(n= 55)	(P)	(n= 85)	(P)		
Years of age	73.25	72.84	0.700	74.3	0.001	74.2	0.248
Gender	42	38	0.678	35.6	0.201	54	0.854
Qualification	4.2	4.3	0.355	33.2	0.490	23	0.120
Diabetes	53	38	0.234	23.16	0.243	56	0.001
Lube social scale	25	15	0.198	12	0.576	67	0.034
Geriatric depression scale	36.13	25.34	0.824	26	0.744	67	0.323
Hemisphere (left)	2.4	33.88	0.118	27	0.235	57	0.954
Hemisphere (right)	0.45	7.1	0.675	28.9	0.867	45	0.257
Inflectional	29	13.2	0.334	92.1	0.567	78	0.753
Lobar	12	56.3	0.325	8	0.987	79	0.234
Deep breeds	15	32.45	0.953	4	0.124	24	0.355
Mental examinations	21	23.0	0.923	9	0.567	59	0.348
Life events scale	11	74.1	0.129	2	0.753	99	0.754

table 2.

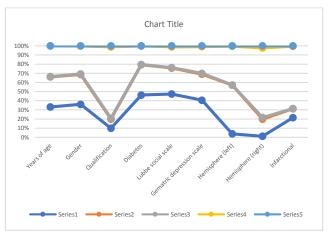


Figure 1:

Table 2: Determinations of long onset of depression.

ORS (96%)	Р .	
MODEL NO 1	<u> </u>	
Gender (female)	1.432	0.834
Grade of PWM	1.454	0.235
Grade of DWM	1.434	0.894
Prevalence of SB	1.456	0.215
Micro bleeds	1.976	0.843
MODEL NO 2		
SBI	2.435	0.149
Hemisphere	1.955	0.752
MODEL NO 3		
Prevalence	1.456	0.852
Lobar	2.076	0.974

Details of some points are explained here in table 3 as gastric scale show higher score as compared to long onset of depression score. By calculating their group of age, either male or female, education level, any other disease with depression, we noted down the results and showed them in table 3. In short there was not a proper answer for this question that which thing effects more to depress feeling of person and damage their brain.

Table 3: Symptoms in LOD:

	B + SB	P
Age (years)	-0.045+ 0.045	0.235
Gender	0.546 + 0.546	0.754
Qualification	- 0.780 + 0.056	0.001
SB	0.646 + 0.035	0.257
Diabetes mellifluous	-0.045 + 0.023	0.874
Long life span	-0.633 + 0.045	0.326
Screen	-0.645 + 0.056	0.846

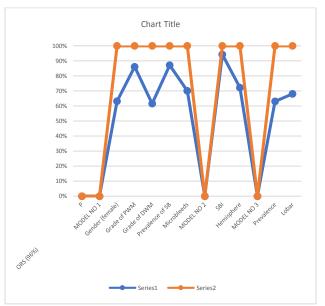


Figure 2:

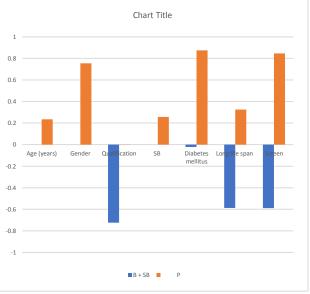


Figure 3:

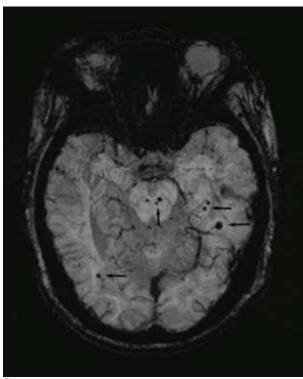


Figure 4:

DISCUSSION

Here roles of different types of depression are described as longterm depression and early onset of depression perform different roles in the lives of patients [11]. Damage of brain nerves and vessels cause serious disorder in patients. Some kinds of stokes are also facing by patients which was very stressful for them and increase the level of mental illness and depression [12]. It shows its effects mostly on left hemisphere and least effects on right side [13]. Different type of risks and factors are detected to show the severity of disorder of long onset of depression. DWM have higher risk of causing and increasing long onset of depression and PWM have lower risk of spreading of these factors [14]. Different sessions should perform to overcome this issue, otherwise these symptoms and factors will continue to increase day by day and death level will start increasing. A time will come when death level will increase too much due to not taking precautionary measures and proper therapies to treat these patients. Daily, weekly and monthly sessions are needed to those patients who was suffering from nervous breakdown, breeds and mental illness [15].

CONCLUSION

Wholesome of this study is that all precautionary measures and proper sessions are needed to get positive results. Early on set of depression does not show dangerous effects on health as compared to long onset of depression in late life span. There should be a proper guidance to the patients about their disorders and how they can overcome this disease. As ever says that

nothing is more effective than someone's own moral. If they will be fully aware with their issues, they will go to neurologists by themselves before the stage comes other persons will take them to the surgeons. Proper guideline is much needed. Otherwise, their brain will continue to damage, nervous breakage, break down of nerve impulses and many other hazardous impacts will come which led to death. So, to control the level of mortality these sessions are needed.

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