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➤ **Association between eating alone and depressive symptom in elders: A cross-sectional study**

The fast course of industrialisation and urbanisation, as well as the ageing population has resulted in eating alone as an emerging issue among the elderly in China. This study examines the relationship between eating arrangements (number of companions in mealtime) and depressive symptoms as well as the association between the two for those living alone. It found that the lack of companionship during mealtime might be independently associated with geriatric depressive symptom for females and those aged 60-74 years. Eating alone may also be a stronger factor associated with depressive symptoms than living alone.

Wang, X., et. al. Association between eating alone and depressive symptom in elders: A cross-sectional study. BMC Geriatrics.

Full text article can be accessed here:

<http://bmcgeriatr.biomedcentral.com/articles/10.1186/s12877-016-0197-2>

➤ **Antipsychotics, behavior and dementia: A psychiatrist's view**

Antipsychotic medications, such as risperidone and haloperidol, are often prescribed to dementia patients to treat behavioural symptoms such as irritability, anxiety, depression, sleep disturbances, agitation, delusions and hallucinations. However, new findings from the National Institute of Mental Health have shown potential harmful effects of these drugs on the patients' quality of life and potential costs to healthcare providers. This article opines that physicians should consider the importance of proper medication management combined with medical and behavioural treatments such as diet and hydration; individual and group therapy; validation therapy; social stimulation; and environment.

Vasavada, N. Antipsychotics, behaviour and dementia: A psychiatrist's view. Long-Term Living Magazine.

Full text article can be accessed here:

<http://www.ltlmagazine.com/article/antipsychotics-behavior-and-dementia-psychiatrist-s-view>

➤ **Insomnia and anxiety drugs could lead to dementia, UN warns**

According to the United Nations, overprescribing of insomnia and anxiety drugs could lead to a 50 percent higher chance of patients over 65 years of age developing dementia within 15 years, compared to those who have never used them. The International Narcotics Control Board's annual report highlights that unwarranted prescribing and overuse of benzodiazepines by older people can be dangerous as they often use more than one medication at a time. Healthcare staff, especially in nursing homes, family members and caregivers of elderly people need to be made aware of the risks of overusing benzodiazepines.

Insomnia and anxiety drugs could lead to dementia, UN warns. Aged Care Insite.

Full text article can be accessed here:

<http://www.agedcareinsite.com.au/2016/03/insomnia-and-anxiety-drugs-could-lead-to-dementia-un-warns/>

➤ **The unfulfilled promise of the antidepressant medications**

This report highlights that antidepressants are not as effective as once believed. The key reason for falling effectiveness is an increasing placebo response rate with the gap between response to medication and placebo narrowing. Patients should be offered psychotherapy where it is available and medication should only be considered if the depression is of at least moderate severity, psychotherapy is refused, or psychotherapy has not been effective. Combined treatment of medication and psychotherapy provides greater effectiveness than either one on their own.

Davey, C. & Chanen, A. The unfulfilled promise of the antidepressant medications. Medical Journal of Australia.

Full text article can be accessed here:

https://www.mja.com.au/system/files/issues/204_09/10.5694mja16.00194.pdf

➤ **CFHI and nursing homes join forces to improve dementia care in New Brunswick**

The first 15 Canadian nursing homes have been selected to participate in the New Brunswick Appropriate Use of Antipsychotics Collaborative. This two-year province-wide programme will improve dementia care through the appropriate use of antipsychotic medications. Staff in these nursing homes will use a person-centred, non-pharmacological approach to manage challenging behaviours associated with dementia. Tailored learning and coaching is provided to inter-professional teams of healthcare providers to identify patients who may benefit from non-drug therapies such as music and recreational therapy.

Morris, N. CFHI and nursing homes join forces to improve dementia care in New Brunswick. Canadian Foundation for Healthcare Improvement.

Full text article can be accessed here:

<http://www.cfhi-fcass.ca/SearchResultsNews/2016/05/17/cfhi-and-nursing-homes-join-forces-to-improve-dementia-care-in-new-brunswick>

➤ **Victorian suicide prevention framework 2016-2025**

This framework is a whole-of-government commitment to reducing suicide and suicidal behaviour. It is part of Victoria's 10-year mental health plan to ensure that all Victorians experience the best possible health, including mental health. The plan provides a coordinated strategy for Victorians to work together to improve the mental health and wellbeing of all citizens. It provides insights on building resilience; supporting vulnerable people; caring for the suicidal person; learning what works best; and helping local communities prevent suicide.

Victorian suicide prevention framework 2016-2025. Department of Health and Human Services, Government of Victoria.

Full text article can be accessed here:

http://apo.org.au/files/Resource/victorian_suicide_prevention_framework_2016-25.pdf