

## **Primary Care Physicians' Attitude and Practice in Managing Geriatric Depression**

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**Objective:** To evaluate the diagnosis and management of depression among elderly in primary care.

**Setting:** All the local health centers in Bahrain were included for the assessment of the physicians' practice.

**Design:** A cross-sectional study.

**Method:** A self-administered questionnaire was distributed to physicians in all health centers. It examined the current practice of physicians in detecting and managing elderly depression and the most important obstacles facing them. It also explored the needs for physicians to have training and clinical guidelines to manage elderly depression.

**Result:** This study included 132 physicians. Hundred and four (79%) physicians did not receive any formal training or course in geriatric psychiatry. Fourteen (10.6%) physicians were routinely screening patients for depression; hundred and one physicians (76.5%) were screening on occasional basis and 13 (9.8%) never had screened for depression. Thirty-nine (29.5%) physicians referred the cases immediately once they were identified. Ninety-six physicians (72.7%) felt competent but seventy-three physicians (55.3%) did not feel confident in treating late life depression. Seventy-six physicians (57.6%) had no time to discuss any psychological issues with the elderly. Hundred and fourteen physicians (86.4%) wished to have a specific guideline for the management of elderly depression and hundred and twelve (85%) felt the need to adopt a specific scale to screen for depression in primary care settings. Hundred and nine physicians (82.6%) thought that they need more training on the identification and management of old age depression.

**Conclusion:** Screening for depression among elderly patients in primary care is not sufficient leading to low detection rate of cases. Lack of training in geriatric psychiatry, short consultation time, and the absence of clear guideline were identified in this study as barriers to proper diagnosis.