

# Mood Distress and Behaviours



Mood distress may look like restlessness, repetitive complaints or aggression. It is often related to more than one unmet need, including pain and medication side effects.

Mood distress can result in mis-prescribing of antidepressants, antipsychotics and other pharmacologic restraints.

Assess for root causes with your interdisciplinary team. Try reducing as many causes of distress as you can discover! In this 4 minute video, [Changing Behaviours](#), the team identified the root cause of Gracie's agitation was discomfort, and introduced her favorite activity in order to remove the source of distress.

In Alberta, 84-100% of older adults in LTC and DSL have some level of cognitive impairment, and 56% in LTC are prescribed at least 1 antidepressant (AHS Tableau).

According to the [2021 Canadian Coalition for Seniors Mental Health Depression Guidelines](#):

- There is limited evidence to recommend antidepressant therapy for mild to moderate depression associated with dementia.
- For mild or short term depressive symptoms, first trial psychosocial supportive interventions such as reminiscing, exercise, virtual visits, horticulture and social groups. (Click [here](#) for a video on Recreation Therapy Programming in Didsbury, Alberta.)
- For severe and persistent symptoms also consider antidepressant therapy, understanding efficacy is not well established, and side effects could occur.

## Looking for more resources? Check out:

- [Fast Facts: Differentiating Pain and Depression](#)
- [Tool: Assess/Treat Behavioral Symptoms of Older Adults living in LTC Facilities](#)