

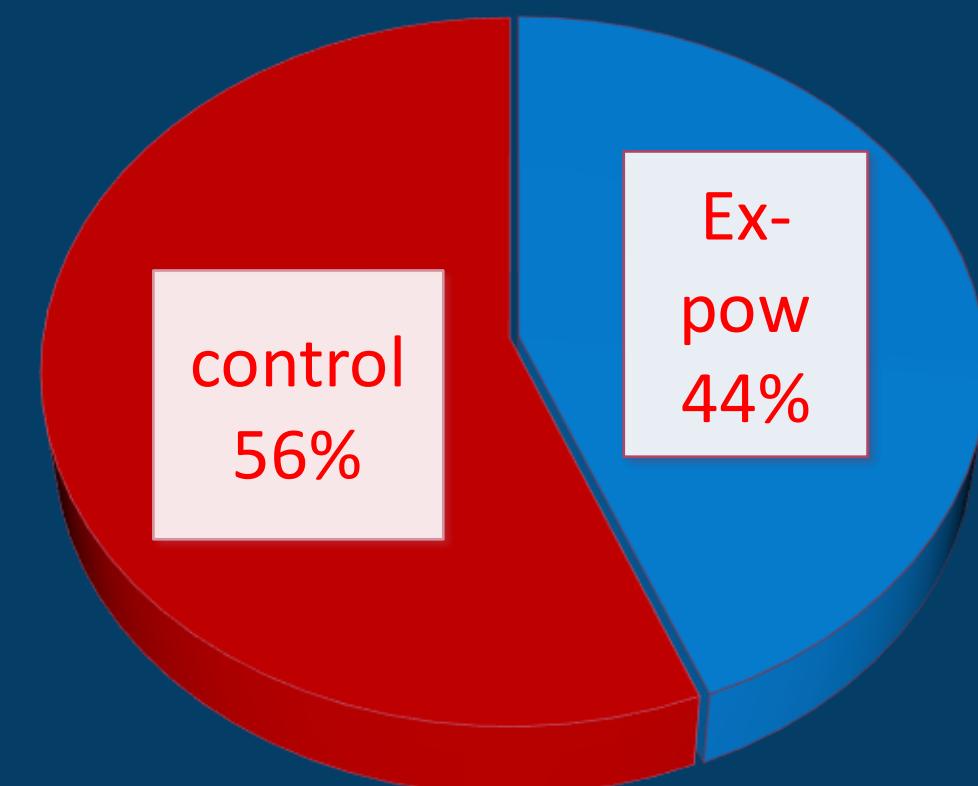
THE MENTAL HEALTH OF ELDERLY VETERANS

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INTRODUCTION: Numerous previous studies have shown that older age in war veterans is associated with deterioration of mental health. The results of studies show that persistent symptoms of Post-Traumatic Stress Disorder (PTSD) may intensify with increasing age and that the symptoms of this disorder may reappear in those veterans whose disturbances have already subsided. According to some research, the prevalence of comorbid mental disorders also increases with age, and self-assessment of health at older age shows a decline in health-related quality of life and worse self-assessed mental health. Research has also shown the period of retirement, which is perceived as a loss of a role in life and as exclusion from society, to be a period of higher risk for the deterioration of mental health. Impaired physical health contributes to the deterioration of mental health so, in severely traumatized persons and PTSD sufferers, physical diseases specific to older age may appear earlier than in the general population.

The aim of the study was to determine the intensity of PTSD, mental disorders appearing in comorbidity with it and the self-assessed psychological component of health in elderly veterans as well as factors that affect the mental health of this particularly vulnerable group. This study was a part of a larger research that examined the health of the Homeland war veterans.

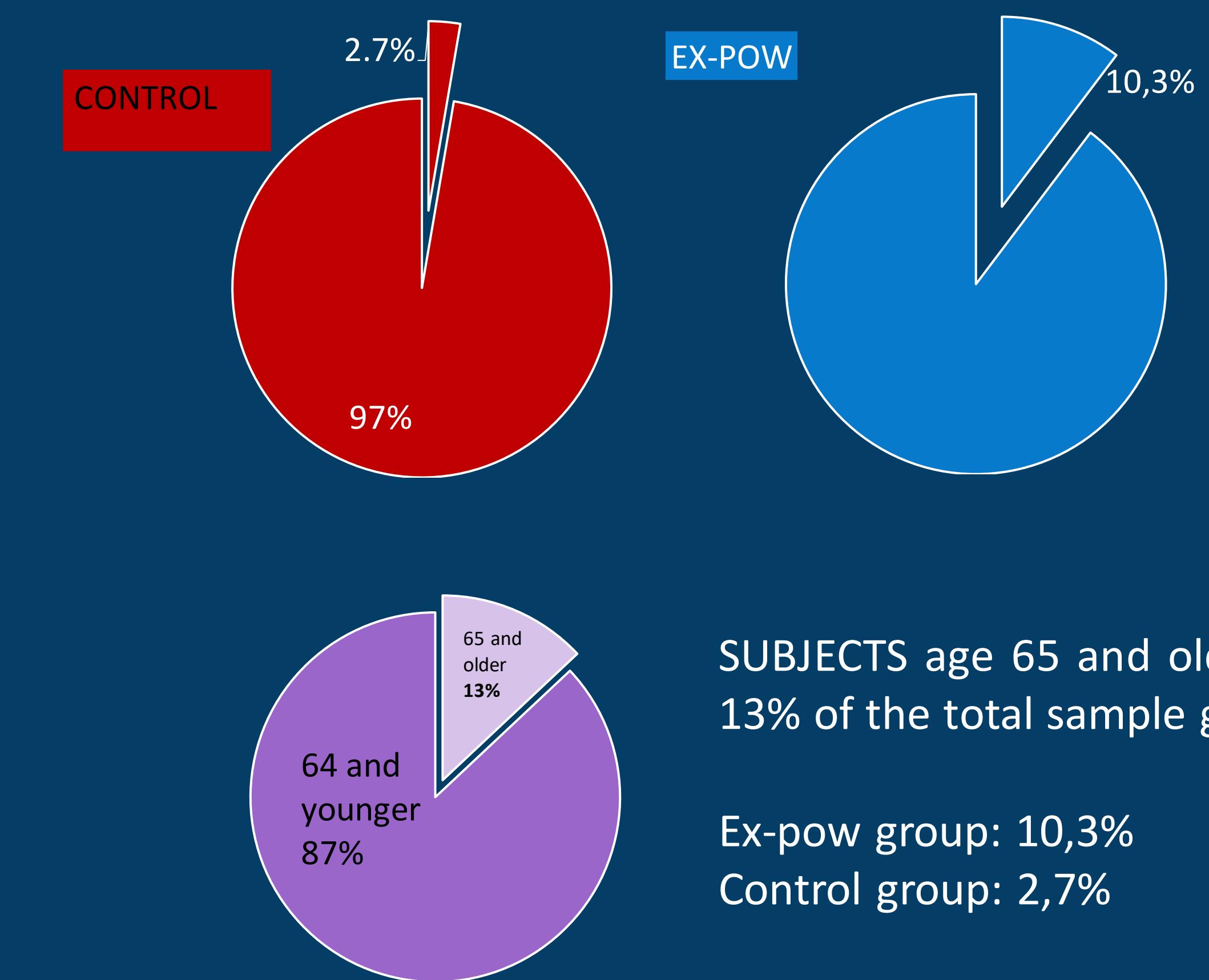
SUBJECTS AND METHODS



SUBJECTS: 264 war veterans divided into two groups; 116 ex-pow and 148 who were not imprisoned. All of them had PTSD and were treated at the Department of Psychiatry of the NMH Vukovar, at the time of the research (research period 2018-2020).

The study included a sociodemographic questionnaire, the PTSD Self-Report Checklist (PCL-5), Short Form Health Survey (SF-36), anamnesis and medical records, and a clinical examination.

CHARACTERISTICS OF THE SUBJECTS: Former prisoners of war are significantly older; there are significantly more retirees and widowers in this group; in the control group, there are significantly more divorcees and the financial status of people in this group is significantly lower.



SUBJECTS age 65 and older made up 13% of the total sample group

Ex-pow group: 10,3%
Control group: 2,7%

RESULTS

SIGNIFICANT CORRELATION BETWEEN OLD AGE AND INDIVIDUAL CLUSTERS OF PTSD SYMPTOMS

- cluster B symptoms (intrusion symptoms) and cluster C symptoms (avoidance symptoms) were more common in older subjects

	B	C	D	E	TOTAL PCL-5
Age	0,062**	0,26**	-0,029	0,028	0,071

**p < 0,01;
B-Intrusion symptoms, C-Avoidance symptoms, D-Negative alterations in cognition and mood, E-Alterations in arousal and reactivity

SIGNIFICANT CORRELATION BETWEEN OLD AGE AND THE OCCURRENCE OF GENERALIZED ANXIETY DISORDER, OBSESSIVE-COMPULSIVE DISORDER, PSYCHOSOMATIC DISORDERS

	F10	F13	F23	F32/33	F41.0	F41.1	F42	F44	F45	F54	TOTAL
Age	0,037	-0,005	-0,090	0,028	-0,025	0,122*	0,150*	0,024	0,036	0,231**	0,104

p < 0,05, **p < 0,01

F10 Chronic alcoholism and Harmful use of alcohol; F13 Mental and behavioural disorders due to use of sedatives or hypnotics
Harmful use and Dependence syndrome; F23 Acute and transient psychotic disorder; F32/33 Depressive episode/Recurrent depressive disorder; F41.0 Panic disorder; F41.1 Generalized anxiety disorder; F42 Obsessive-compulsive disorder; F44 Dissociative [conversion] disorders; F45 Somatoform disorders; F54 Psychological and behavioural factors associated with disorders or diseases classified elsewhere („psychosomatic disorder“)

SIGNIFICANT CORRELATION BETWEEN OLD AGE AND WORSE SELF-ASSESSMENT OF MENTAL HEALTH AND CERTAIN DIMENSIONS OF MENTAL HEALTH (SOCIAL FUNCTIONING AND VITALITY)

	PF	RP	BP	GH	VT	SF	RE	MH	PCS	MCS	TSF36
Age	-0,145*	-0,140*	0,035	-0,175**	-0,176**	-0,199**	0,094	-0,010	-0,158*	-0,077	-0,095

*p < 0,05, **p < 0,01

• PF-Physical functioning, RP-Physical roles limitation, BP-Body pain, GH-General health, VT-Vitality, SF-Social functioning, RE-Emotional roles limitation, MH-Mental health, PCS-Physical component score, MCS-Mental component score

REGRESSION ANALYSIS: IN ADDITION TO OLD AGE, MARITAL STATUS (WIDOWED, DIVORCED), WORK STATUS (UNEMPLOYED, RETIRED), LOWER FINANCIAL STATUS AND IMPRISONMENT CONTRIBUTE SIGNIFICANTLY TO WORSE SELF-ASSESSMENT OF MENTAL HEALTH

CONCLUSION:

It is evident from the results that old age is associated with poorer mental health and special attention should be directed to elderly war veterans who live alone and are of low financial status.

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All authors declare that they have no conflicts of interest.