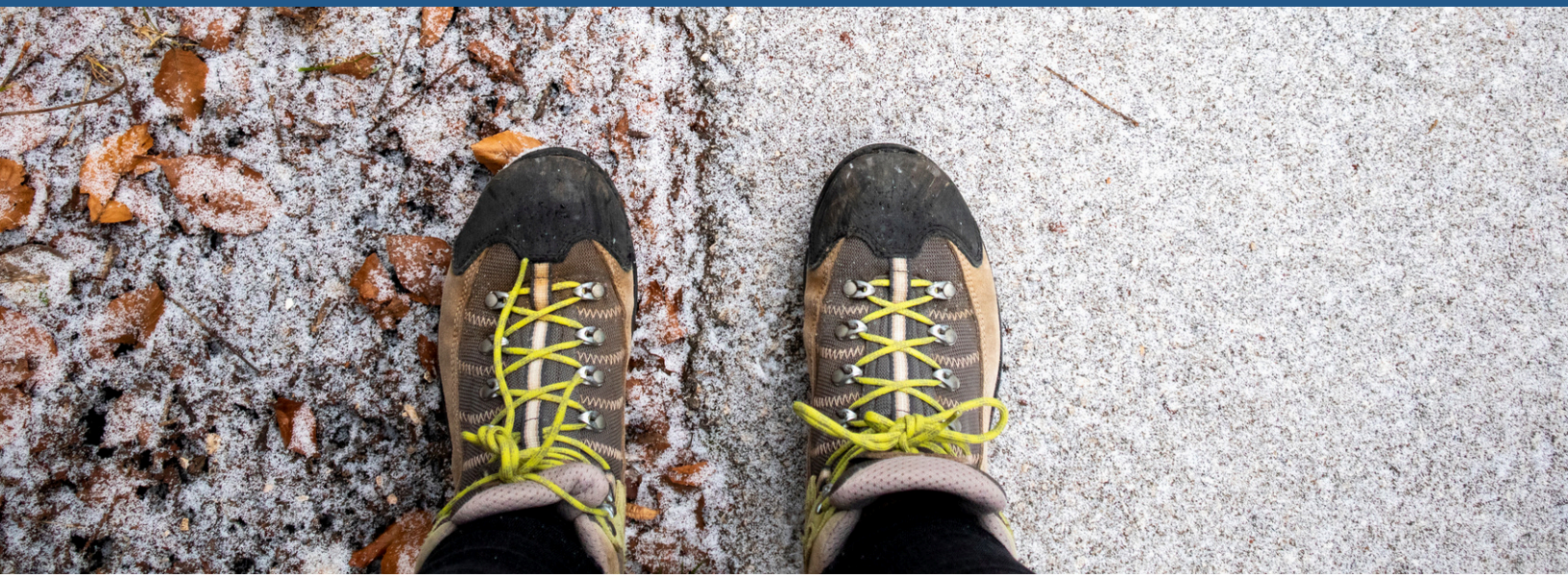
EMOTIONAL CHANGES AFTER 65 YOU SHOULDN'T IGNORE



Older adulthood can bring major transitions, including retirement, bereavement, caregiving changes, new medical diagnoses, chronic pain, reduced mobility, and a move away from a longtime home. These experiences can affect emotional well-being. Persistent or escalating changes in mood, behavior, daily routines, or functioning deserve closer attention.

Primary care teams, hospital staff, home health clinicians, senior living professionals, pharmacists, clergy, case managers, and other community partners often have a valuable perspective. They may notice changes across multiple visits or hear concerns that an older adult has not shared elsewhere. Coordinated care between medical, behavioral health, and aging-services providers can help older adults receive support that reflects their physical, emotional, and social needs.

Changes Worth A Closer Look

Withdrawal from people or activities

An older adult may stop attending church, community events, appointments, or family gatherings. They may abandon hobbies, spend increasing amounts of time alone, or decline opportunities they previously enjoyed.

See the next page for more.

Persistent worry, agitation, or irritability

Anxiety may appear as repeated calls to a provider, excessive concern about health or finances, difficulty making decisions, restlessness, anger, or a growing need for reassurance.

Changes in sleep, appetite, or energy

Sleeping far more or less than usual, eating poorly, experiencing weight changes, and reporting ongoing fatigue can signal emotional distress. These changes also warrant medical review because physical conditions and medications can contribute to similar symptoms.

Decline in daily functioning

Missed medications, unpaid bills, neglected hygiene, an unkempt home, or difficulty keeping appointments may reflect changes in mood, cognition, physical health, or several factors at once.

Difficulty adjusting after a loss or transition

Grief, retirement, relocation, loss of driving privileges, a spouse's illness, or a new disability can disrupt identity, routine, and social connection. Concern increases when distress remains intense, daily life becomes difficult or the person expresses little hope for the future.

Increased alcohol or medication use

An older adult may begin using alcohol, sleep aids, anti-anxiety medications, or pain medications to cope with loneliness, worry, grief, or insomnia. A medication review and behavioral health assessment can help clarify the concern.

Statements about hopelessness, burdensomeness, or death

Comments such as "There is nothing left for me," "Everyone would be better off without me," or "I do not want to wake up" require an immediate, direct response. Other warning signs include searching for a way to die, giving away possessions, escalating substance use, extreme mood changes, and sudden isolation.

When a Referral May Help

A behavioral health referral may be appropriate when emotional or behavioral changes persist, worsen, interfere with daily functioning, complicate medical care, or create concern for the older adult's safety. Referral partners can make contact based on observed symptoms and functional changes while further assessment clarifies the person's needs.

Helpful referral information may include:

- Observed emotional, behavioral, or functional changes
- Approximate onset and duration of symptoms
- Recent medical events, losses, or life transitions
- Current medications and recent medication changes
- Alcohol or substance use concerns
- Available family and community support
- Any immediate safety concerns

Early attention can help an older adult regain stability, strengthen coping skills, and remain connected to care and community.

WE CAN HELP.

Our hospital-based outpatient program is designed to meet the unique needs of older adults experiencing depression and/or anxiety related to life changes that are often associated with aging or a chronic diagnosis. Anyone can make a referral to our program, including self-referrals, provider referrals, or community consultations.

Call us today at (541) 329-1032