

The Impact of Comorbidity of Depression and Anxiety on Outcomes of Illness Teaching Strategy

Overview of Teaching Strategy

The impact depression and anxiety can have on outcomes of medical procedures and illness is significant. Older adults do not always present in the same way as a younger population regarding symptoms related to these illnesses. It is not uncommon for health care professionals to miss or ignore a diagnosis of depression or anxiety because they feel the symptoms are fully explained by the situation. A missed diagnosis can have detrimental effects on outcomes, transition back home, and return to functioning.

In this teaching strategy the student will meet Eugene Shaw, an 82-year-old former Marine who served in the Korean War. This teaching strategy focuses on Eugene's hospitalization for vascular problems related to his diabetes and subtle hints that he may have an underlying depression or anxiety. The activities are directed at evaluating and better understanding the complexities of these diagnoses compounded with his medical problems. In addition, the student will explore the general impact of stress, depression, and anxiety on outcomes when seen in concert with chronic illness.

Download All Files for This Teaching Strategy

- [Eugene Shaw monologue](#)
- [Eugene Shaw monologue script](#)
- [Draft of a sample concept map](#)

Learning Outcomes

Students will:

- Identify behaviors that may indicate a mood disorder
- Identify behaviors that may indicate anxiety
- Develop an understanding of the difference between depression and difficulty coping
- Identify tools that could be useful in assessing cognition and mood
- Demonstrate an understanding of the impact of depression and anxiety on outcomes of physical illness

Learner Prework

1. Listen to Eugene in the Eugene Shaw monologue or download the printed copy of the monologue. As you listen to Eugene, think about the following questions and be prepared to discuss them.
 - What evidence do you hear that may be indicative of depression?
 - How can you assess Eugene’s baseline functional status?
 - What coping strategies does Eugene use?
 - Who is part of Eugene’s support system and how can they help him?
 - What evidence of anxiety do you hear as Eugene talks?
 - What are Eugene’s strengths and weaknesses?
 - What else do you want to know about Eugene?
 - What is your impression of Eugene’s relationships?
2. Investigate the resources available to Veterans on [How to Get Caregiving Help From the VA.](#)

Suggested Learning Activities

1. Consider what assessment tools would be appropriate for continuing to evaluate Eugene. Utilize these tools to better understand:
 - The behaviors associated with Major Depression
 - Evidence of any cognitive impairment that may be complicating Eugene’s recovery
 - The overlap of depressive, cognitive and anxiety behaviors and what they mean
 - How alcohol may be a factor in compromising outcomes
 - What is Eugene’s baseline level of functioning and whether he has deviated from that point
 - How to evaluate Mrs. Shaw’s ability to manage the caregiving role
2. A concept map is a diagram that illustrates relationships among concepts. Assign a concept map to students after they listen to the monologue or have the students do a concept map as a group project in class/seminar, or as a post-conference activity. In the third scenario of the simulation, Eugene is recovering from surgery. Introduce this snapshot of his life to the students as they develop the concept map. This activity allows students to see the repercussions of depression especially in the older adult recovering from surgery. Download the draft of a sample concept map illustrating the concept of depression. This is only a sample and not inclusive of all connections between depression and functioning. It should be used only as a draft and not considered a complete concept map related to the Eugene Shaw case.

In completing this exercise students should consider:

- What is depression?
- What are the causes for depression?
- What are the symptoms of depression?
- What are the pharmacological treatments for depression?
- Will these treatments impact any other treatments the patient may be getting?
- What are the non-pharmacological treatments for depression?

Suggested Reading

Grady, P. A., & Rosenbaum, L. M. (2015). The science of caregiver health. *Journal of Nursing Scholarship*, 47(3), 197-199. doi:10.1111/jnu.12137

McGrandles, A., & Duffy, T. (2012). Assessment and treatment of patients with anxiety. *Nursing Standard*, 26(35), 48-56; quiz 58. doi:10.7748/ns2012.05.26.35.48.c9082

Smith, M., Haedtke, C., & Shibley, D. (2015). Evidence-based practice guideline: Late-life depression detection. *Journal of Gerontological Nursing*, 41(2), 18-25. doi:10.3928/00989134-20150115-99

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