Depression trajectories of older Americans and Britons 2002 - 2012: A rejoinder and a hope

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We thank Professor Blazer for raising a question not only about our paper but more fundamentally about depression in older ages(1). Let us concede the negative answer. Though we had to work with 8 items CESD scale with its obvious limitations including its inability to capture chronic depression(3). We also had to work with data from a limited period up to 2012, long before 2032. By then one should be able to say with a fairer degree of certainty what happen to the post-War cohort beyond 75 years of age: whether indeed with increasing comorbidities and loss of spouses they soon follow the paths trodden by their predecessors the War and pre-War cohorts.

Until then we should keep the baby, while throwing the bath water. The major point of the paper on secular change or cohort difference stands on firmer ground. Will this ground prove shaky when loss of spouses and comorbidities become more common? In our paper we controlled for these already. Here we refer to extra evidence based on the Britons sample to support our major point. Cohort is fundamentally a shorthand for childhood condition: a similarly named cohort should not be taken to be similar simply because of its name, say the War cohort. A War child in Britain grew up in a different environment from a War child in America. Tampubolon(2) tested the long arm of childhood condition hypothesis and found that childhood condition predicts health outcomes in older ages, across the spectrum from gait speed through episodic memory to mental health (CESD). Childhood can last a life time in Britain. In our paper we noticed these nuanced patterns of secular change on both sides of the Atlantic. Therefore, we emphasised, instead of loss of spouses and comorbidities, the cohort and the childhood condition it stands for. We are now investigating how childhood gets under the skin to have a lasting effect until older ages irrespective of the comprehensive National Health Service or the limited Medicare-Medicaid. For now there is hope in the nuanced trajectories of depression uncovered across cohorts on both sides of the Atlantic.

References

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