TELEVISION VIEWING AND DEMORALISATION SYNDROME IN THE ELDERLY IN THREE EUROPEAN COUNTRIES, RESULTS FROM THE EU-MENTDIS_65+ STUDY

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**TELEVISION VIEWING AND DEMORALISATION SYNDROME IN THE ELDERLY IN THREE EUROPEAN COUNTRIES: RESULTS FROM THE EU-MENTDIS 65+ STUDY**

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**Introduction**

- Television (TV) viewing is one of the most widespread ways of spending leisure time.
- There is a growing evidence of a negative association between TV and physical and mental health.

Demoralization Syndrome:
- A clinical condition where people experience existential despair symptoms, such as loss of meaning, hopelessness, impotence-helplessness, loss of purpose, pessimism, feeling of being trapped, social isolation, alienation, and lack of support.
- Generally derived from the combination of situations of Distress and Subjective Incompetence.
- Distinct from depression: no anhedonia, no reduction in magnitude of motivation
- Could be risk factor for psychopathological conditions and/or physical illnesses

- The demoralization syndrome has so far been associated with severe physical illnesses.
- However, given the major changes in people's life that ageing entails, it could be an important problem also in the elderly.

This study aimed at evaluating the association between time spent watching TV and demoralisation within the general 65-84 years population.

**Methods**

**Recruitment and sampling**
- Within the MentiDis ICF65+ study, subsample of 1354 subjects aged 65-84 years from 3 out of 7 centres (Italy, Switzerland, Germany)

**Assessment instruments:**
- Demoralization Scale (DS) by Kisseane: 24 questions on 5-point Likert scale (0= never; 4= always) on people's issues around demoralization (see above)
- Time spent watching TV: self-report of n days and hours during previous week

**Other instruments:**
- International Physical Activity Questionnaire (IPAQ) self-report of n days and hours of different types of physical activity during previous weeks
- MMSE (cognitive performance)
- WHODAS II (Disability level)

- Self-reported list of Medical diagnoses in the previous year

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**Results**

**Recruitment and sampling**

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**Table 1 socio-demographic data and associations with Demoralization Score**

<table>
<thead>
<tr>
<th>Age</th>
<th>Gender</th>
<th>Level of education</th>
<th>Financial situation</th>
<th>Cognitive impairment (MMSE)</th>
<th>Degree enough, low on very low</th>
<th>Medical problems previous year</th>
<th>N</th>
<th>%</th>
<th>Demoralization score</th>
<th>p-value</th>
<th>N</th>
<th>%</th>
<th>Demoralization score</th>
</tr>
</thead>
<tbody>
<tr>
<td>65-84 years</td>
<td>Male</td>
<td>3-5 years</td>
<td>Average</td>
<td>Good</td>
<td>Low enough, low on very low</td>
<td>Medical problems previous year</td>
<td>152</td>
<td>20.0</td>
<td>23.10</td>
<td>0.001</td>
<td>140</td>
<td>19.3</td>
<td>24.10</td>
</tr>
<tr>
<td>65-84 years</td>
<td>Female</td>
<td>3-5 years</td>
<td>Average</td>
<td>Good</td>
<td>Low enough, low on very low</td>
<td>Medical problems previous year</td>
<td>118</td>
<td>16.0</td>
<td>26.00</td>
<td>0.001</td>
<td>106</td>
<td>14.7</td>
<td>26.00</td>
</tr>
<tr>
<td>65-84 years</td>
<td>Male</td>
<td>6-8 years</td>
<td>Average</td>
<td>Good</td>
<td>Low enough, low on very low</td>
<td>Medical problems previous year</td>
<td>134</td>
<td>18.0</td>
<td>25.10</td>
<td>0.001</td>
<td>120</td>
<td>16.7</td>
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**Conclusions**

- The findings showed relatively low levels of demoralization in the general elderly population
- Higher demoralization scores appear to be associated with longer TV viewing
- Even though the direction of the influence between Demoralization and TV viewing could not be derived from this study, both being Demoralized and watching long TV hours are risk factors for mental and physical issues, these result should be taken into account in future research and when designing programs for a more active and healthier ageing

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**References**


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**Table 2 ANOVA test of association between Daily hours of TV viewing and DS score**

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<td>&lt;2 hours/day</td>
<td>563</td>
<td>41.6</td>
<td>25.39 (0.79)</td>
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