

The prevalence of depressive symptoms among older adults with hypertension and its associated factors in primary care clinics in Melaka Tengah and Jasin

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ABSTRACT

Introduction: Hypertension is a prevalent chronic condition among older adults and is frequently accompanied by depressive symptoms that often go unrecognised. Depression in this population can negatively affect treatment adherence, quality of life, and overall health outcomes. In Malaysia, data regarding the burden of depressive symptoms in hypertensive older adults, especially in primary care settings, remains limited. This study aimed to determine the prevalence of depressive symptoms and identify associated sociodemographic and clinical factors among older adults with hypertension attending primary care clinics in Melaka Tengah and Jasin. **Materials and Methods:** A cross-sectional study was conducted over two years (September 2023 – September 2025) in five government primary care clinics across Melaka Tengah and Jasin districts. Older adults aged ≥ 60 years with physician-diagnosed hypertension for at least one year were included. Exclusion criteria comprised cognitive impairment, acute medical illness, psychosis, or inability to complete the self-administered questionnaire. Data on demographic and clinical variables were collected, including physical activity, comorbidities, blood pressure control, BMI, waist circumference, and living arrangements. Depression screening was conducted using the Whooley two-question screen, followed by the Patient Health Questionnaire-9 (PHQ-9) for those screening positive. Bivariate and multivariate logistic regression analyses were performed to identify factors associated with depressive symptoms. **Results:** A total of 260 respondents were included, with a median age of 69 years (IQR = 9). The prevalence of depressive symptoms was 23.1% based on the Whooley screen. Among those screened positive, 40.0% had mild depression and 6.7% had moderate depression, with no cases of severe depression. Female gender (28.7% vs. 16.9%, $p=0.025$) and living alone (37.0% vs. 21.5%, $p=0.069$) were more likely associated with depressive symptoms. Other variables, including comorbidities, blood pressure control, BMI, and waist circumference, were not significantly associated. Multivariate analysis showed that gender (OR=0.569, 95%CI: 0.308, 1.050) and family support (OR=0.441, 95%CI: 0.183, 1.058) approached statistical significance. **Conclusion:** Depressive symptoms were present in nearly one-quarter of older hypertensive patients in this study. Although most cases were mild, the association with gender and living arrangement highlights the need for psychosocial screening in this population. Incorporating routine depression screening in primary care for older adults with hypertension may facilitate early intervention, improve psychological well-being, and enhance management of chronic conditions.