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Just hypochondria or something else?
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Introduction  In the older adult hypochondria is one of the most common
somatoform disorders, and represents a particular chal-
lenge for approach, diagnosis and treatment, since in this age group,
non-psychiatric medical comorbidity and concomitant presence of
other psychiatric disorders very high. It is therefore very complex
differentiate hypochondria disease with a real organic cause[1].
Methods  Review of the relevant literature on the subject by
searching PUBMED, limited to studies of greater scientific hierar-
chy.

Results  Analysis of symptoms present in a hypochondriac patient
with comorbid psychiatric disorders and organic pathology, valuing
the importance it has in its clinical manifestations and the difficulty
of differential diagnosis.

Conclusions  In the elderly, the high frequency of somatic disease
conditions the need for a deeper physical and mental examina-
tion to avoid subjecting patients to unnecessary scrutiny and risky
complementary tests[1].

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Elderly diabetic patients: Depression and adherence to treatment
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Introduction  Demographic changes with the aging of the world-
wide population imply an increase in prevalence of chronic
diseases, such as diabetes mellitus. Many studies have suggested
that depression is higher in diabetic patients, and that this associ-
ation often contributes to under-recognition of the illness, limiting
adequate metabolic control.

Aims  To study the association between depression and adher-
ence to treatment in elderly diabetic patients.

Methods  A cross-sectional study was conducted with elderly out-
patients (≥ 65 years) from the Internal Medicine Department in São
João Hospital (CHSJ, Porto). Patients unable to communicate were