OBJECTIVES: While most current antidepressant agents, such as SSRIs and dual action agents are reasonably effective in ameliorating depressive symptomatology in older patients, less is known about their impact on concurrent instrumental activities of daily living (IADL’s). This study examines change in IADL’s, such as the capacity to use the telephone, travel, shop, cook, do housework, handle money, or take medicine, from admission to discharge (average length of stay around 16 days), discharge (average length of stay around 16 days), and follow-up. One-way Analyses of Variance and if significant, Tukey’s pairwise comparisons were used to compare medication groups. RESULTS: At admission, patients exhibited moderate to severe inability to independently carry out IADL’s (Mean score of 14 to 15 out of 21). Medication groups were indistinguishable on change scores in overall IADL’s from time of admission to follow-up. On average, patients showed no change in their ability to carry out IADL’s during this time period, despite an improvement in level of depression, as measured by the collateral version of the Geriatric Depression Scale (Nitcher, Burke, Roccaforte, & Wengel, 1993). CONCLUSIONS: Antidepressant agents in this analysis were associated with modest improvement in IADL’s as assessed by the Duke OARS Multidimensional Functional Assessment in Older Adults. New treatment modalities that improve IADL’s along with depressive symptomatology in older patients would be beneficial. Further controlled studies are needed to better understand these findings.