Conclusions: Our study stands out the influence of character strengths on the well-being of grandparents who develop a role as supplementary caregivers for their grandchildren. It is essential to carry out psychoeducational programs that enhance the resources that can benefit the psychological well-being of grandparents.

P42: Experiential avoidance and gratitude impact in emotional distress among old people post COVID-19 crisis

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Some studies have shown that older people experience less experiential avoidance and more gratitude when they were compared with younger people (López, 2020). These variables might be important to improve the mental health of older people, especially in crisis situations. **Objective:** Investigate the relationship between experiential avoidance (EA), gratitude and distress in old people post crisis COVID-19. **Methods:** A cross-sectional study was carried out. Data from 361 people older than 60 years. The mean age was 68,44 (SD= 5.31), 62.9% were woman. The sample included in the cross-sectional analysis consisted of who provided data on the Acceptance and Action Questionnaire - II (AAQ–II; Bond et al., 2011), Gratitude subscale of the Values in Action Inventory of Strengths-Short Form (Littman-Ovadia, 2015) and Hospital Anxiety and Depression Scale (Zigmond & Snaith, 1983). Pearson´s correlations were used to explore the relationships among study variables including EA, gratitude, and emotional distress. Lineal regression analyses were used to investigate the incremental explained variance in emotional distress according to the main hypotheses. Standardized regression coefficients β were used to determine the relative contribution of these variables. **Results:** EA and gratitude were negatively correlated (r=-.27; p= <.000*).* Gratitude and emotional distress were negatively correlated (r=-.30; p= <.000*).* EA and emotional distress were positive correlated (r=.61; p= <.000). Regression analyses indicated that AAQ-II and gratitude were significant predictors of emotional distress among old people. AAQ-II and gratitude were added. AAQ-II and gratitude were significant predictor of emotional distress R^2_{adj}=62.7 % explain the model. **Conclusion:** EA and gratitude are powerful factors to predict emotional distress in a crisis among older people. EA is an important construct in the understanding of emotional distress. This is an initial step to deep in the process of internal experiences and promoting gratitude can be very beneficial to generate programs to promote mental health in old people.

P46: Subjective cognitive decline and frailty status: results from the Compostela Ageing Study

Authors: David Facal, Alba Felpete, Lucía Pérez-Blanco, Ingri Sandoval, Ana Nieto-Vieites, María Campos-Magdaleno, Cristina Lojo-Seoane

Objective: The relationship between objective cognitive performance and physical frailty has been explored in the recent literature and cognitive frailty has emerged as a strong field of study in psychogerontology. However, less is known about the relationship between subjective cognitive status and physical frailty. The aim of this communication is to present the relationships found between subjective cognitive decline and physical frailty in the third wave of the Compostela Aging Study, the first in which frailty status has been studied.

Methods: Cognitive and neuropsychological, functional, and affective assessment was conducted with persons over 50 years of age with subjective memory complaints in the health area of Santiago de Compostela. 149

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participants who completed the third wave of the study and who did not present dementia or other serious pathologies were selected. Mild Cognitive Impairment (MCI) was diagnosed according to the current criteria in a special meeting of the research team. In the participants without MCI, the intensity and severity of their complaints were assessed according to the Subjective Cognitive Decline (SCD) criteria. Physical frailty was assessed following the frailty phenotype as described by Fried et al.

Results: Only 4 participants (2.7%) presented physical frailty (3, 4 or 5 criteria in the frailty phenotype). Of those presenting physical pre-frailty (1 or 2 criteria), 36 were MCI (23.8%), 33 SCD (21.9%) and 36 controls. Finally, 40 participants (26.5%) presented no frailty criteria (8 with MCI, 13 with SCD and 19 controls). Participants with SCD and pre-frailty were of intermediate age and they had more years of education than the group with MCI and pre-frailty, although these differences were not significant. They have significantly more symptoms of depression (GDS) and worse mental health status (GHQ-12) than participants without frailty and pre-frailty controls, and more symptoms of anxiety (GAD-7) than participants without frailty.

Conclusion: The relationship between subjective memory complaints and frailty could help to establish groups at special risk of cognitive impairment in phases prior to objective cognitive decline, being these groups particularly optimal targets for preventive intervention. However, a detailed characterization of these subgroups is still required.

P53: Brain, Diabetes and Cognition

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Diabetes mellitus (DM) is a chronic metabolic disease, characterized mainly by elevated levels of blood glucose, associated with other important metabolic disturbances. Prevalence of DM is dramatically increasing worldwide, but especially in western countries, due to several factors as like diet, lifestyle and population aging.

Recent studies demonstrate that some diabetic patients have an increased risk of developing cognitive decline and dementia compared with healthy individuals. Although this may reflect brain changes as a consequence of diabetes, the coexistence of diabetes and cognitive dysfunction suggest common risk factors and causative mechanisms.

Cognitive dysfunction, including mild cognitive impairment and dementia, is increasingly recognized as an important comorbidity and complication of diabetes that affects patient's health and diabetes management with several public health implications. The aim of our work is to give an overview of cognitive dysfunction in people with diabetes, describing its clinical features and their biochemical basis and future perspectives.

P54: The Valladolid Multicentre Study: Clinical Difference Between Age Groups in a Sample of Geriatiric Patiants Referred to 7 Liaison Psychiatrics

Authors: Eduardo Fuster Nacher, Mª Desamparados D. Perez Lopez, Miguel Alonso-Sánchez, Eduardo Delgado Parada, Leire Narvaiza Grau, Monica Prat Galbany, Maria Iglesias Gonzalez, Cristina Pujol Riera

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