

P154: Mild Behavioral Impairment (MBI) in a sample of general population aged > 55: associations with degree of cognitive impairment.

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Objective: The present study aims to determine the prevalence estimates of MBI and specific MBI domains in a large sample of the general population, by degree of cognitive impairment (CI).

Method: A representative community sample of individuals aged 55+ (n=4803) (ZARADEMP Study) was studied. MBI, and specific MBI domains, were assessed according to ISTAART-AA MBI criteria, using the Geriatric Mental State (GMS). In accordance with these criteria, clinically significant anxiety, depression, and dementia were excluded. For the standardized degree of CI Pernecky et al.'s criteria were applied: normal (MMSE 30), questionable (MMSE 26-29), mild CI (MMSE 21-25), moderate-severe CI (MMSE <21).

Results: The prevalence of MBI, and specifically the domain Decrease Motivation (DM), increased progressively and significantly by degree of CI, the differences being significant between all cognitive groups. After control by age and education, DM was 2- and 4.5-times more frequent in subjects with mild CI (10.6%) and moderate-severe CI (18.3%), respectively, than in cognitive normal (5.8%). Affective Dysregulation (AD) was 1.7-times more frequent in mild CI (26.4%) (vs 20.4% in normal). Impulsive Dyscontrol (ID) was 2- and 7.9-times more frequent in mild CI (8%) and moderate-severe CI (23.5%) than in cognitive normal (4.7%). And Abnormal Perception and Thoughts (APT) was 6-times more frequent in moderate-severe CI (10%) (vs 1.4% in cognitive normal).

Conclusion: Our results confirm an increase of MBI prevalence across the spectrum of CI. However, each specific domain of MBI shows a different pattern of association with CI. Our results support the relevance of studying MBI domains independently.

P157: Stigma of anxiety and depression: a comparison between older and younger adults

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Objective: Anxiety and depressive disorders are among the most frequently diagnosed mental health problems in older adults. Despite the availability of effective treatments, underutilization of mental health care services is problematic and more pronounced in the older population compared to young adults. Stigma of mental illness may be one explanation for this underutilization as it may impede help-seeking and participation in treatment. The objective of this study was to compare older and young adults on different types of stigma related to depression and anxiety while adjusting for potentially confounding variables.

Methods: Young adults aged 18 to 36 years (n = 96) and older adults aged 60 years and over (n = 103) completed questionnaires measuring self-stigma, personal stigma, and perceived stigma related to anxiety and depression.

Results: We found that older adults have higher levels of personal stigma but lower levels of perceived stigma and self-stigma than young adults.