

PSY 1 Topic	psychosocial
Presentation	ORAL
First author	Dimitri Vrancken VUB, Artevelde University of Applied Sciences dimitri.vrancken@arteveldehs.be junior
Other authors	Jade Tambeur VUB
	Emma De Keyser University of Antwerp
	Elke De Smedt UZ Brussel
	David Beckwée University of Antwerp
	Dominique Van de Velde Ghent University
	Wim Peersman Odisee University of Applied Sciences
	Lieven Annemans Ghent University
	Siddhartha Lieten UZ Brussel
	Patricia De Vriendt VUB
Abstract title	Coaching volunteers delivering the ACTIVE-AGE@home exercise program for frail older adults. Development of a guideline.
Abstract body	<p>Purpose: Several studies show that exercise programs, delivered by volunteers, are promising in tackling frailty in community dwelling older adults. In addition to recruitment, it is also challenging to keep volunteers motivated and aligned with the intervention protocol. This study aimed to face these challenges in the homebased ACTIVE-AGE@home exercise program by developing a practical guideline.</p> <p>Methods: We used mix methods data triangulation to construct the volunteer guideline: information from a scoping literature search (including scientific and grey literature) to create interview guides for three focus groups (volunteering organizations n=8;</p>

informal care givers (n=8); healthcare professionals (n=5)). The qualitative data from the focus groups was summarized in tables, discussed amongst the researchers and validated in two online interactive cocreation sessions with a panel of stakeholders from the fields of sport, health, care and older adults (n=12). Consensus was noted in an online jamboard and meeting report.

Results:

Targeted on- and offline RECRUITMENT of external volunteers or informal caregivers with emphasis on word of mouth. Informal caregivers prefer the recruitment of external volunteers rather than to deliver the intervention themselves. TRAINING opportunities should be short, in group and accessible for people without computers. A fixed and single point of contact should offer frequent personal GUIDANCE. For safety and fidelity reasons, volunteers should be screened and frequently EVALUATED. A meaningful and rewarding activity is more APPRECIATED than financial reimbursement. PROTECTION against calamities at the home of the older adults can be provided by a strict definition of tasks, code of conduct and no fault liability insurance.

Conclusions:

Further research can determine how this guideline optimizes volunteering efforts.

PSY2

Omgaan met psychische kwetsbaarheid bij bewoners in een WZC: Een verkennende mixed-method studie.

Topic	psychosocial
Presentation	Poster
First author	Maaïke De Maré Arteveldehogeschool Gent maaïke.demare@artveldehogeschool.be junior
Other authors	Riet De Paermentier Arteveldehogeschool Gent & AZ Maria Middelaes Gent
	Nancy Van Ranst Arteveldehogeschool Gent
	Ruben Vanbosseghem Arteveldehogeschool Gent
	Elise Cornelis Arteveldehogeschool Gent
	Nele Van Schelvergem WZC Domino Gent

Omgaan met psychische kwetsbaarheid bij bewoners in een WZC: Een verkennende mixed-method studie.

Abstract title	Omgaan met psychische kwetsbaarheid bij bewoners in een WZC: Een verkennende mixed-method studie.
Abstract body	<p>Doel: Door verschillende maatschappelijke evoluties neemt internationaal het aantal ouderen met een (ernstige) psychiatrische kwetsbaarheid in woonzorgcentra toe. Bovendien zijn geestelijke en lichamelijke gezondheid bij ouderen nauwer met elkaar verbonden dan bij jongere personen. VoPoster lager opgeleide zorgverleners, zoals zorgkundigen en logistieke medewerkers, lijken niet over voldoende kennis te beschikken om de zorg voor ouderen met een psychische kwetsbaarheid te waarborgen, wat een negatieve impact kan hebben op de zorgkwaliteit. Langdurig en aanhoudend gedrag in het kader van psychiatrische stoornissen is bovendien belastend voor de zorgverleners.</p> <p>Methodologie: Door middel van kwalitatief onderzoek met een mixed-method design werden de ervaringen van zorgverleners op twee afdelingen van een Gents WZC verzameld aan de hand van (n=25) logboekregistraties van werkshiften en (n=5) diepte-interviews. Data werden inductief vanuit een fenomenologische benadering geanalyseerd door middel van een thematische inhoudsanalyse.</p> <p>Resultaten: Zorgverleners vermelden de volgende voorbeelden van storend gedrag van bewoners dat wijst op psychische kwetsbaarheid: achterdocht, seksuele ontremming, psychotische toestand, verslaving, depressie, wanen en dreigen met zelfdoding. Zorgverleners reageren op de volgende wijzen op dit storend gedrag: praten, weggaan, toegeven, uitleg geven, negeren, afleiden en actief ingrijpen in de situatie. Ze geven aan dat de bewoners vaak negatief reageren op hun interventies. Daarenboven roepen deze situaties vaker negatieve gevoelens op bij de zorgverleners.</p> <p>Conclusie: Zorgverleners ervaren omgaan met psychische kwetsbaarheid bij bewoners als uitdagend. Er ontbreken duidelijke en haalbare interventies die multidisciplinair aangewend kunnen worden om psychische kwetsbaarheid effectief en persoonsgericht aan te kunnen pakken.</p>

PSY 3

Omgaan met Somatisch Onvoldoende verklaarde Lichamelijke Klachten (SOLK) bij kwetsbare ouderen op een gerontopsychiatrische afdeling: Een verkennende

Topic	psychosocial
Presentation	Poster
First author	Riet De Paermentier Arteveldehogeschool Gent & AZ Maria Middelaes Gent

Omgaan met Somatisch Onvoldoende verklaarde Lichamelijke Klachten (SOLK) bij kwetsbare ouderen op een gerontopsychiatrische afdeling: Een verkennende

riet.depaermentier@arteveldehs.be
junior

Other authors

Maaïke De Maré
Arteveldehogeschool Gent

Nancy Van Ranst
Arteveldehogeschool Gent

Ruben Vanbosseghem
Arteveldehogeschool Gent

Elise Cornelis
Arteveldehogeschool Gent

Franky Campe
Karus Gent

Abstract title

Omgaan met Somatisch Onvoldoende verklaarde Lichamelijke Klachten (SOLK) bij kwetsbare ouderen op een gerontopsychiatrische afdeling: Een verkennende

Abstract body

Doel: Nederlandse zorgstandaarden beschrijven SOLK als lichamelijke klachten waarbij na adequaat medisch onderzoek geen somatische aandoening wordt gevonden die de klachten voldoende verklaart. SOLK omvat een breed spectrum van klachten die vaak voorkomen bij ouderen, voornamelijk bij ouderen met een psychische kwetsbaarheid. Toch herkennen zorgverleners SOLK bij ouderen onvoldoende en hebben ze nood aan handvaten om er mee om te gaan.

Methodologie: Door middel van kwalitatief onderzoek met een mixed-method design werden de ervaringen van zorgverleners op een gerontopsychiatrische afdeling van een Gents psychiatrisch ziekenhuis verzameld aan de hand van (n=17) logboekregistraties van werkshiften en (n=5) diepte-interviews. Data werden inductief vanuit een fenomenologische benadering geanalyseerd door middel van een thematische inhoudsanalyse.

Resultaten: Zorgverleners worden heel vaak geconfronteerd met onvoldoende verklaarbare lichamelijke klachten bij psychiatrisch kwetsbare ouderen (slapeloosheid, hoofdpijn, tremor, verkrampt gevoel op de borst, duizeligheid, buikpijn, niets meer kunnen, verlamming, misselijkheid, rugklachten) maar hanteren daarvoor de definitie van SOLK niet. Zorgverleners geven aan dat een persoonsgerichte aanpak noodzakelijk is maar dat oudere zorgvragers vaak negatief reageren op hun interventies zoals: blijven klagen, blijven om medicatie vragen, zich niet begrepen voelen; adviezen niet opvolgen en niet aan therapie deelnemen. Daarenboven roepen deze situaties vaker negatieve gevoelens op bij de zorgverleners zoals machteloosheid, frustratie, gevoel

Omgaan met Somatisch Onvoldoende verklaarde Lichamelijke Klachten (SOLK) bij kwetsbare ouderen op een gerontopsychiatrische afdeling: Een verkennende

de zorgvrager niet te kunnen helpen, vermoeidheid en ongeduld.

Conclusie: Zorgverleners ervaren omgaan met SOLK bij psychisch kwetsbare ouderen als uitdagend en kennen de definitie of internationale zorgstandaarden rond SOLK onvoldoende. Ze hebben nood aan adequate assessmentmethodes en therapeutische interventies die multidisciplinair aangewend kunnen worden om SOLK effectief en persoonsgericht aan te kunnen pakken.

PSY 4

Strategies for engaging community-dwelling older adults in research, insights from the ACTIVE-AGE@home trial

Topic	psychosocial
Presentation	ORAL
First author	Emma De Keyser Universiteit Antwerpen emma.de.keyser@vub.be junior
Other authors	Jade Tabeur Vrije Universiteit Brussel
	Dimitri Vrancken Vrije Universiteit Brussel, Arteveldehogeschool
	Elke De Smedt UZ Brussel
	Wim Peersman Odisee, Universiteit Gent
	Dominique Van de Velde Universiteit Gent
	David Beckwée Universiteit Antwerpen, Vrije Universiteit Brussel
	Siddharta Lieten UZ Brussel
	Lieven Annemans Universiteit Gent
	Patricia De Vriendt Vrije Universiteit Brussel, Arteveldehogeschool

Strategies for engaging community-dwelling older adults in research, insights from the ACTIVE-AGE@home trial

Abstract title	Strategies for engaging community-dwelling older adults in research, insights from the ACTIVE-AGE@home trial
Abstract body	<p>Purpose: Researchers rarely report on recruitment strategies used to obtain the necessary sample size of frail older adults in trials. This study aims to fill this gap and seeks to identify the appropriate channels and methods to reach out to frail older adults in Ghent and Leuven (Belgium).</p> <p>Methods: In the context of the study ACTIVE-AGE@home, a recruitment strategy based on the TIBaR principles (Trust, Incentives, Barriers and Responsiveness) was set out with the goal of reaching community-dwelling frail older adults. Public documents were used to determine the amount of possible recruitment partners. The usefulness of these partners was determined at three levels: macro (broad-scale approaches), meso (community-level strategies), and micro (individual-level tactics).</p> <p>Results: During 6 months, we contacted 44 out of the 50 (macro), 83 out of the 170 (meso) and 476 out of the 2207 (micro) potential recruitment partners. Respectively 0, 50 and 49 partners referred potentially frail older adults to us. Of these potential participants, only 1 at the meso-level and 11 at the micro-level older adults were frail and did meet the inclusion criteria.</p> <p>Conclusions: Micro-level partners are best suited to identify and reach frail older adults. Therefore, warm referral (personal contact, regular visits) appears to be of great importance. Nevertheless, contacts at macro and meso-levels are also important to get in touch with local partners. Despite our extensive efforts, our recruitment strategy for frail older adults fell short. Future research should share experiences and best practices, aiding those working with this hard to reach population.</p>

FUNCT 1

Long-term preservation of lean mass and loss of fat mass after intensive lifestyle intervention in older adults with obesity and type 2 diabetes

Topic	functional
Presentation	ORAL
First author	Robert Memelink Hogeschool van Amsterdam en Vrije Universiteit Brussel r.g.memelink@hva.nl junior
Other authors	Aveline Hijlkema Hogeschool van Amsterdam

Long-term preservation of lean mass and loss of fat mass after intensive lifestyle intervention in older adults with obesity and type 2 diabetes

Bas Valentin
Hogeschool van Amsterdam

Martinet Streppel
Hogeschool van Amsterdam

Wilrike Pasman, Suzan Wopereis
TNO, Nederland

Johan Wopereis
Danone Nutricia Research, Nederland

Michael Tieland
Hogeschool van Amsterdam

Josje Schouffour
Hogeschool van Amsterdam

Ivan Bautmans
Vrije Universiteit Brussel, Universitair Ziekenhuis Brussel en
SOMT University of Physiotherapy, Nederland

Peter Weijs
Hogeschool van Amsterdam en Vrije Universiteit Amsterdam

Abstract title

Long-term preservation of lean mass and loss of fat mass after intensive lifestyle intervention in older adults with obesity and type 2 diabetes

Abstract body

Doel: To evaluate body composition, physical functioning and quality of life (QoL) 6 months after completion of a 3-month lifestyle intervention with or without supplementation of a protein drink, in older adults with obesity and type 2 diabetes.

Methodologie: Adults (n=123) aged ≥ 55 years with obesity and type 2 diabetes were enrolled in a 3-month intensive lifestyle intervention with hypocaloric diet, resistance exercise and high-intensity interval training. Participants were randomised to either receive a leucine and vitamin D enriched protein drink or isocaloric control drink. The 3-month intervention was followed by 6 months without intervention. At baseline, 3 and 9 months (follow-up), body composition, physical functioning, and QoL were assessed. Statistical analysis was performed using a linear mixed model.

Resultaten: Body weight loss was largely sustained at follow-up (-2.11 kg compared to baseline, 95% CI -2.77 to -1.45), and comprised a sustained loss of fat mass (-2.57 kg, 95% CI -3.17 to -1.97) with simultaneous gain of lean mass (+0.69 kg, 95% CI +0.24 to +1.15). Improvements in 400m walk speed (+0.05 m/s, 95% CI +0.03 to +0.08) and chair stand test time (- 1.5 s, 95%

Long-term preservation of lean mass and loss of fat mass after intensive lifestyle intervention in older adults with obesity and type 2 diabetes

CI -1.9 to -1.1) were sustained at follow-up. Protein supplementation had not affected the outcomes at follow-up.

Conclusion: Older adults with obesity and type 2 diabetes preserved their lean mass, their loss of fat mass, and their improvements in physical functioning, 6 months after completion of a 3-month intensive lifestyle intervention. Addition of the protein drink during the intervention did not modify outcomes at follow-up.

FUNCT 2

Instruments for measuring the neuromuscular function domain of vitality capacity in older persons: an umbrella review

Topic	functional
Presentation	poster
First author	Francis Louter Frailty in Ageing research group (FRIA), Vrije Universiteit Brussel, Brussels, Belgium francis.louter@vub.be junior
Other authors	Veerle Knoop Frailty in Ageing research group (FRIA), Vrije Universiteit Brussel, Brussels, Belgium;
	Jeroen Demarteau Frailty in Ageing research group (FRIA), Vrije Universiteit Brussel, Brussels, Belgium
	Ellen Freiburger Institute for Biomedicine of Aging, University of Erlangen-Nuremberg, Nuremberg, Germany
	Mylene Aubertin-Leheudre Centre de Recherche de l'Institut Universitaire de Gériatrie de Montréal, Montreal, QC, Canada
	Andrea B Maier Department of Human Movement Sciences, @AgeAmsterdam, Amsterdam Movement Sciences, Vrije Universiteit Amsterdam, Amsterdam, Netherlands
	Jotheeswaran Amuthavalli Thiyagarajan Ageing and Health Unit, Department of Maternal, Newborn, Child and Adolescent Health & Ageing, WHO HQ, Geneva, Switzerland

Instruments for measuring the neuromuscular function domain of vitality capacity in older persons: an umbrella review

Ivan Bautmans
Frailty in Ageing research group (FRIA), Vrije Universiteit
Brussel, Brussels, Belgium

Abstract title	Instruments for measuring the neuromuscular function domain of vitality capacity in older persons: an umbrella review
Abstract body	<p>Doel: Neuromuscular function (NF) is a part of vitality capacity (VC) which is a key domain of intrinsic capacity. Recently, the international expert panel that generated the consensus definition of VC proposed hand grip strength, knee extensor strength, and respiratory muscle strength as excellent candidate biomarkers for NF. This umbrella review aimed to identify the available assessments to measure NF and critically review the measurement properties of the identified assessments in community-dwelling older adults.</p> <p>Methodologie: The databases Pubmed, Web of Science and Embase were systematically screened for systematic reviews and meta-analyses reporting on neuromuscular assessments, resulting in 7555 articles (last search March 2023). The COSMIN checklist was used to appraise the psychometric properties of the identified assessments and the AMSTAR checklist for assessing methodological quality.</p> <p>Resultaten: 27 systematic reviews described assessments for either hand grip strength, knee extensor strength or respiratory muscle strength. Some of the identified reviews described the psychometric properties of the assessment tools. Five assessments were selected as good instruments to measure NF. These are the hand-held dynamometer for hand grip strength, the dynamometer for knee extensor strength and the sniff nasal inspiratory pressure, maximal inspiratory pressure (MIP), and maximal expiratory pressure (MEP) for respiratory muscle strength.</p> <p>Conclusie: The identified assessments, including hand-held dynamometer, dynamometer for knee extensor strength, sniff nasal inspiratory pressure, MIP, and MEP, offer valuable tools for identifying community-dwelling older adults at risk for declining NF within the broader context of healthy ageing. These findings contribute to enhancing targeted interventions and promoting proactive healthcare strategies for older adults.</p>
Varia 1	Reablement in Flanders
Topic	varia
Presentation	poster
First author	Mike Jarrey Artevelde University of Applied Sciences

Reablement in Flanders

mike.jarrey@arteveldehs.be

junior

Abstract title

Reablement in Flanders

Abstract body**Doel:**

Reablement is a person-centered, goal-oriented approach aimed at enhancing engagement in daily activities and social networks. In the context of primary care service reform, this study seeks to understand stakeholder perspectives for successful implementation.

Methodologie:

Using a two-stage phenomenological qualitative design, Stage 1 involves interviews and focus groups with primary care stakeholders and clients, analyzed using interpretative phenomenological methods. Stage 2 introduces the Reable-Lab approach, evaluating the challenges and needs of a reablement team with a real-life client. Data analysis combines thematic analysis of team interviews, focus group discussions, and diaries.

Resultaten:

Findings reveal challenges faced by professionals, including time constraints and financial models, while emphasizing the value of teamwork and the importance of understanding clients' capacities and contexts. Skilled staff and appropriate tools are essential.

From the clients' perspective, flexibility and autonomy are vital, as their daily activities define their individual identity and social role.

Conclusie:

This research offers valuable insights for implementing reablement in primary care, aligning stakeholder needs and challenges, ultimately contributing to the improvement of primary care services.

Varia 2

EFORTO®: AN INNOVATIVE E-HEALTH SYSTEM TO MONITOR INTRINSIC CAPACITY

Topic

varia

Presentation

ORAL

First author

Liza De Dobbeleer
Gerontology Department, Faculty of Medicine and Pharmacy,
Vrije Universiteit Brussel, Brussels, Belgium. Frailty in Ageing
Research (FRIA) Group, Faculty of Medicine and Pharmacy,
Vrije Universiteit Brussel, Brussels, Belgium. Department of
Geriatrics, Universitair Ziekenhuis Brussel, Brussels, Belgium.

EFORTO®: AN INNOVATIVE E-HEALTH SYSTEM TO MONITOR INTRINSIC CAPACITY

liza.de.dobbeleer@vub.be

senior

Other authors

Rudi Tielemans
UniWeb, Meise, Belgium.

Siddhartha Lieten
Gerontology Department, Faculty of Medicine and Pharmacy, Vrije Universiteit Brussel, Brussels, Belgium. Frailty in Ageing Research (FRIA) Group, Faculty of Medicine and Pharmacy, Vrije Universiteit Brussel, Brussels, Belgium. Department of Geriatrics, Universitair Ziekenhuis Brussel, Brussels, Belgium.

Ivan Bautmans
Gerontology Department, Faculty of Medicine and Pharmacy, Vrije Universiteit Brussel, Brussels, Belgium. Frailty in Ageing Research (FRIA) Group, Faculty of Medicine and Pharmacy, Vrije Universiteit Brussel, Brussels, Belgium. Department of Geriatrics, Universitair Ziekenhuis Brussel, Brussels, Belgium. SOMT University of Physiotherapy, Amersfoort, The Netherlands.

Abstract title

EFORTO®: AN INNOVATIVE E-HEALTH SYSTEM TO MONITOR INTRINSIC CAPACITY

Abstract body

AIM

Eforto®, an innovative e-health system to (self-)monitor intrinsic capacity by measuring maximal handgrip strength (GS_{max}) and muscle fatigability (fatigue resistance (FR = time until grip strength decreased to 50% of maximum during sustained contraction) and grip work (GW = area under the strength-time curve)) has been developed. We compared GS_{max} and muscle fatigability obtained with the standard analog system Martin Vigorimeter (MV) and Eforto®.

METHODS

In 61 community-dwelling older persons (mean age = 85.6±3.2 years, 55.7% women) GS_{max} and muscle fatigability were measured twice in a random order (once with MV, once with Eforto®). Immediately after each test, the experienced pain, its intensity and whether pain hindered participants to sustain the contraction were questioned. Additionally, the Borg scale perceived exertion was assessed to obtain rate of perceived exertion (RPE) scores.

RESULTS

No significant differences in GS_{max} and muscle fatigability between MV and Eforto® were found (all $p < 0.05$). Besides there were significant correlations between GS_{max} ($r = 0.935$), FR ($r = 0.718$) and GW ($r = 0.593$) (all $p < 0.001$). Moreover, there were no differences in pain variables between both systems. Based on the RPE scores participants were pushed to the same

EFORTO®: AN INNOVATIVE E-HEALTH SYSTEM TO MONITOR INTRINSIC CAPACITY

maximal fatigue level when performing the muscle fatigability test with MV compared to Eforto® (5.3/10 and 5.4/10, p=0.569).

CONCLUSION

We can conclude that Eforto® is a promising and innovative e-health system that can be used for monitoring the intrinsic capacity. No significant differences were found in GSmax, muscle fatigability results, pain experiences and level of exertion between both systems.

FUNCT 3

Physiotherapy in Geriatric Hospital Wards: What (De)Motivates patients? A Qualitative Study based on Self-Determination Theory

Topic	functional
Presentation	poster
First author	Lucie Vancraeynest Université Catholique de Louvain lucie.vancraeynest@gmail.com junior
Other authors	Didier Schoevaerdt Université Catholique de Louvain, CHU UCL Namur (site Godinne)
Abstract title	Physiotherapy in Geriatric Hospital Wards: What (De)Motivates patients? A Qualitative Study based on Self-Determination Theory
Abstract body	<p>But : To quantify the motivation of hospitalized elderly people (HEP) in their participation in activities of daily living (ADL) and physiotherapy, and to explore the motivating factors behind their participation in physiotherapy, using a qualitative methodology.</p> <p>Méthode : The motivation of 60 elderly people hospitalized in a geriatric ward was quantified using the Scale of Demotivation Assessment (SDA). Out of these, 14 were interrogated through individual semi-structured face-to-face interviews. After transcription, data was analyzed according to Self-Determination Theory, which has been proven effective in understanding motivational mechanisms.</p> <p>Résultats : The prevalence of demotivation ranged from 34% to 60% for activities of daily living and from 23% to 48% for physiotherapy. The main demotivating factors were the feeling of external control (lack of autonomy) and dependance experienced by HEP, as well as the limited availability of staff during hospitalization. Conversely, feelings of competence, security, respect for limits, and human investment from the</p>

Physiotherapy in Geriatric Hospital Wards: What (De)Motivates patients? A Qualitative Study based on Self-Determination Theory

healthcare team members (HTM) were important motivating factors.

Conclusions : Appropriate space organizing and the provision of suitable equipment, combined with a caring and respectful attitude from the HTM, could considerably encourage the expression of intrinsic motivation, and the involvement of HEP in their own care program.

Varia 3

Moral Case Deliberation: evaluation of a 2-year training program for MCD-facilitators

Topic	varia
Presentation	poster
First author	Sophia Grevisse Ghent University sophia.grevisse@ugent.be junior
Other authors	Karen Versluys Ghent University Ruth Piers Ghent University
Abstract title	Moral Case Deliberation: evaluation of a 2-year training program for MCD-facilitators
Abstract body	<p>Purpose: In recent years Moral case deliberation (MCD) has been increasingly used in health care services as a means of dealing with daily ethical issues. MCDs are usually led by a facilitator. Not much is known about what constitutes a good facilitator and what sort of training program he or she should complete. In this paper we aim to answer these questions.</p> <p>Methods: A training program was set up over 2 years that focused on how to train a facilitator to conduct a MCD and how to implement MCD in daily practice. Fifty-two participants, working in different healthcare organisations completed the training program. Through a written anonymised questionnaire and focus groups discussions, participants were given the opportunity to evaluate the training program and the extent to which participants could facilitate patient-centered care in their practice using MCD.</p> <p>Results: After completing the program most participants didn't feel confident to lead MCDs. Most of them reported needing more practice to develop their skills and demanded additional feedback from colleagues or other participants in the training program. To successfully implement MCD in health care</p>

Moral Case Deliberation: evaluation of a 2-year training program for MCD-facilitators

services they mentioned needing more support from higher-ups, more specifically in terms of financial resources, time, and recognition.

Conclusions: To successfully implement MCD in daily practice it is important that the practice is recognized by higher-ups in healthcare organizations. It is equally important that the healthcare professionals that are trained as facilitator are given sufficient practice opportunities and feedback for them to feel comfortable in their role.

Nurse 1

Prevention of constipation in patients with a geriatric profile: a scoping review.

Topic	nursing
Presentation	Poster
First author	Elias De Coninck KU Leuven elias.deconinck@kuleuven.be junior
Other authors	Laura Massant KU Leuven Els Steeman KU Leuven
Abstract title	Prevention of constipation in patients with a geriatric profile: a scoping review.
Abstract body	<p>Introduction:</p> <p>Constipation is prevalent among geriatric patients (30%-50%). While standard preventive measures like hydration, exercise, and fiber intake are recommended, their effectiveness in frail older adults remains uncertain. Hence, tailored guidelines are vital. This scoping review provides an overview of non-medicated constipation prevention strategies in the geriatric population, offering essential guidance for healthcare providers.</p> <p>Methodology:</p> <p>This scoping review identified preventive approaches for constipation in geriatric patients. Searches in PubMed, CINAHL, Embase, Web of Science, and Cochrane Library were conducted between February and March 2023. Inclusion criteria involved individuals aged 65+, constipation prevention as the outcome, and articles in Dutch or English. Studies specific to medical conditions causing constipation or involving</p>

Prevention of constipation in patients with a geriatric profile: a scoping review.

pharmacological interventions were excluded. Study quality was evaluated using RoB2 and ROBINS-I, with results presented through Robvis.

Results:

Among 15 954 studies, nine primary studies and five reviews were included. These explored constipation's relationship with high-fiber diets, hydration, exercise, and abdominal massages. The validity and reliability of included studies were moderate, with a lack of a uniform constipation definition impacting result reliability. Findings were inconsistent and inadequately focused on geriatric profiles.

Conclusion:

Limited evidence supports high-fiber diets, hydration, exercise, and abdominal massages as geriatric constipation prevention methods. Conducting more targeted research is crucial to developing specific preventive strategies for this unique population. However, in the meantime, exploring abdominal massage as an innovative practice could be a valuable step forward.

Varia 4

ACTIVE AND HEALTHY AGEING: CO-CREATIVE HOLISTIC EDUCATIONAL PROGRAM FOR SOCIALLY VULNERABLE ELDERLY

Topic	varia
Presentation	Poster
First author	Pieterjan Verschelden Odisee University of Applied Sciences, Department of Health Care pieterjan.verschelden@odisee.be junior
Other authors	Julie Vanderlinden Odisee University of Applied Sciences, Department of Health Care Sabine Lambers Odisee University of Applied Sciences, Department of Health Care Eva Es Odisee University of Applied Sciences, Department of Health Care

ACTIVE AND HEALTHY AGEING: CO-CREATIVE HOLISTIC EDUCATIONAL PROGRAM FOR SOCIALLY VULNERABLE ELDERLY

Abstract title ACTIVE AND HEALTHY AGEING: CO-CREATIVE HOLISTIC EDUCATIONAL PROGRAM FOR SOCIALLY VULNERABLE ELDERLY

Abstract body Purpose:

This research project aimed to identify the healthy lifestyle needs of socially vulnerable elderly. Sequentially, a healthy lifestyle program was developed in co-creation with the participants.

Methods:

Socially vulnerable elderly were approached and recruited by means of a neighborhood analysis. By means of focus groups, participants were asked about their motivators and barriers in terms of taking up health lifestyle behavior. Subsequently, as a result of co-creation, a 10-week healthy lifestyle program was developed by the participants, partners and a multidisciplinary research team.

Results:

The developed program consisted out of 10 weekly group sessions, which focused on different pillars within a holistic lifestyle. Nine centers for community-dwelling elderly in Flanders and Brussels were included. In total, 93 elderly were recruited to participate out of which 76 elderly completed the full program. The main identified motivators for participation were to acquire more knowledge, staying and becoming fit, expanding their social network, escaping loneliness and positive ageing.

Conclusions:

The identification and recruitment of socially vulnerable elderly was a challenging process during the trial of the program. First as this population often remains under the radar of both formal and informal organizations, it was not always possible to include all participants during the entire scope of the program. As a result of that, efforts are made to decrease drop out in future implementation of this program. Second, the social aspect of small groups, the catering and the 'fun' factor during activities turned out to be critical success factors for the adherence of participants during the program.

FUNCT 4

Empowering Healthy Aging with Exoskeletons: A State-of-the-art of Assistive Technology to Augment Older Adults' Functional Ability and Intrinsic Capac

Topic functional

Presentation Poster

Empowering Healthy Aging with Exoskeletons: A State-of-the-art of Assistive Technology to Augment Older Adults' Functional Ability and Intrinsic Capac

First author	Reinhard Claeys Vrije Universiteit Brussel david.beckwee@vub.be junior
Other authors	Rebeca Alejandra Gavrila Laic Vrije Universiteit Brussel
	Mahyar Firouzi Vrije Universiteit Brussel
	Eva Swinnen Vrije Universiteit Brussel
	David Beckwée Vrije Universiteit Brussel
Abstract title	Empowering Healthy Aging with Exoskeletons: A State-of-the-art of Assistive Technology to Augment Older Adults' Functional Ability and Intrinsic Capac
Abstract body	<p>AIM</p> <p>The global aging population faces significant health challenges, increasing vulnerability to disability due to natural aging processes. Wearable lower limb robotic exoskeletons (LLE) have emerged as a promising solution to enhance physical function in older individuals. This systematic review synthesizes the use of LLE in alignment with the WHO's healthy aging vision, examining their impact on intrinsic capacities and functional abilities.</p> <p>METHODS</p> <p>We conducted a comprehensive systematic literature search in 6 databases, yielding 36 relevant articles covering various health conditions, including sarcopenia, stroke, Parkinson's disease, osteoarthritis, and more.</p> <p>RESULTS</p> <p>The interventions, spanning 1 to 40 sessions, utilized a range of LLE technologies such as Ekso®, HAL®, Honda Walking Assist®, Lokomat®, Walkbot®, Healbot®, Keeego Rehab®, Stride Management Assist®, overground wearable exoskeletons, Eksoband®, powered ankle-foot orthoses, HAL® lumbar type, Human Body Posturizer, Gait Enhancing and Motivation System®, soft robotic suits, active pelvis orthoses, and EX1® exoskeleton. The findings revealed substantial positive outcomes across diverse health conditions. LLE training led to improvements in key performance indicators, such as the 10-Meter Walk Test, Five Times Sit-to-Stand test, Timed Up and Go test, and more. Additionally, enhancements were noted in gait quality, joint mobility, muscle strength, and balance. These improvements were accompanied by reductions in sedentary</p>

Empowering Healthy Aging with Exoskeletons: A State-of-the-art of Assistive Technology to Augment Older Adults' Functional Ability and Intrinsic Capac

behavior, pain perception, muscle exertion, and metabolic cost during gait.

CONCLUSION

In summary, this review demonstrates consistent and significant enhancements in critical parameters across a broad spectrum of health conditions following LLE interventions in older adults.

NURS 2

Music interventions and aromatherapy as strategies to reduce preoperative anxiety: an umbrella review

Topic	nursing
Presentation	ORAL
First author	Kelu Yang Department of Public Health and Primary Care, Academic Center for Nursing and Midwifery, KU Leuven – University of Leuven kelu.yang@kuleuven.be junior
Other authors	Elke Detroyer Department of Public Health and Primary Care, Academic Center for Nursing and Midwifery, KU Leuven – University of Leuven & Department of Geriatric Medicine, University Hospitals Leuven, Belgium
	Danny Hoogma Department of Anesthesiology, University Hospitals Leuven & Department of Cardiovascular Sciences, KU Leuven – University of Leuven, Belgium
	Jinhui Tian Evidence-Based Medicine Center, School of Basic Medical Sciences, Lanzhou University, China
	Steffen Rex Department of Anesthesiology, University Hospitals Leuven & Department of Cardiovascular Sciences, KU Leuven – University of Leuven, Belgium
	Koen Milisen Department of Public Health and Primary Care, Academic Center for Nursing and Midwifery, KU Leuven – University of Leuven & Department of Geriatric Medicine, University Hospitals Leuven, Belgium
Abstract title	Music interventions and aromatherapy as strategies to reduce preoperative anxiety: an umbrella review

Music interventions and aromatherapy as strategies to reduce preoperative anxiety: an umbrella review

Abstract body

Purpose:We aimed to conduct an umbrella review of systematic reviews (SRs) studying the evidence about music interventions or aromatherapy in reducing Preoperative anxiety (PA) among adult patients.

Methods:We retrieved MEDLINE via PubMed, EMBASE, CINAHL, and Cochrane Library from inception until July 13th, 2023, to identify SRs assessing the effects of music interventions or aromatherapy on PA in adult surgical patients. Primary outcome was the efficacy of music interventions and aromatherapy in reducing PA levels. The details of music interventions and aromatherapy implementation were also summarized. We assessed the quality of included SRs using the MeaSurement Tool to Assess Systematic Reviews checklist (AMSTAR 2).

Results:ight eligible SRs (67 primary studies) were included, with four SRs for music interventions (1 high quality, 2 moderate, and 1 low), three for aromatherapy (all low quality) and one for both (moderate quality). The reporting of intervention content and implementation process was unsatisfactory, with numerous key messages missing. The pooled results on reducing PA using music interventions or aromatherapy were statistically significant (MD=-4.53, 95%CI (-5.83, -3.23), I2=58%; MD=-7.70, 95%CI (-13.02, -2.39), I2=98%, respectively). Subgroup analyses found that music interventions had greater effects when the duration of intervention was 20 minutes or longer (subgroup differences $p < 0.01$) and in patients younger than 60 years of age (subgroup differences $p = 0.02$).

Conclusions: Both music intervention and aromatherapy may have a beneficial effect on reducing preoperative anxiety levels. More rigorous direct comparative studies are needed addressing the individual components of the intervention, especially regarding different elements of music or essential oil and different delivery methods.

FUNC 5

User experience of older adults with Alzheimer's disease or mild cognitive impairment on technology-supported physical interventions.

Topic	functional
Presentation	Poster
First author	Eugénie Lambrecht Universiteit Antwerpen eugenie.lambrecht@uantwerpen.be junior
Other authors	Josefien Van Olmen Universiteit Antwerpen

User experience of older adults with Alzheimer's disease or mild cognitive impairment on technology-supported physical interventions.

Eline Heylen
Universiteit Antwerpen

Maxine Claes
Universiteit Antwerpen

Jana Brabants
Universiteit Antwerpen

David Beckwée
Vrij Universiteit Brussel/Universiteit Antwerpen

Abstract title

User experience of older adults with Alzheimer's disease or mild cognitive impairment on technology-supported physical interventions.

Abstract body

Objective: The aim of this systematic review is to cluster user experience of older adults with Alzheimer's disease or mild cognitive impairment on technology-supported interventions aimed at improving physical activity.

Methods: Potentially relevant primary studies were identified by an intensive search of the Pubmed (Medline) and WOS databases up to March 2023. A first screening on title and abstract and a second screening on full text was conducted by at least two authors in a blinded manner, by the use of predetermined eligibility criteria. All results on user experience (usability, feasibility, acceptability and tolerability) of the individual studies were presented in an evidence table. The articles were evaluated and graded on their methodological quality using the QUALSYST TOOL and the GRADE-CERQual respectively.

Results: 19 studies (645 participants, mean age 68) were included, investigating VR, video screens, apps, robots, calls, sensors and one on technology in general. The various technologies in the studies were all described as usable, tolerable, feasible and acceptable with moderate to high confidence. For each article, the different positive and negative factors in user experience were described.

Conclusion: Despite its negative factors, different types of technology with a physical component are feasible, usable, tolerable and acceptable for persons with Alzheimer's disease or mild cognitive impairment. This positive experience provides a rationale for future research where more large scale studies including severe cases of dementia are needed.

PSY 5

ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach

Topic psychosocial

Presentation poster

ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach

First author	Elisa Van Wiele KU Leuven elisa.vanwiele@kuleuven.be junior
Other authors	Stefanie Meul KU Leuven
	Hannah Thys KU Leuven
	Tinne Claes KU Leuven
	Bernadette Diercks de Casterlé KU Leuven
	Veerle Foulon KU Leuven
	Kaat Wils KU Leuven
	Jessie Dezutter KU Leuven
Abstract title	ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach
Abstract body	<p>Doel:Hoewel levensmoeheid bij ouderen geregeld in de pers beschreven wordt als een complexe problematiek en tegenwoordig ook bredere maatschappelijke erkenning krijgt, is er nog nauwelijks wetenschappelijk onderzoek verricht naar wat het fenomeen nu precies inhoudt. Daarom wilt ClareToL op interdisciplinaire wijze tot een verheldering van het fenomeen van levensmoeheid bij bewoners van woonzorgcentra komen</p> <p>Methodologie:Het project bestaat uit verschillende studies. In een eerste kwalitatieve fase worden bewoners en hun zorgverleners geïnterviewd over hun ervaringen. Deze gegevens zullen gebruikt worden om levensmoeheid te differentiëren van depressie en/of existentieel lijden. Daarnaast hebben mondelinge geschiedenisinterviews met nabestaanden en gepensioneerde zorgverleners tot doel om aan de huidige ervaring van levensmoeheid een cultuurhistorische dimensie toe te voegen. In een tweede kwantitatieve fase zal er een schaal ontwikkeld worden om levensmoeheid bij woonzorgcentrabewoners te meten. Dit instrument zal toelaten om een mogelijke samenhang van levensmoeheid met andere (psycho)geriatrische thema's, zoals bijvoorbeeld medicatiegebruik, te toetsen. Deze methodiek beoogt een maximale integratie en triangulatie van de verschillende perspectieven, disciplines (zorgethisch, psychologisch,</p>

ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach

farmacologisch en cultuurhistorisch) en methoden om zo een diepgaand begrip van het fenomeen te bekomen.

Resultaten: Voorlopige resultaten tonen de gelaagdheid van de problematiek, waarbij zowel cultuurspecifieke factoren als individuele levensgebeurtenissen een belangrijke rol lijken te spelen in de manier waarop ouderen hun leven op hoge leeftijd ervaren en omgaan met de daarmee gepaard gaande veranderingen en beperkingen.

Conclusie: Dit interdisciplinaire project wil enerzijds tot een conceptbepaling van levensmoeheid komen via de ervaringen van ouderen en hun zorgverleners en anderzijds deze beleving historisch kaderen in de westerse welvaartmaatschappij.

PSY 6

ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach

Topic	psychosocial
Presentation	Poster
First author	Hannah Thys KU Leuven hannah.thys@kuleuven.be junior
Other authors	Stefanie Meul KU Leuven
	Elisa Van Wiele KU Leuven
	Veerle Foulon KU Leuven
	Jessie Dezutter KU Leuven
	Kaat Wils KU Leuven
	Tinne Claes KU Leuven
	Bernadette Dierckx de Casterlé KU Leuven
Abstract title	ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach

ClarEToL: Clarifying the complex and multilayered experience of tiredness of life by a multi-informant interdisciplinary approach

Abstract body

Doel: To clarify the experience of tiredness of life in nursing home residents.

Methodologie: A grounded theory approach was used. Data was collected in five different nursing homes using face-to-face semi-structured, in-depth interviews. Nursing home residents (NHR's) were recruited by purposive and theoretical sampling, after preliminary conversations and observations, imbuing this study with an ethnographic dimension. Data was analyzed using the QUAGOL method.

Resultaten: Preliminary results suggest tentatively that a feeling of meaninglessness seems to be central in the experience of tiredness of life (tol). Suffering and experiences of loss seemingly play a role in the experience of tol as well, as the feeling of losing one's own identity and self-worth, loss of connection with the outside world and a lack of future perspective. In addition, the transition to, and life within a nursing home seem to serve as potential reinforcing factors for this experience. However, further data-analysis is required to provide more clarity on what particular roles each of the mentioned elements play, and how exactly they are interconnected.

Conclusie: Our initial findings suggest that the experience of tol among NHR's is a multilayered and complex experience, still surrounded by uncertainty. Given this lack of clarity and the amount of distress experienced by residents suffering from tiredness of life, further research seems crucial to deepen our understanding of the phenomenon in order to be able to provide adequate advice for nursing homes in the care for these residents.

PSY 7

Assessment of suicidality in community-dwelling older adults – a systematic review

Topic

psychosocial

Presentation

Poster

First author

Beau Nieuwenhuijs
Vrije Universiteit Brussel
beau.michele.nieuwenhuijs@vub.be
junior

Other authors

Nico De Witte
Vrije Universiteit Brussel

Ellen Gorus
Vrije Universiteit Brussel

Assessment of suicidality in community-dwelling older adults – a systematic review

Abstract title Assessment of suicidality in community-dwelling older adults – a systematic review

Abstract body

Purpose: Older adults have high rates of suicide. If older adults with suicidal ideation and behaviour could be identified early, deaths by suicide could be prevented. To date, there is no golden standard for assessment instruments specifically tested with community-dwelling older adults. Therefore, a systematic review was conducted to provide an overview of assessment methods for suicidal ideation and behaviour for this population, and to review their quality, effectiveness and practical utility.

Methods: PubMed, Web of Science, PsychInfo and Sociological Abstracts were searched in until summer 2023. Studies were included if they assessed: instruments to detect suicidal ideation and behaviour, tested with community-dwelling older adults, and evaluated psychometric properties, effectiveness, or practical utility of the instrument. Risk of bias was evaluated with the JBI checklist for diagnostic accuracy studies. Results were synthesised narratively.

Results: 14 studies were included, their methodological quality and risk of bias was overall acceptable. A total of 16 different assessment instruments were discussed, falling into three categories: assessment of suicidal ideation and behaviour directly; assessment of depression; assessment of known risk factors to suicide. Psychometric properties and effectiveness were generally good. However, significant variety in the use of reference standards prohibited conclusive comparative statements. Most instruments were intended for use in primary care settings.

Conclusions: while instruments of acceptable psychometric and practical standards exist to detect suicidality in community-dwelling older adults, more research is required to test and adopt them outside of a research environment.

PSY 8

A wish to die in community-dwelling, older adults – prevalence and key risk factors

Topic	psychosocial
Presentation	Poster
First author	Beau Nieuwenhuijs Vrije Universiteit Brussel beau.michele.nieuwenhuijs@vub.be junior
Other authors	Ellen Gorus Vrije Universiteit Brussel

A wish to die in community-dwelling, older adults – prevalence and key risk factors

Gwendolyn Portzky
Universiteit Gent

Nico De Witte
Vrije Universiteit Brussel

Abstract title A wish to die in community-dwelling, older adults – prevalence and key risk factors

Abstract body

Purpose: Older adults have the highest suicide rates of all age groups. The objective of this study is to identify risk and protective factors to a wish to die in older adults in Flanders.

Methods: Data for this study comes from the Belgian Ageing Studies (BAS) (total N=82580), a cross-sectional project that monitors the needs and quality of life of community-dwelling older adults across Flemish municipalities. Items on suicidality were added in 2016, giving this research a representative sample of (N=3050). This study focuses on older adults reporting a current wish to die. Examples of other measures are: depression, loneliness, physical frailty and ageism. Descriptive statistics determine the prevalence and the spread of risk and protective factors. Logistic regression identifies risk and protective factors.

Results: 4.8% (N=148) of the sample reported having a current wish to die. Of these, a majority also reported a history of suicidal ideation and/or suicide attempts. Descriptive statistics showed people with a wish to die were more often female and older (80+), as well as widowed or divorced. Significant risk factors were a history of suicidal ideation or behaviour, depression, subjective cognitive complaints, requiring support on multiple domains and elder abuse.

Conclusions: results confirm existing literature on risk factors, but add new knowledge on the influence of subjective cognitive complaints and the experience of elder abuse as risk factors. Furthermore, results provide evidence for importance of dependency on others for support as a significant risk factor. No modifiable protective factors were found, highlighting a clear direction for future research.

FUNC 6

Assessment tools and incidence of hospital-associated disability in older adults: a rapid systematic review

Topic functional

Presentation Poster

First author Katia Giacomino
Department of Physiotherapy, Human Physiology and Anatomy,
Faculty of Physical Education and Physiotherapy, Rehabilitation

Assessment tools and incidence of hospital-associated disability in older adults: a rapid systematic review

Research (RERE) Research Group, Vrije Universiteit Brussel, Brussels, Belgium School of Health Sciences, HES-SO Valais-Wallis, Leukerbad, Valais-Wallis, Switzerland
katia.giacomino@vub.be
junior

Other authors

Roger Hilfiker
School of Health Sciences, HES-SO Valais-Wallis, Leukerbad, Valais-Wallis, Switzerland

David Beckwée
Department of Physiotherapy, Human Physiology and Anatomy, Faculty of Physical Education and Physiotherapy, Rehabilitation Research (RERE) Research Group, Vrije Universiteit Brussel, Brussels, Belgium

Jan Taeymans
Division of Physiotherapy, Department of Health Professions, University of Applied Sciences Bern, Bern, Switzerland Faculty of Physical Education and Physiotherapy, Vrije Universiteit Brussel, Brussels, Belgium

Karl Martin Sattelmayer
School of Health Sciences, HES-SO Valais-Wallis, Leukerbad, Valais-Wallis, Switzerland

Abstract title

Assessment tools and incidence of hospital-associated disability in older adults: a rapid systematic review

Abstract body

Background
During hospitalization older adults have a high risk of developing hospital-associated disability (HAD). This systematic review aimed to assess the incidence of HAD in older adults admitted to acute care with two outcomes: firstly in at least one activity of daily living (ADL) from a set of functional tasks (e.g., Katz Index) and secondly the incidence of functional decline in an individual functional task, and to identify any tools or functional tasks used to assess ADL in hospitalized older patients.

Methods
A literature search was performed in three databases. Inclusion criteria: older adults (≥ 65 years), assessment of individual items of ADL at baseline and discharge. Exclusion criterion: studies investigating a specific condition that could affect functional decline and studies that primarily examined a population with cognitive impairment.

Results
Ten studies were included. Incidence of HAD (overall score) was 37% (95% CI 0.30–0.43). One study provided sufficient data to calculate the incidence of individual items, with the following values: 32% for bathing, 27% for dressing, 27% for toileting, 30% for eating and 27% for transferring. The review identified four assessment tools, two sets of tasks, and individual items assessing ADL in such patients.

Conclusions
Incidence of HAD in older patients might be overestimated, due

Assessment tools and incidence of hospital-associated disability in older adults: a rapid systematic review

to the combination of disease-related disability and HAD. The tools used to assess these patients presented some limitations. These results should be interpreted with caution as only one study reported adequate information to assess the HAD incidence. This review highlights the lack of systematic reporting of data used to calculate HAD incidence.

FUNC 7

Estimating premorbid functioning: Does the Questionnaire of Intellectual Status fill the gap?

Topic	functional
Presentation	Poster
First author	Jean-Philippe van Dijck Thomas More jean-philippe.vandijck@thomasmore.be senior
Other authors	Noortje Hermans Thomas More
Abstract title	Estimating premorbid functioning: Does the Questionnaire of Intellectual Status fill the gap?
Abstract body	<p>INTRODUCTION</p> <p>For optimal neuropsychological rehabilitation planning, understanding a patient's premorbid functioning is crucial. In Flanders, there is currently no contemporary tool to estimate premorbid functioning (Hermans & van Dijck, 2022). Typically, this involves collecting key demographic information such as education level and job history. Our study aimed to modernize, condense, and validate the "Questionnaire Intellectual Status" (Mas, 1979), which systematically assesses various aspects of a patient's personal, educational, and professional history to gauge premorbid functioning.</p> <p>METHODS</p> <p>After a rigorous qualitative review and data-driven selection process, the initial 105-item questionnaire was condensed to 16 items (QIS-R) with a new scoring system. To assess its validity, two independent samples of participants aged 40-65 (48 and 58 participants) completed both QIS-R and WAIS-IV. Forty participants (ages 40-65) retook the QIS-R after 3 months to evaluate test-retest reliability. All participants were free from neurological/psychiatric issues and medication influence during testing.</p> <p>RESULTS</p> <p>Participant responses were scored, generating QIS-IQ estimates. Strong correlations were observed between these estimates and WAIS-IV full scale IQ in both samples</p>

Estimating premorbid functioning: Does the Questionnaire of Intellectual Status fill the gap?

($r(58)=.74, p<.001$; $r(48)=.71, p<.001$). Additionally, high test-retest reliability ($r=.94, N=40$) confirmed response consistency.

DISCUSSION

The robust correlation between WAIS full-scale IQ and high test-retest stability supports the psychometric adequacy of the QIS-R. Further studies are required to assess its clinical utility, but our current research represents an encouraging initial stride towards a dependable tool for estimating the premorbid functioning of neurological patients. Currently norms are being made and we are examining the feasibility of having a partner or sibling complete the QIS-R for the patient while maintaining psychometric integrity.

PSY 8

The Role of Maladaptive Personality in Behavioural and Psychological Symptoms in Dementia

Topic psychosocial

Presentation Poster

First author Kato Dero
Vrije Universiteit Brussel
katodero@icloud.com
junior

Other authors Sebastiaan P.J. van Alphen
Mondriaan, Heerlen

Esther Hoogenhout
GGzE Nestor, Eindhoven

Gina Rossi
Vrije Universiteit Brussel

Abstract title The Role of Maladaptive Personality in Behavioural and Psychological Symptoms in Dementia

Abstract body Purpose: Although research demonstrated a significant link between adaptive premorbid personality traits and the severity of behavioural and psychological symptoms in dementia (BPSD) and associated emotional burden of the caregiver, little is known about the relationship of BPSD symptoms and associated burden with maladaptive traits.

Methods: Informants ($N = 182$) of Dutch nursing home residents with dementia aged 65+, completed the Neuropsychiatric Inventory Questionnaire (NPI) to assess the severity of BPSD and associated emotional burden. Premorbid maladaptive personality traits were evaluated using informant versions of a brief version of the Personality Inventory for DSM-5 (PID-5-BF),

The Role of Maladaptive Personality in Behavioural and Psychological Symptoms in Dementia

and two age-specific personality measures, the Informant Personality Questionnaire (HAP), and Gerontological Personality disorder Scale (GPS). Relationships between premorbid personality and BPSD were investigated with correlational and multiple regression analyses.

Results: BPSD severity and burden were associated with medium sized correlations to Negative Affectivity, Antagonism and indications of personality disorder presence. The emotional burden also correlated with a medium effect with Detachment. All measures of maladaptive personality predicted BPSD severity and burden.

Conclusions: Results found with age-specific personality measures were in line with results found with other measures of (mal)adaptive traits. Several maladaptive personality traits had a significant relationship with the BPSD severity and associated emotional burden. We therefore encourage to implement personality assessment within BPSD treatment strategies. This way care becomes more person-focused and more tailored to the specific needs of patients and caregivers.