studies were single drug interventions; most used a scale score cut-off to define agitation. Important characteristics, secular trends in design, and quality of the BPSD studies will be detailed.

**Conclusions:** The important trends in methods for interventions and assessment of BPSD are not necessarily toward quality. Eligibility criteria have become designed for convenience, are misspecified relying on the same scales used for outcomes, although randomization is the rule, allocation concealment and treatment blinding is poor. There is marked autoregression of outcomes. Studies have become larger and designed to detect small effects even when clinical meaning is uncertain. BPSD studies need reconsideration and a few simple fixes to better discover effective treatments. Only a little care is needed to improve the quality and reliability of studies. This includes study management that is independent of patient selection and outcomes and from most procedures, and truly blinded assessments.

## P168: Resilience and cortical thickness in the medial orbitofrontal cortex in Japanese older cancer survivors: A population-based cross-sectional study

## P173: Structural Changes in the Hippocampal Subfields in Early-Onset Mild Cognitive Impairment

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**Objective:** The aim of this study was to examine the structural change in the hippocampal subfields in early-onset (EO) mild cognitive impairment (MCI) patients associated with the APOE ε4 carrier state.

**Methods:** This study had 50 subjects aged 55-63 years, all of whom were diagnosed with amnestic MCI at baseline via the Korean version of the Consortium to Establish a Registry for Alzheimer's Disease Assessment Packet (CERAD-K). The EO-MCI patients were divided into the MCI continued (MCIcont) and Alzheimer's disease (AD) converted (ADconv) groups 2 years later. The volumes of hippocampal subfields were measured for all the subjects. The calculations were based on the change of the volumes between the 2-year-interval brain Magnetic resonance image (MRI) scans between MCIcont and ADconv groups according to the Apolipoprotein ε4 (APOE ε4) carrier state.

**Results:** There was a significant correlation between APOE ε4 allele and structural changes in several hippocampal subfields. The volume reduction in cornus ammonis 1 (CA1) field and subiculum, especially in the APOE ε4 carriers. The significance was more prominent in ADconv group.

**Conclusion:** These results suggest that the possession of APOE ε4 allele may lead to significantly greater predilection for the structural changes in hippocampal subfields, showing significant changes, especially in the ADconv patients compared with MCIcont patients.

KEY WORDS: Early-onset · Mild cognitive impairment · Hippocampus · APOE ε4 · Atrophy.



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