

## YOD Symposium Part 2

**Objectives:** LuBAIR™ Paradigm, a novel approach to ascribing meaning for behavioral expression in advanced neurocognitive disorder, was used to identify behavioral categories that are likely to respond to the use of atypical antipsychotics in their management.

**Design:** *A retrospective study.*

**Setting:** St. Peter's Hospital (SPH), Hamilton, Ontario, Canada.

**Participants:** *Forty patients qualified for the study.*

**Intervention:** LuBAIR™ Inventory populated on all recruited patients on two separate occasions. The first time was within two weeks of admission and the second time was after sixty days, if they *successfully de-prescribed* off the AAP, or sooner, if they *failed de-prescribing*.

**Measurements:** Chi-Square paired t-test and Cohen d Statistical tests were used to detect the difference in the behavioral categories between the two cohorts.

**Results:** Seventeen patients *were successfully de-prescribed*, and twenty-three *failed de-prescribing*. Results on the LuBAIR™ Inventory, filled on the second occasion, in the *successful de-prescribed* and the *failed de-prescribed* groups compared using the Chi-Square Statistical test to detect the difference in the behavioral categories the two cohorts. Patients who did not have *Mis-Identification Expressions (MiE)* and *Goal-Directed Expressions (GDE)*, amongst the cluster of behavioral categories in their clinical presentation, were more likely to *successfully de-prescribe of AAP*:  $\chi^2(1, N = 40) = 29.119, p < .0001$  and  $\chi^2(1, N = 40) = 32.374, p < .0001$ , respectively. Alternatively, the same behavioral categories were more likely to be present in patients who failed de-prescribing: paired t-test and Cohen-d ( $P < 0.0001$ ).

**Conclusion:** The MIE and GDE were statistically significant, suggesting that these behaviors were more present in patients who *failed de-prescribing*. Atypical antipsychotics, in their role as an antipsychotic and mood stabilizer, may be

### Euthanasia on their mind: a qualitative analysis of spontaneous expressions of people with young-onset dementia and their family caregivers.

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**Introduction:** Previous research showed that people with young-onset dementia and their family caregivers spontaneously addressed the topic of euthanasia when talking about the broader topic of advance care planning. A better understanding of what people address and why may provide innovative insights to inform the evolving physician assisted dying legislation worldwide. This study aimed to identify what people with young-onset dementia and their family caregivers spontaneously expressed regarding (communication about) euthanasia when discussing the topic of advance care planning.

**Methods:** A secondary qualitative analysis was conducted, through the method of constant comparative analysis on semi-structured interviews. We included 10 people with young-onset dementia and 25 family caregivers in Flanders, Belgium.