

**Methods:** A survey was developed using a range of both closed- and open-ended questions. It explored respondents' experiences guided by the aims of the Dementia Action Plan for Wales around diagnosis and post-diagnostic support. The survey was shared online, open to anyone living with, or caring for someone living with dementia in Wales.

**Results:** 71 respondents completed the survey (people with dementia, n=10; carers/family members, n=61), living in rural/semi-rural (n=37) and in urban/suburban (n=34) areas, and experiences from people affected by both rare (n=17) and typical (n=49) dementias are reported (plus n=5 with no specific diagnosis). The results identified several challenges in the provision of support, indicating that there is some way to go before realising the ambition of Wales becoming a dementia-friendly nation. There are, however, examples of satisfaction with services and testimonials of good practice.

**Conclusion:** The results of this work highlight areas to target within the Dementia Action Plan for Wales to improve support, and more broadly provide recommendations for improving policy and practice, based on the experiences and wishes of people with lived experience.

## **P85: Risks of suicide among family members of suicide victims: A nationwide sample of South Korea**

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**Objective:** Identifying the risks of completed suicide in suicide survivors is essential for policies supporting family members of suicide victims. We aimed to determine the suicide risk of suicide survivors and identify the number of suicides per 100,000 population of suicide survivors, bereaved families of traffic accident victims, and bereaved families with non-suicide deaths.

**Methods:** This was a nationwide population-based cohort study in South Korea. The data were taken from the Korean National Health Insurance and Korea National Statistical Office between January 2008 and December 2017. The relationship between the decedent and the bereaved family was identified using the family database of the National Health Insurance Data. Age and gender were randomly matched 1:1 among 133,386 suicide deaths and non-suicide deaths. A proportional hazard model regression analysis was conducted after confirming the cumulative hazard using Kaplan-Meier curves to obtain the hazard ratio (HR) of completed suicide in suicide survivors.

**Results:** Using 423,331 bereaved families of suicide victims and 420,978 bereaved families of non-suicide deaths as the control group, HR of completed suicide in suicidal survivors was found to be 2.755 [95% confidence limit (CL): 2.550-2.977]. HR for wives committing suicide after husbands' suicide was 5.096 (95% CL: 3.982-6.522), which was the highest HR among all relationships with suicide decedents. The average duration from suicide death to suicide of family members was 25.4 months. Among suicide survivors, the number of suicides per 100,000 people was 586, thrice that of people in bereaved families of traffic accident victims and in bereaved families of non-suicide deaths.

**Conclusion:** The risk of completed suicide was three times higher in suicide survivors than in bereaved families with non-suicide deaths, and it was highest in wives of suicide decedents. Thus, socio-environmental interventions for suicidal survivors must be expanded.

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## **P91: Symptoms of Anxiety and Depression after stroke – a follow up study in outpatients followed in a rehabilitation recovery unit**

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**Background:** Depression and anxiety persist in a large number of patients after stroke. Anxiety affects around one third of patients during the first year. Nowadays, this phenomenon receives significantly less attention compared to other psychological problems, and poor psychological services after the onset of the disease were reported in previous studies. Some patients have access to specialized rehabilitation units (“Integrated Continuing Care Unit, UCCI”) that can ameliorate anxiety and significantly improve health-related quality-of-life (QoL), avoiding depression and improve patients' functional disability.