Aims. There is a well-established association between sleep disturbance and cognitive decline. Poor sleep can have a significant effect on patient and carer wellbeing and is a potentially modifiable risk factor for dementia. Sleep medications are problematic in cognitive impairment due to the increased risk of adverse events such as falls and confusion. There is good evidence for Cognitive Behavioural Therapy for Insomnia (CBTI) in older adults but its effectiveness in cognitive impairment is unclear. In 2021, only one RCT on CBTI in cognitive impairment was identified (Cassidy-Eagle et al. 2018). This review seeks to establish if there is any new evidence.

Methods. Ovid Medline (1946 to present) and clinicaltrials.gov were searched for all interventional trials testing CBTI including RCTs, single-arm studies and protocols, written in English. Inclusion criteria:

1. Adults with a diagnosis of MCI or Alzheimer's dementia;
2. Sleep as a primary outcome, using a validated outcome measure. Systematic reviews were tracked for references.

Results. 172 citations were screened by the first author and 26 underwent full text review. Eight papers were eligible for inclusion. Four of these studied MCI, three looked at people living with dementia (PLWD) and caregivers as a dyad and one combined MCI and Alzheimer's (protocol only).

The search found two pilot RCTs and two protocols for MCI. Cassidy-Eagle et al. (2018) found a highly significant positive effect on four of five sleep outcome measures with large effect sizes. The Insomnia Severity Index (ISI) decreased from 15.29 to 3.25 ($p < 0.001$; Cohen's d -4.22). Mattos et al. (2021) also found significant improvements on all sleep outcome measures; ISI decreased from 13.5 to 8.3 ($p < 0.01$).

Three papers study joint CBTI for PLWD and their care partners (one pilot RCT and two protocols). Song et al. (2024) reported improvements in sleep parameters for both participants in the dyad but were not statistically significant. They are recruiting for a larger trial.

Conclusion. This review identified 7 new RCTs in progress. In MCI, new data continue to show a significant association between CBTI and improved sleep. Published data for people with dementia have not found a significant relationship, although the data set remains very limited. It is not yet possible to synthesise the results and future systematic reviews are needed. If effective, CBTI could offer a lower risk alternative to medications in managing sleep disturbance in people with cognitive impairment.

Socioeconomic and Psychosocial Stressors Contributing to General Adult Community Mental Health Recovery Service Referrals in Epsom, Surrey, a Retrospective Case Note Analysis

Dr Christine Fullerton[1]* and Dr Afaf Qazi[2]

[1]Surrey & Sussex Healthcare NHS Trust, Redhill, United Kingdom and [2]Surrey & Borders Partnership NHS Foundation Trust, Epsom, United Kingdom
*Presenting author.

Aims. Referrals to secondary mental health services in the United Kingdom are at record levels. In the wake of the coronavirus pandemic and cost of living crisis, many experienced a deterioration in their social and financial circumstances. It is widely accepted that social determinants impact mental health and wellbeing. This analysis aimed to investigate socioeconomic and psychosocial stressors contributing to referrals to the Community Mental Health Recovery Service (CMHRS) for the general adult population in Epsom, Surrey.

Methods. This retrospective case note analysis focused on Single Point of Access (SPA) referrals made to CMHRS Epsom between 1st September 2022 and 1st September 2023. A random number generator was used to select a cross-section of 30 cases from 141 referrals. Following exclusion criteria, 29 cases were examined using an ICD–10 social determinants of health (Z55-Z65) lens. Finally, thematic analysis was used to identify key socioeconomic and psychosocial factors impacting referred patients.

Results. Patients were most commonly referred to CMHRS for presentations of suicidal ideation and self-harm (n = 13). Referrals were also related to symptoms of depression, anxiety and psychosis, the need for diagnostic clarity and for review of medication. All but one referral (n = 28) cited psychosocial stressors contributing to the patient's presentation. Five key themes were identified. These were: current unemployment (n = 18), current housing and financial concerns (n = 18), ongoing social isolation (n = 19), relationship conflict and breakdown (n = 10) and a background of child sexual and physical abuse (n = 10). Protective factors, for those able to identify them, were exclusively linked to the patient's social network (n = 22). Patients cited family members, friends, neighbours, the church and their pets as reasons to stay alive and accept support.

Conclusion. This analysis concluded that referrals to secondary mental health services in Epsom are significantly associated with a person's current and historical social circumstances. Policies and services which provide early intervention support with housing, employment and finances are vital in reducing the mental distress of at-risk individuals while also reducing pressure on mental health services. Reinforcing community and social support systems may be key in helping patients buffer psychosocial stress. Further study on this issue, involving a larger cohort, would be beneficial.

Risk Factors in the Development of Very Late-Onset Schizophrenia-Like Psychosis: A Scoping Review

Ms Isabelle Gallier-Birt[1]*, Dr David White[2] and Ms Kaldora Ibekwe[1]

[1]University of Warwick, Coventry, United Kingdom and [2]Coventry and Warwickshire Partnership Trust, Coventry, United Kingdom
*Presenting author.

Aims. Very Late-Onset Schizophrenia-Like Psychosis (VLOSLP) is a condition resembling schizophrenia, which has a first onset in individuals at age 60 or later. Understanding the risk factors associated with the development of this condition is crucial, given the increasing ageing population and the elevated mortality rate in VLOSLP patients compared with the general population. This scoping review aims to explore and map the risk factors associated with VLOSLP development and begin to identify potential mechanisms linking these factors through