

P58: Interventions to Reduce Ageism. Systematic Review

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Objective: The purpose of this article is to review all the interventions that researchers have used to reduce ageist attitudes in the population.

Methods: We performed a literature search using PubMed database including the following MeSH terms: ("Ageism"[Mesh] OR "ageism"[tiab] OR "Age discrimination"[tiab]) AND (intervention* [tiab] OR therapy * [tiab] OR training* [tiab] OR prevention* [tiab]). 257 studies were found and only 18 were selected based on their language (only Spanish and English ones were included) and according our inclusion criteria.

Result: To date, most widely strategies used in previous studies included: Intergenerational contact, education or both. Other techniques such as performing arts (theater and cinema), museums exhibitions and the simulation of activities for the elderly have been also studied with successful results. Likewise, two of the articles mentioned mindfulness and cognitive behavioral therapy as a preventive ageism strategy have not been demonstrated yet.

Conclusion: Different interventions have been tried to reduce ageist attitudes. The greatest benefits have been seen with the combination of intergenerational contact and population education. Ageism is an important problem that concerns today's society; further studies focused on strategies to reduce ageist attitudes in the general population are needed.

P62: Agitation in Alzheimer's Disease (AAD): A Decision Tree for Healthcare Providers

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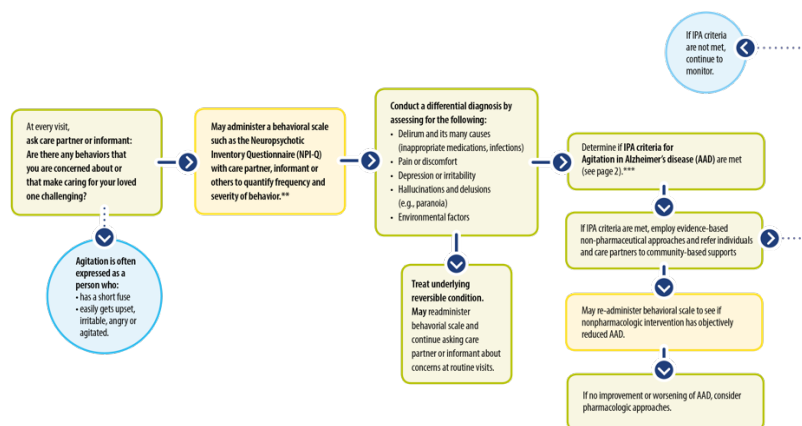
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- The prevalence of agitation in Alzheimer's Disease (AAD) approaches 80%. Patients with AAD have more severe behavioral, depressive, and frontal lobe symptoms and are at increased risk for hospitalization and nursing home placement.
- Early agitation is a robust predictor of accelerated progression and mortality and is distressing and dangerous for patients and care partners.
- This presentation was recently developed by the Gerontologic Society of America (GSA) which convened an expert AD Working Group to develop a "Decision Tree" for healthcare providers relative to the assessment of AAD and the employment of Non-Pharmacologic and Pharmacologic treatment options



P69: The effect of social prescribing on improving cognitive performance among community-dwelling older adults: A pilot study

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Objective: The study aimed to examine the effect of social prescribing on improving cognitive performance among community-dwelling older adults, and to explore the potential association between social support and the change of cognitive performance.

Method: One hundred and eighteen older adults from Changtang community participated in the study and were followed up for three months. Cognitive function was assessed with Hong Kong Brief Cognitive test (HKBC) at baseline and 3-month follow-up. Pre- and post-social prescribing difference in cognitive performance was examined with paired t-test. Multivariate regression analysis was used to explore the potential factors of social support associated with the change of cognitive function.

Results: Compared with baseline measurement (25.4±4.1), the total score of HKBC improved significantly after three-month social prescribing (26.5±3.6; $t=-3.300$, $P=0.001$). Multivariate regression analysis showed that baseline level of social support utilization was associated with the change of cognitive performance. The lower the utilization of social support at baseline, the more the change of cognitive performance due to social prescribing ($\beta=-0.25$, 95%CI = -0.88 ~ -0.05).

Conclusion: Social prescribing may have a beneficial effect on cognitive function for community older adults. The utilization of social support may be one of the factors associated with its effect on cognitive performance.

P78: Complicated grief in the shadow of the COVID-19 pandemic among adults and the elderly

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