

significantly in people with moderate dementia, so did not result in better outcomes in the group overall. A different type of rehabilitation model or strategies may be required as dementia becomes more severe.

FC19: Remaining engaged through work in young onset dementia: first results of the WorkDEM study

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Background: Focus on the capacity and potential of persons with dementia is needed to enable people and their families to adapt to the changes dementia brings in their lives. For those with young onset dementia (YOD), support to remain in work for as long as possible can preserve one's self-esteem and sense of purpose in life. However, guidance on how to support people with YOD at their workplace is lacking. This study therefore aims to explore experiences, work values, and support needs of people with YOD in the workplace and other stakeholders involved.

Methods: In this qualitative study, semi-structured interviews were held with several target groups namely employees with an established dementia diagnosis, relatives of employees with YOD, employers and co-workers, occupational physicians, human resource professionals, and healthcare professionals involved in dementia care. A topic guide was developed, based on recent literature and consultation of experts, and addressed the following themes: experiences regarding the influence of dementia in the workplace, values such as the importance of work, and support needs in the workplace. Themes were explored in the period before and after diagnosis. The interview data were transcribed and analyzed by means of an inductive content analysis.

Results: In total 33 semi-structured interviews were conducted. Eight themes were derived from the interviews in people with YOD, namely 1) difficulties experienced at work, 2) long diagnostic trajectory and involvement of work-and care professionals, 3) Impact of YOD and coping with YOD, 4) Wish to work, 5) Diagnostic disclosure, 6) The role of the work environment, 7) Phasing out work and future perspectives, and 8) Perception and awareness of YOD. Data of the other target groups is currently being analysed. These results are expected in spring 2023.

Conclusion: This study will result into a better understanding of the possibilities of working with YOD. These insights can be used as a starting point to develop practical tools to support and provide guidance to people with YOD and their (work)environment to prevent loss of work or find meaningful alternatives.

FC20: Prevalence, Incidence, and Clinical Features of Lewy Body Dementia in the South Eastern of Spain

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Conclusion: The I-HARP model enhanced functional independence of people with mild dementia only but not

Background: Lewy body dementia (LBD) is the second most common degenerative dementia in people over 65 (1,2). LBD is underdiagnosed, with only one third of patients correctly diagnosed in daily clinical practice (3); data on the distribution of the disease are scarce. Our study was designed to measure the incidence, prevalence and clinical characteristics of LBD in south-eastern Spain. Healthcare system in Spain is free and universal.

Methods: Prospective epidemiological study of LBD in San Vicente del Raspeig between October 18, 2021, and October 17, 2022. The total population aged 60 or over based on the 2019 census was 11445 inhabitants (5227 males, 6218 females). Diagnosis of LBD was based on 2017 McKeith criteria. Only “probable” cases were registered for greater diagnostic certainty. Incidence was studied for the one-year period. Collected data included gender, age, cardinal symptoms for LBD, abnormal biomarkers, neuropsychiatric symptoms, medical treatment, years from diagnosis and GDS score (Reisberg) in the last visit. Protocol was approved by the ethical committee.

Results: Global prevalence was 0.67% among the population over 60. Annual incidence was 3.2/1000 person-year.

Mean age of prevalent cases was 78 years (SD 7.5). 68.8% were studied with at least one biomarker (mainly 123I-ioflupane and less frequent polysomnography or MIBG gammagraphy); most suffered 2 or 3 core symptoms (79.2%) (in descending order: parkinsonism, visual hallucinations, rapid eye movement sleep behavior disorder and fluctuations). Two out of five prevalent cases were in an early phase of the disease: 22.1% in mild cognitive impairment (MCI) and 16.9 % in mild dementia. Mean me of disease was 1.9 years (SD 2.2). Other neuropsychiatric symptoms appeared in up to 74% of patients (apathy 18,2%, anxiety 19,5%, depression 23,4%, minor hallucinations 22%, delusions 17%, auditory and tactile hallucinations 1,2%).

Conclusions: Prevalence is in line with previous reports. Higher incidence than previously reported may be due to high attention on MCI-LBD and our expertise as a referral Memory Unit. We found a wide dominance of aged women and high prevalence of neuropsychiatric symptoms.

References: 1. Vann Jones SA, O'Brien JT. The prevalence and incidence of dementia with Lewy bodies: a systematic review of population and clinical studies. *Psychol Med.* 2014;44(4):673-83. 2.Zaccai J, McCracken C, Brayne C. A systematic review of prevalence and incidence studies of dementia with Lewy bodies. *Age Ageing.* 2005;34(6):561-6. 3.Savica R, Boeve BF, Logroscino G. Epidemiology of alpha-synucleinopathies: from Parkinson disease to dementia with Lewy bodies. *Handb Clin Neurol.* 2016;138:153-8

FC21: Loose functional connectivity within the striatum in behavioral variant frontotemporal dementia

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