

Methods: A scoping review was undertaken in line with Arksey and O'Malley's framework in PUBMED, Web of Science, CINAHL, and Scopus in October 2023. Primary studies in English, Spanish, or Portuguese published in peer-reviewed journals were eligible.

Results: Of the 1,976 retrieved documents, 16 were included. Considering all studies and AE together, people with dementia had between 2.8 to 5.2 times higher risk of having an AE compared to people without dementia. In non-surgical settings, the most frequently reported AE were falls, delirium, and infections, while in surgical settings, these included postoperative delirium, infections, and other complications. Longer hospital stay, increased healthcare costs, higher risk of discharge to residential care (vs. home), and increased mortality were significantly more frequent in people with dementia. The link between the AE and negative outcomes was explored in three studies: longer hospital stay was linked to having endured a fall, delirium, or pneumonia as AE; higher risk of 90-day readmission was linked to having had delirium, and higher mortality was found in those with a hip fracture due to an in-hospital fall.

Conclusions: AE are more common in people with dementia compared to other hospitalised groups and may be largely responsible for the negative outcomes found in this population. However, current evidence is limited and does not allow for this relationship to be confidently established. Future research should further explore such associations with the goal to improve care and safety for people with dementia in hospital settings.

P10: Changes in sexual activity and sexual satisfaction: views of people with dementia and their spouse-carers

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Introduction: The progression of dementia may be followed by decreased sexual activity for People with Alzheimer's Disease (PwAD) and their spouse-carers. The aim of this study was to investigate the perception of change in sexual activity and sexual satisfaction among couples whose spouses were diagnosed with Alzheimer's Disease (AD).

Methods: Using a cross-sectional design, we compared 74 dyads of people with Alzheimer's disease (PwAD) and their spouse-carers, and 21 elderly dyads control. We assessed sexual satisfaction with Questionnaire on Sexual Experience and Satisfaction (QSES), cognition using a Mini-Mental State Examination (MMSE), disease severity using a Clinical Dementia Rating scale (CDR), awareness of disease with Assessment Scale of Psychosocial Impact of the Diagnosis of Dementia (ASPIDD), functionality with Pfeffer Functional Activities Questionnaire (FAQ), depressive symptoms with Cornell Scale for Depression in Dementia (CSDD), quality of life using a Quality of Life in Alzheimer's Disease Scale (QoL-AD), and burden using a Zarit Burden Interview (ZBI). Univariate and multivariate regression analyses were conducted to identify the factors that influenced couples' sexual satisfaction.

Results: We found a significant difference between the perception and no perception of change in sexual activity of PwAD ($p < 0.001$), spouse-carers ($p < 0.01$), and controls ($p < 0.05$). Moderate to severe sexual dissatisfaction was observed in 36.5% of PwAD, 65% of spouse-carers, and 31% of controls. The linear regression indicated that PwAD sexual satisfaction was related to cognitive impairment ($p < 0.05$). Spouse-caregivers sexual satisfaction was related to gender of spouse-caregivers ($p < 0.05$) and the presence of sexual activity ($p < 0.001$).

Conclusions: The perception of change and consequent interruption of sexual activity, with higher sexual dissatisfaction, were higher in PwAD and their spouse-carers, in comparison with control group. We also found

that spouse-carers experienced lower levels of sexual satisfaction than PwAD and healthy elderly couples. Moreover, PwAD sexual satisfaction was related to the level of cognitive impairment and spouse-carers' sexual satisfaction was related to gender and the presence of sexual activity.

P11: Empowering Caregivers and Older Adults through Educational Initiatives, Cognitive Stimulation Therapy (CST) and Eight Movement Patterns of Brain Dance

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Background and Aims: The growth of the elderly population poses challenges and opportunities in society. As we age, normal changes occur that can affect functionality and independence. Aging is associated with brain changes that result in cognitive decline. The most common cause of cognitive decline among the elderly is Alzheimer's disease (AD). It is characterized by a progressive spectrum of memory problems that affect the functional capacity of the elderly and their ability to perform activities of daily living, increasing the level of dependence and the social, emotional, and economic burden on caregivers. Alzheimer's disease is the 6th leading cause of death in the United States and the 4th leading cause of death in Puerto Rico. These challenges can only be addressed through clinical research for managing conditions, non-pharmacological treatments and therapies, and educational initiatives covering basic aspects of geriatrics aimed at healthcare professionals, direct service providers, and caregivers. These efforts will provide effective management alternatives when intervening with the elderly population and the public. The aims are: to discuss the educational initiative with Dominican caregivers, to review advances in Alzheimer's disease research, to present the translation and cultural validation of Cognitive Stimulation Therapy as a non-pharmacological intervention for patients in the early stages of MCI and Alzheimer's, and to raise awareness about the importance of physical literacy through the eight (8) Movement Patterns of Brain Dance for older adults.

P12: Promoting the Health of Older Adults through the BrainDance at the Multiple Activities Center for the Elderly (CAMPEA) in Santa Mónica, Bayamón (March-May 2023)

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Background and Aim: Puerto Rico is experiencing a rapidly aging society. In old age, it is common to experience one or more chronic diseases that require special attention. If not properly addressed, these health conditions can reduce functionality in daily activities. Some risk factors that can affect health and functionality include sedentary lifestyle, social isolation, and unhealthy lifestyles. To reduce these risk factors, it is necessary to implement health promotion measures aimed at improving the well-being of older adults. Brain Dance has a positive impact on the health of older adults. Its benefits include increasing circulation, reorganizing the neurological system, reducing stress, maintaining joint flexibility, and being aware of the communication between body and mind. The aim was to promote the health of older adults through the 8 Movement Patterns of Brain Dance at CAMPEA, Santa Monica, Bayamón, during the months of March to May 2023.

Methods: A collaboration agreement was established between the Geriatric Research and Education Center and CAMPEA to train older adults and service providers on the benefits of Brain Dance, and educational materials were provided to complement the activities.