

**Methods:** This case report involves a 72-year-old woman with Progressive Supranuclear Palsy who was unable to sleep without sleeping pills. The patient lived alone, had some trouble speaking, and her MMSE score was 25/30. Medical records were reviewed from her initial visit to Hospital A until the cessation of sleeping pill use. Sleep was monitored using a non-wearable sheet-type device (Nemuri SCAN, Paramount Bed Co., Ltd.) placed under the mattress, providing long-term data. The study was conducted with approval from the Osaka University Hospital Ethics Review Committee.

**Results:** The patient had been unable to sleep since visiting her previous doctor and had tried various medications, including Suvorexant, Brotizolam, and Triazolam, none of which were effective. On her first visit to Hospital A, she was prescribed 8 mg of Ramelteon but still could not sleep. One week later, 15 mg of Brotizolam was added, allowing her to sleep with the combination of the two medications. A few months later, she experienced insomnia again due to daytime napping. Despite efforts to curb her naps, her condition persisted. Consequently, 0.25 mg of Clonazepam was added, and she was able to sleep with the three medications. After that, the patient began sleep monitoring using the Nemuri SCAN device and the monitoring indicated a consistent sleep rhythm with few awakenings, prompting her doctor to consider reducing her medication. A few months after starting sleep monitoring, the sleep monitoring results remained stable, with a constant sleep rhythm and few awakenings, leading to the discontinuation of 0.25 mg of Clonazepam and 15 mg of Brotizolam. Subsequent sleep monitoring continued to show stable results, allowing the discontinuation of 8 mg of Ramelteon six months after starting sleep monitoring.

**Conclusions:** This case highlights the importance of cautious sleep medication use in older and neurodegenerative patients, demonstrating benefits of alternative strategies like using non-wearable sleep monitoring device.

### **P35: Advancing-Age-Related Issues Queried through an Exploratory Survey**

**Authors:** Sheri Doyle, Psic, Lucia Beltrán Cruz, Psic

**Summary:** Advancing Age-Related Issues Queried through an Exploratory Survey consists of qualitative and quantitative gero-research focusing on volunteers aged seventy and over.

The queries focus on geriatric issues regarding internalized self-discrimination and societally imposed direct and indirect discrimination. The survey Methods applies 2-3 multiple-choice inquiries, while some responses can be expounded upon. As the study is exploratory one of its goals is to lead to more questions on the issue of discrimination.

The study originally aimed at quantitatively collecting and processing response results, harvested through surveys from older adults who reside in The United Kingdom (England), Mexico and in Ireland. With that intention in mind, one of the study's researchers (Doyle) took to the field but multifactorial logistics, sociocultural incongruencies and other challenges, would increase the time frame which she would need to run the survey as originally constructed as it held a qualitative, comparative component, which was planned for a co-project. She also discovered that a mosaic of distinct subsets of interviewees existed within each of the three survey regions and that would require reworking the original study.

The study-in-the-making was thus simplified to be effectuated with just one group of older adults – those survey participants who reside in Mexico. Reflecting on the challenges of running the original survey would become a valuable part of the learning overall process.

**Objectives:** Through the application of an exploratory survey this mixed study seeks to identify patterns related to self-reported and internalized discrimination, and to direct and non-direct discrimination by third parties which impacts older adults. This survey serves as a brief pilot study with a more comprehensive study to thence follow.

**Process:** This study is being conducted through an anonymous and simple survey which consists of twelve inquiries—some which may be optionally expounded upon.

**Methods:** Before starting the survey, each prospective participant provides basic demographic data. For ease of comparing response data quantitatively, a 2–3-point multiple-choice format has been established with “yes”, “no” and “non-applicable” or a like-kind concrete response, being the available options. Basic, non-identifying demographic data includes the respondents birth year, type of living arrangement, educational level attained, and mobility level.

Inclusive criteria includes that each prospective participant is seventy years old or older.

All tentative participants are required to voice their express consent to participate. After each survey has been completed (or stopped, by the participant) they will be given a small lapel sticker identifying their participation.

**Results:** An evaluation of the survey responses will be effectuated, while a scientifically based over-arching reflection of the challenges presented which thwarted the development of the original study will be recognized.

**Conclusions:** Infographic, bar charts (captioned in English & Spanish) comparing survey responses through the group of survey respondents based in Mexico, will become accessible in poster format, in September of 2024.

### **P36: Impact of developing cognitive decline on life satisfaction in Japanese older adults: the Arakawa Geriatric Cohort Study**

**Authors:** Shogyoku Bun<sup>1</sup>, Ryo Shikimoto<sup>1</sup>, Hisashi Kida<sup>1</sup>, Hana Nishida<sup>1</sup>, Hidehito Niimura<sup>1</sup>, Masaru Mimura<sup>1,2</sup>

1 Department of Neuropsychiatry, Keio University School of Medicine, Tokyo, Japan

2 Center for Preventive Medicine, Keio University, Minato, Tokyo, Japan

**Objectives:** The relationship between cognitive decline and life satisfaction in older adults remains unclear. This study aimed to examine whether older adults with normal cognition at baseline, who developed cognitive decline (i.e., mild cognitive impairment or dementia) over a five-year period, experience lower life satisfaction compared to those who remained cognitively intact.

**Methods:** The present longitudinal study was conducted in the Arakawa Ward, Tokyo, Japan. Among the initial 1,099 community-dwelling older adults who were between 65 to 84 years old in 2016, we analyzed data from 628 participants who were cognitively intact at baseline and remained in the study at follow-up (2022–2023) with complete data. The effect of developing cognitive decline on life satisfaction, measured by the Satisfaction with Life Scale (SWLS), was examined using a linear mixed model. In addition to developing cognitive decline, fixed effects included time, sex, age, education, depression (indicated by the Geriatric Depression Scale scores above 5), living status (living alone), and frequency of social interactions. The intercept and participants were treated as random effects.