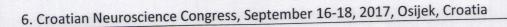
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BOOK OF ABSTRACTS



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Neuropsychiatric symptoms and functional impairment of the patients with Alzheimer's dementia and the family caregivers' distress: a pilot study

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Throughout the progression of Alzheimer's dementia (AD), beside the core cognitive deterioration, two major AD characteristics are neuropsychiatric (NP) symptoms and functional impairment in daily activities.

Regarding our practice experience, NP symptoms are presenting one of the main reason for institutionalization of the patients with AD, and may cause suffer in patients and their family caregivers.

Furthermore, AD patients commonly present dependency and/or disability in everyday activities, that may also cause a set of negative influences on caregivers' emotional and physical condition.

The aim of this study was to investigate, whether there is a connection between the everyday functional ability and NP symptoms of patients, in particular whether there is any connection between overall functional ability with any specific NP subdomain. Furthermore, this study investigated for possible connection between patients' everyday functioning and Caregivers Distress.

Cross-sectional study, conducted at the Department for biological psychiatry and psychogeriatry; Department for neurocognitive disorders, University Psychiatric hospital Vrapče, included 32 hospitalized patients with AD and their family caregivers. Participants were recruited between November 2016 and June 2017. Neuropsychiatric Inventory 12-item (NPI-12) scale was used to measure NP symptoms, and ADCS-Activities of Daily Living Inventory (ADCS-ADL) to measure the everyday functional ability. Mini Mental State Examination (MMSE) was also assessed. Psychiatrists were certified for the assessment of used clinician-rated scales. The primary outcome was NPI-12 score of patients (in total and for each subdomain of NPI-12), and the secondary outcome was NPI-12 Caregiver Distress score. Descriptive statistics and Kendall's tau correlation test were performed.

21 (66%) of the patients had moderate severity of dementia scores on MMSE scale, 22 (68%) of the patients were women, average age 75 (SD=7.32) years, and 15 (46%) of them finished high school. Among family caregivers, 27 (84.3%) were women, average age 51 (SD= 8.46) years.

There was no significant difference between mild and moderate severity of dementia groups in any NPI-12 subdomain (Mann-Whitney U test, P>0.194), as well as there was no correlation between ADCS-ADL (total) score with the intensity of any specific NPI-12 subdomain (P>0.228). Overall, correlation tendency was found between ADCS-ADL and NPI-12 total scores (τ =0.272, P=0.060).

correlation tendency was round between the correlation with NPI-12 Distress Caregiver total score, there While comparing ADCS-ADL total score of patients with NPI-12 Distress Caregiver total score, there was correlation tendency found (τ =0.266, *P*=0.061). The most prevalent and also the most intense NP symptoms were agitation, anxiety, irritability and disinhibition (81%-100%). The frequency list of NP Distress Caregiver symptoms followed the same symptoms (81%-94%).

The results from our pilot study are indicating promising correlation between patients ADCS ADL and NPI-12 scores, as well as correlation with NPI-12 Caregiver Distress score. Due to the small sample size, we were not able to identify possible connection between ADCS-ADL score and particular NPI-12 subdomains.

Therefore, focusing on the management of specific NP symptoms and functional impairment might be a possible treatment strategy for improving the quality of life both, AD patients and caregivers (with the decrease of healthcare service usage), which has to be confirmed on large scale study.