

Poster Session 1:

P1: Coping strategies used by caregivers of patients with Alzheimer's disease

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Introduction: Coping strategies are intentional, cognitive, and behavioral actions aimed at controlling the negative impact of a stressful event or situation.

Objectives: The Objectives of this study was to evaluate the coping strategies used by caregivers of patients with Alzheimer's disease and the development of strategies to reduce dysfunctional behaviors by patients.

Methods: The sample for this study included 33 caregiver-patient dyads diagnosed with Alzheimer's disease. Data were collected at the Alzheimer's Disease Center - ADC, at the Institute of Psychiatry of the Federal University of Rio de Janeiro. Patients were assessed for cognition, quality of life, disease awareness, functionality, and depression. Caregivers were assessed for coping, resilience, depression, anxiety, burden, and locus of control. Caregivers also provided information about mood, neuropsychiatric symptoms, severity of decline, activities of daily living, and quality of life of the patients.

Results: 82% of caregivers were female, with a mean age of 56.36 (SD = 14.31). Caregivers showed high levels of resilience, with an average score of 141.9 (SD = 12.54), moderate level of coping strategies 66.55 (SD = 12.86), moderate level of locus of control 67.4 (SD = 10.3), moderate level of burden 37.61 (SD = 18.1), low level of anxiety 6.64 (SD = 5.91), and low level of depressive symptoms 8.91 (SD = 8.30). Patients had a mean age of 74 years (SD = 9.4) and 54.5% of patients were male. Patients had an average score of 18.45 on cognition assessment, 60% had mild dementia, low depression index 9.48 (SD = 5.75), moderate levels of neuropsychiatric symptoms 26.45 (SD = 23.63), partially compromised disease awareness 10.8 (SD = 5.31), and high quality of life indices 33.21 (SD = 5.8). The results show a positive correlation between coping strategies and clinical variables. The use of coping strategies associated with high levels of resilience and locus of control may have contributed to the low levels of anxiety, depression, and burden among caregivers.

Conclusions: Coping strategies focused on emotion seem to be more effective for patients with mild dementia, while problem-focused coping strategies yielded better results for patients with moderate dementia.

P2: Analysis of resilience levels in caregivers of patients with young and late onset Alzheimer's disease

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Introduction: Resilience is a dynamic process involving the interaction between risk and protective factors that act to modify the effects of adverse life events. Understanding the resilience of caregivers of patients with AD and its predictors is essential for the development of intervention strategies aimed at solutions that can contribute to the improvement of their emotional disorders, such as anxiety, stress, and depression.

Methods: 93 dyads of patients diagnosed with AD, where 60 (64.5%) dyads had Late-onset AD (LOAD) and 33 (35.5%) dyads had Young-onset AD (YOAD). Patients were assessed for: quality of life (QoL), disease awareness, and depression. Caregivers were assessed for: resilience, depression, anxiety, burden, and QoL. Additionally, caregivers provided information about mood, neuropsychiatric symptoms, dementia severity, and patients' activities of daily living.

Results: Caregivers showed moderate levels of resilience, with an average score of 140 (SD = 13.20), moderate level of burden 28.94 (SD = 14.74), low level of anxiety 7.56 (SD = 7.44), and low level of depressive symptoms 8.17 (SD = 6.34). Patients had an average cognition score of 18.81, 63.4% had mild dementia, low depression index 8.02 (SD = 5.78), low index of neuropsychiatric symptoms 16.11 (SD = 14.47), and partially compromised disease awareness 9.06 (SD = 5.12).

Conclusions: No relationship was found between caregivers' resilience and patients' clinical condition, indicating that resilience seems to be associated with caregivers' individual characteristics. Interventions such as psychoeducational groups, behavioral or religious counseling, may stimulate or develop resilience characteristics in caregivers who exhibit avoidance or denial behaviors regarding the patient's diagnosis.

Keywords: resilience, Alzheimer's, caregivers

P3: Analysis of the different coping styles adopted by caregivers and their relationship with the manifestation and intensity of psychological and behavioral symptoms in patients with young-onset Alzheimer's disease

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Introduction: Young-onset AD (YOAD) affects people aged 65 years old or younger with greater initial loss of cognitive abilities, more significantly on attention, visuospatial function, motor- executive functions, and language.

Methods: 30 dyads, People with AD – caregivers, were evaluated. People with YOAD were assessed for: disease awareness, and depression. Caregivers were assessed for: depression, anxiety, coping, and burden. Additionally, caregivers provided information about mood, neuropsychiatric symptoms, dementia severity, and patients' activities of daily living.

Results: Caregivers showed moderate level of burden 38.94 (SD = 14.74), low level of anxiety 9.11 (SD = 9.8), moderate level of coping strategies 65.71 (SD = 11.7), and mild level of depressive symptoms 10.72 (SD = 8.8). People with AD had an average cognition score of 15.27, 50% had moderate dementia rating (CDR=2), mild depression index 12.35 (SD = 5.4), moderate index of neuropsychiatric symptoms 36.2 (SD = 23.3), and partially compromised disease awareness 9.06 (SD = 5.12). Coping strategy total score of caregivers was positively correlated with their cognition. Problem-focus is positively correlated with caregivers' years of education, cognition and inversely correlated anxiety. The coping strategies were not correlated with the clinical variables of people with YOAD. Dysfunctional and emotional- focus did not have significant correlations with the clinical variables of people with YOAD or their caregivers.