

Strengths-based interventions showed sustained improvements in caregiver grandparents' self-efficacy, indicating their feasibility and effectiveness. Finally, recommended public policies include financial subsidies, tax exemptions, access to mental health and wellness services, training programs, and awareness campaigns to recognize and support caregiver grandparents. In consistent, a holistic approach encompassing therapeutic interventions, the strengths model, and community and institutional support is crucial for improving elderly caregivers' well-being and mental health in Puerto Rico.

### **S19: Aging and Dementia problems in Latin America and the Caribbean: education, healthy ageing and recent research linked to microglia and microbiota**

**Authors:** Dr. Cecilia M Serrano, Dr. Tomas León, Dr. Alicia Kabanchik, Dr. Maria Andrea Carosella

**Summary:** Provide a vision of the current situation of ageing and dementia in Latin America and the Caribbean (LAC). The importance of assessing the needs of people with dementia, supporting families, integrating risk reduction strategies, healthy ageing, promoting training programs to support primary care, and promoting new advances in the Microglia axis concept will be highlighted—brain intestine. Despite the enormous burden that dementia generates, it continues to be an underdiagnosed entity. It is essential to control its prevalence, incidence, as well as its different social repercussions. It is crucial to promote direct actions aimed at reducing risk, disseminating knowledge of dementia, and promoting new lines of research that contribute to a healthier life for patients and their families.

#### **Microglia microbiota aging- Dr A Kabanchik**

In recent years, research interest arose in microglia-microbiota, normal and pathological aging, and new therapeutics. The Objectives of this presentation is to collaborate with the dissemination of this research and stimulate new developments. Concepts, functions, modifications linked to microglia, microbiota and gut brain axis were defined during the aging process associated with the increase in intestinal permeability, neuroinflammation and its impact on stress, depression and cognitive impairment. During aging, microglia changes from the resting state to the activated state and contributes to the development of neurodegenerative diseases. Dystrophic microglia is differentiated, characteristic of aging, from hypertrophic microglia. Dysbiosis of the gut microbiota could lead to increased permeability of the gastrointestinal tract, which induces a higher level of circulating bacterial products. Changes observed in the intestinal microbiota could be the cause or result of neuroinflammation or alterations in the microglia. In older people, microbiota dysbiosis alters the homeostasis of the microenvironment and the status and function of the microglia.

**Conclusions:** The regulation of microglia was proposed as a potentially effective therapeutic strategy in chronic inflammatory pathologies. Remodeling of the brain intestinal axis using psychobiotics appears promising in reversing depressive symptomatology. The continued exploration of the intersection of the microbiota, immunology and biology has great therapeutic promise.

#### **Dementia training needs of primary care professionals- Dr Tomás León**

**Background:** Chilean guidelines, as most Latin-American and global recommendations, suggest that most people with dementia and their care partners should be managed in primary care. However, the knowledge and confidence of primary care teams in managing dementia is low, and training programs to support primary care are either lacking or unsuccessful in increasing the confidence of primary care teams.

**Objectives:** Create and evaluate an online course on dementia for primary care.

**Methods:** Qualitative research Methods were used, including focus group interviews with health professionals and individual interviews with people with dementia and their care partners to identify the primary needs regarding dementia. An online course was created, and an analysis was performed on the pre and post-course survey results.

**Results:** The primary needs identified by health professionals were the diagnosis process, treatment and interpersonal skills. More than 50% of the sample expressed low confidence in making a differential diagnosis. Less than 30% of the sample felt confident in providing post-diagnostic support and non-pharmacological interventions. For people with dementia and care partners' primary needs were diagnosis disclosure and post-diagnosis support. Initial results show improvement in their confidence in diagnosis, treatment, and care and support for caregivers.

**Conclusions:** Our study supported the need for more training in dementia for primary care and identified additional educational content not usually included in standard dementia education. Including the voices of care partners and people with dementia was novel and ensured that dementia training in Chile was informed and tailored to the needs of the people who matter most. Expansion and adaptation for the Latin American public is ongoing.

## **Dementia in Latin America and the Caribbean: situation and future challenges- Cecilia M Serrano, MD, PhD**

Dementia is a major global health problem that has social and economic repercussions. It is one of the main factors that contribute to producing dependency and disability in older people and, although its prevalence and incidence increase exponentially with age, it is not part of normal aging. Despite the enormous burden that dementia poses, it remains an underdiagnosed disorder. Latin America has great sociocultural diversity and further studies are necessary to identify people with dementia.

**Objectives:** Identify the prevalence of dementia in the region, provide knowledge to the population and health professionals and be able to make an early diagnosis.

**Results:** More than 55 million people live with dementia in the world, (68% of patients reside in low- and middle-income countries). A good practice guide for the management of dementia in Latin America and the MoCA test adapted to our environment (Argentine version) to screen for mild cognitive impairment in the population are presented.

**Conclusions:** Promoting the use of harmonized Methodologies to address dementia can contribute to generating direct actions aimed at reducing the risk of dementia and leading to healthier lives for people with dementia and their families.

## **HEALTHY AGEING: GROUP DEVICE WITH ELDERLY PEOPLE**

We are going through the decade of healthy aging which, according to the WHO, attempts to promote and maintain functional capacity, allowing well-being in older people. Old age is heterogeneous, it is a complex process that manifests itself in different facets, such as physiological, emotional, economic and interpersonal, which influence functioning and social well-being. Active ageing is a strategic tool to face the problem mentioned.

**Objectives:** The Neurology and Social Services proposed forming a group with older people, within the hospital for prevention. It is intended for participants to enable the promotion of their rights and prioritize accompaniment focused on the individual, from an interdisciplinary perspective.

**Methods:** The Group is called Conociendo-Nos, for people over 60 years of age, which is carried out in a hospital, with an open call for two hours per week. It consists of the participation of professionals who, using different strategies, address issues related to comprehensive health, promoting exchange, and learning about the group.

**Results:** The participation of older people in this type of activity has grown throughout these years, with minimal dropout. This contributes to keeping them physically, mentally and socially active, preserving functional capacity in ageing and promoting the generation of links between participants and the health system.

**Conclusions:** Although some older people have little experience participating in group activities, this space helps their inclusion from a gerontological perspective, promoting healthy ageing.

**Keywords:** Healthy aging. Workshops for older people. Group device. Interdisciplinary work

## **Free/Oral Communication:**

### **FC1: Psychosocial Stressors and their Association with Brain Aging**

**Authors:** Francisca S Rodriguez, Hans J Grabe, Stefan Frenzel, Johanna Klinger-König, Robin Bülow, Henry Völzke, Wolfgang Hoffmann

**Introduction:** Recently researchers started investigating brain aging and what factors can influence the way our brains age. As it is unclear at this point whether psychosocial stressor influence brain aging, the aim of the study was to investigate the association between psychosocial stress and brain aging.

**Methods:** Data from the German population-based cohort Study of Health in Pomerania (N = 991; age range 20–78 years) were used to calculate a total psychosocial stress score by combining sub-scores from five domains: stress related to the living situation, the occupational situation, the social situation, danger experiences, and emotions. Associations with brain aging, indicated by an MRI-derived score quantifying age-related brain atrophy, were estimated by using regression models adjusted for age, gender, education, diabetes, problematic alcohol consumption, smoking, and hypertension.

**Results:** High emotional stress came with a relative risk of 1.21 (CI95% = 1.04 – 1.41) for advanced brain aging in fully adjusted models. Mental health symptoms additionally influenced brain aging, as statistically significant interactions between emotional stress and mental health symptoms on advanced brain aging indicate.

**Discussion:** Among the psychosocial stressors that we investigated; emotional stress seems to be relevant regarding brain aging. More research is needed to explore the potential pathways.