

impairment subjects compared with cognitive normal subjects, which may be due to the early and middle stages of neurodegeneration process.

### **P19: Screening for depression among older adults: a cross-sectional study in primary care in Brazil**

**Authors:** Carolina Godoy; Tassiane C. S. de Paula; Amanda E. G. Henrique; Matheus G. Barbosa; Cleusa Ferri

**Objectives:** To estimate the proportion of older adults in primary care screening positive for depression and identify associated factors.

**Methods:** A cross-sectional study was conducted involving 1,639 older adults (aged  $\geq 60$  years) from fourteen primary care units in a city of São José dos Campos in the state of São Paulo, Brazil, between December 2023 and April 2024. Depression was assessed using the Patient Health Questionnaire (PHQ-2), with a score  $\geq 3$  being considered to indicate the presence of depression. Logistic regression analyses were carried out to evaluate associations between sociodemographic characteristics (sex, age, marital status and employment) and health related variables (any chronic disease, alcohol consumption, and tobacco use) with a positive PHQ-2 score.

**Results:** The mean age of the 1,639 participants was 68.6 (SD  $\pm 6.2$ ; range: 60–95). The prevalence of a positive PHQ-2 score was 20.5%. Women, those with chronic diseases, and current smokers were more likely to have a positive score, (OR: 1.72; 95% CI: 1.33–2.23,  $p < 0.000$ ), (OR: 3.13; 95% CI: 1.50–6.56,  $p = 0.002$ ), and (OR: 1.55; 95% CI: 1.10–2.18,  $p = 0.011$ ), respectively. Those who had a job or a partner were less likely to have a positive score, (OR: 0.60; 95% CI: 0.37–0.97,  $p = 0.036$ ) and (OR: 0.71; 95% CI: 0.55–0.92,  $p < 0.010$ ), respectively. There were no significant associations between age and alcohol consumption and screening positive for depression.

**Conclusions:** Mental health services in primary care typically serve as the initial interface between the community and healthcare services. A substantial proportion of older adults screened positive for depression, which was particularly associated with being female, not having a partner, being unemployed, chronic diseases, and tobacco use. Despite the cross-sectional nature of this study, the results suggest that these factors may play a significant role in the development of depression in this population, and underscores the importance of considering these factors when designing interventions and prevention strategies aimed at the mental health of older adults.

### **P20: Evaluating xanomeline and trospium as a treatment for psychosis associated with Alzheimer's disease: design of the phase 3, ADEPT-1, relapse prevention study**

**Authors:** Carolyn Watson<sup>1</sup>, Jeffrey Cummings<sup>2</sup>, George Grossberg<sup>3</sup>, Minsu Kang<sup>1</sup>, Ronald Marcus<sup>1</sup>

1. Bristol Myers Squibb, Princeton, NJ
2. Department of Brain Health, University of Nevada Las Vegas School of Integrated Health Sciences, Las Vegas, NV
3. Department of Psychiatry & Behavioral Neuroscience, Saint Louis University School of Medicine, Saint Louis, MO

**Background:** There are no approved treatments for Alzheimer's disease psychosis (ADP). Xanomeline, a brain-penetrant M1/M4 preferring muscarinic receptor agonist, showed antipsychotic efficacy in placebo-controlled trials in subjects with AD [Bodick NC et al. 1997; DOI: 10.1001/archneur.1997.00550160091022]. Despite promising efficacy, further development of xanomeline was limited by cholinergic adverse events. The investigational antipsychotic xanomeline and trospium combines xanomeline with trospium, an FDA-approved muscarinic receptor antagonist that does not measurably cross the blood-brain barrier. Trospium acts to mitigate