

**Introduction and Objectives:** It is well known that geriatric patients are at increased risk of developing comorbid medical and psychiatric conditions, and a large proportion of them are admitted to psychiatric liaison units (LPUs). The aim of this study is to determine which clinical differences between age groups (65- 74 years and  $\geq 75$  years) are statistically significant to potentially warrant special attention when referring to an LPU.

**Methods:** This is an observational, cross-sectional and comparative multicentre study. We collected data from 165 patients ( $\geq 65$  years) admitted to 7 Spanish general hospitals and referred to each LPU from different departments. Data were collected over a period of one and a half months. Psychiatric examinations were performed during the patients' stay in the wards. The sample was divided into two age groups of patients and a comparative analysis was done.

**Results:** We obtained a sample of 165 patients with a mean age of 76.03 years (42.10% < 75 years, 57.83%  $\geq 75$  years). We analysed several variables between two age groups: the youngest (65- 74 years) and the oldest ( $\geq 75$  years).

In the younger group (mean age 69.87 years), the mean Barthel index before admission was 93.23 (52.1% with independent ambulation) and at the time of our first assessment was 54.62, before 82.71 of the older group (mean age 80.63). The mean Lawton index was 4.44 (6.35 for the older group) and the Charlson index was 6.38 (5.6 for the older group). 21.11% reported falls in the last 6 months, compared to 27.6% in the older group. The most common reason for referral was anxiety/depression symptoms in both groups (52.12% and 56.53%) and agitation (24.46% in the older group). After the LPU visit, the main diagnoses were adjustment disorder in both groups (25.3% and 25.53%) and delirium in the older group (23.4%). Antidepressants and benzodiazepines were the most common psychotropic drugs prescribed before the LPU visit, and benzodiazepines were the most common drugs discontinued after the LPU visit in both groups.

**Conclusions:** Clinical differences were found between two age groups (65-74 years and  $\geq 75$  years) at LPU, which could allow professionals to improve their attention and interventions.

## **P60: Development of a participant-driven dementia learning program by people living with dementia**

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**Objective:** All older adults, including those already living with dementia, should be provided with adequate knowledge about dementia and be aware of how to navigate the social resources available to them. The purpose of this study was to develop a practical program to help older adults living in the community learn about cognitive decline and how to use related social resources.

**Methods:** Program participants included attendees of a community center for dementia support in a major Japanese city, as well as the residents of a large housing complex in the local area. Within the cohort, there were participants who willingly disclosed to having dementia. The program began in February 2021 and was held once a month for a total of 15 hour-long sessions. A participant survey was administered at each session to gather the demographic information of participants and their understanding of the program. Additionally, the staff conducted recorded verbal discussions about the program, which were then reviewed using thematic analysis.

**Results:** The program structure was as follows: (1) participants decided the theme; (2) the first half of each session comprised lectures, while the second half included discussion and group work; and (3) rules for discussion were established (do not interrupt, do not unilaterally deny what people say, maintain confidentiality). The average number of participants per session was 12.1. Survey results indicated that 70.5% of participants were female and, in terms of age, the largest number of attendees were 81-90 years old (48.5%). Most participants "understood the program content well" (72.5%) and indicated that "they would strongly like to participate again" (64.2%). The recorded participant discussions about the program were suggested, after review, to be more superficial as a result of Japanese people's particular attitude of not wanting to bother others.

**Conclusion:** Participants were highly satisfied with the program and were able to help develop a practical program for people living with dementia to learn effectively. A challenge was that participants had a "do not want to bother others" mindset, which could inhibit them from expressing their true wishes and make them less likely to use social resources.

## **P68: Early psychiatric referral after attempted suicide helps prevent suicide reattempts: A longitudinal national cohort study in South Korea**

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**Introduction:** Although people who attempted suicide tend to repeat suicide attempts, there is a lack of evidence on the association between psychiatric service factors and suicide reattempt among them.

**Methods:** We used a nationwide, population-based medical record database of South Korea to investigate the use of psychiatric services before and after the index suicide attempt and the association between psychiatric service factors after the index suicide attempt with the risk of suicide reattempt.

**Results:** Among 5,874 people who had attempted suicide, the all-cause mortality within 3 months after the suicide attempt was 11.6%. Among all subjects who attempted suicide, 30.6% of them had used psychiatric