style, and the above blood indicators as independent variables in binary logistic regression analysis. The results showed that sTREM2 was a risk factor for MCI (OR = 1.009, 95%CI = 1.002– 1.016, P = 0.015), junior high school education or above was a protective factor for MCI (OR = 6.133, 95 % CI = 2.651–14.189, P < 0.001). 4.The area under the ROC curve of sTREM2 was 0.630 (sensitivity 0.472, specificity 0.782), and the area under the ROC curve of sTREM2 combined with MMSE was 0.849 (sensitivity 0.679, specificity 0.873).

**Conclusions:** sTREM2 is a risk factor for cognitive function decline in MCI. Plasma sTREM2 levels combined with the cognitive function assessment scale have good clinical value in identifying mild cognitive impairment.

**Keywords:** sTREM2, Mild Cognitive Impairment, Plasma

### P2: Clinical Improvement Analysis using Montgomery-Åsberg Depression Rating Scale (MADRS) for Outpatient Elderly using Antidepressant Medication in Cipto Mangunkusumo National General Referral Hospital

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**Background:** Clinical outcome is one of the indicators for treatment effect in specific populations such as the elderly. Depression is manifested as the result of biological, psychological, and social factors which are interrelated in the symptoms of low mood, energy, and motivation. In specific population of elderly, depression is related to the issue of loneliness and may impact the quality of life, as well as the progression of other medical comorbidities. Therefore, it is important to monitor the progress of treatment among the elderly.

**Objectives:** The Objectives of this study is to observe clinical improvement of depressive symptoms through the Montgomery-Åsberg Depression Rating Scale (MADRS).

**Methods:** This is an observational cohort study conducted in the outpatient clinic setting. The data was collected after one month of follow-up. Each patient was assessed using the MADRS questionnaire in every clinical encounter. The MADRS scores were analysed statistically using descriptive and dependent variable analysis.

**Results:** We collected 304 data of patients using MADRS as part of the clinical measurement. The average age is 69.98±6.6 years old. From gender distribution, 57.6% are female and 42.4% are male. From one-month follow-up, 37.8% of patients showed improvement of MADRS score and 39.1% remains the same from the previous visit.
Statistical analysis showed significant change of MADRS score after follow-up, indicating the importance of routine visit and monitoring for elderly showing symptoms of depression.

**Conclusions:** Psychometric evaluation is an essential component for observing the clinical improvement for elderly with symptoms of depression.

**Keywords:** clinical, depression, elderly, inpatient