

recommendations for dementia care and lay the foundation for an international evaluation framework of quality practice. Future work will develop a concordant, human-rights based scheme for the evaluation of dementia services and use this to establish good practice guidance for dementia care using examples from across the globe.

## **P142: Dementia diagnosis: the potential onset of suicidal risk**

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**Objective:** Being diagnosed with dementia can be a hectic and critical period. While severe dementia may act as a shield when it comes to suicidal risk, mild and early dementia stages may still preserve cognitive functions to elaborate a suicidal plan. Having insight may lead to feelings of despair and sadness that patients find unbearable to deal with.

The aim of this article is to review the current literature regarding suicidal risk after a dementia diagnosis.

**Methods:** Review of the most recent literature regarding the risk of suicide among patients with a recent dementia diagnosis. The research was carried out through the PubMed and UptoDate databases, using the terms “dementia”, “diagnosis” and “suicidal risk”.

**Results:** Previous research showed inconclusive findings, with some authors suggesting a higher risk of an early suicide attempt in patients recently diagnosed with dementia, and others suggesting otherwise. Nowadays, the literature mainly reports that older adults with recent dementia diagnoses are at increased risk of endeavoring suicide. There is an important requirement to offer appropriate support to patients and their families, at the time, or as soon as possible, when a dementia diagnosis is made, to diminish the risk of suicide attempts in these patients.

**Conclusion:** Patients with recent diagnosis of dementia, or diagnosed at an earlier age, seem to have higher suicidal risk. The period immediately after diagnosis is when individuals need greater support, so these results demand for better assistance for those experiencing such intellectual decline.

## **P143: New therapies for Alzheimer’s dementia and its implications on healthcare system: are we ready?**

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**Objective:** The amyloid hypothesis suggests that errors in production, accumulation, or disposal of beta-amyloid are the primary causes of Alzheimer's disease (AD). Since this was hypothesized, there has been significant effort in developing treatments that prevent the build-up of amyloid beta (A $\beta$ ) plaques in the brain. A disease modifying therapy (DMT) changes the clinical progression of AD by interfering in its pathophysiological mechanisms.