

#### **P45: Multimorbidity Patterns and their association with depressive symptoms among elderly: A Latent Class Analysis of the Brazilian Longitudinal Study of Aging (ELSI-Brazil) data**

**Authors:** Vinícius Boaventura<sup>1</sup>, Cleusa P Ferri<sup>1,2</sup>, Lucas M Teixeira<sup>1</sup>, Ana M A Keinert<sup>1</sup>, Matheus Ghossain Barbosa<sup>1</sup>

1. Psychogeriatric Unit, Department of Psychiatry, Escola Paulista de Medicina, Universidade Federal de São Paulo, São Paulo, Brazil
2. Health Technology Assessment Unit, Hospital Alemão Oswaldo Cruz, São Paulo, Brazil.

**Objectives:** To explore how clusters of chronic health problems can impact depression in older adults.

**Methods:** We performed a latent class analysis using the baseline data from The Brazilian Longitudinal Study of Aging (ELSI-Brazil). Depression was assessed using the Center for Epidemiological Studies Depression Scale (CES-D8). Scores of 4 or higher on the CES-D8 were considered positive for depression. Fourteen self-reported conditions (Diabetes, Systemic Arterial Hypertension, Angina, Myocardial Infarction, Chronic Kidney Disease, Heart Failure, Stroke, Low Back Pain, Arthritis, Osteoporosis, Asthma, Chronic Obstructive Pulmonary Disease, High Cholesterol, and Cancer) were evaluated and combined as a total number of chronic conditions.

**Results:** The total number of individuals in the sample was 4672. The best resulting model is composed of 4 latent classes. The latent classes were organized as follows: Cardiovascular Multimorbidity (Class1); No multimorbidity (Class 2); Musculoskeletal Multimorbidity (Class 3); and Inflammatory Multimorbidity (Class 4). We identified that, in comparison with class 2, (considered the reference class due to the absence of multimorbidity), the odds ratio for depression was 2.56 for the Cardiovascular Multimorbidity class, 2.86 for the Musculoskeletal Multimorbidity class, and 4.59 for the Inflammatory Multimorbidity class.

**Conclusions:** We found that various patterns of multimorbidity are associated with depression when compared with a single disease and that Inflammatory Multimorbidity has the greatest impact on depression.

#### **P46: Effect of sleep report feedback using information and communication technology combined with health guidance on subjective and objective sleep discrepancy among older people with and without uncoupled sleep**

**Authors:** Wenping Mo<sup>1</sup>, Miyae Yamakawa<sup>1,2</sup>, Kodai Nobuhara<sup>3</sup>, Masako Higo<sup>1</sup>, Hiroyoshi Adachi<sup>4,5</sup>, Hitomi Chikama<sup>1</sup>, Eriko Koujiya<sup>1</sup>, Yasushi Takeya<sup>1</sup>, Manabu Ikeda<sup>5</sup>

1. Division of Health Sciences, Graduate School of Medicine, Osaka University
2. The Japan Centre for Evidence Based Practice: A JBI Centre of Excellence, Osaka, Japan
3. NTT-PARAVITA Inc., Japan
4. Health and Counseling Center, Osaka University, Osaka, Japan
5. Department of Psychiatry, Graduate School of Medicine, Osaka University

**Objective:** Uncoupled sleep is a phenomenon characterized by a discrepancy between sleep patterns and sleep complaints. This study aimed to evaluate the effect of sleep report feedback utilizing information and communication technology combined with health guidance on improving subjective and objective sleep outcomes in community-dwelling older people with and without uncoupled sleep.

**Methods:** This study was conducted in Sakai City, Japan. The Athens Insomnia Scale (AIS) was employed to evaluate subjective sleep outcomes. Participants were categorized as complaining sleepers if they reported their overall sleep quality as markedly or very unsatisfactory, in addition to having a total AIS score  $\geq 10$ . Non-wearable actigraphy devices were placed under participants' bedding to continuously measure their objective sleep