

Conclusions: The results emphasize the importance of ongoing screening for depressive and anxious symptomatology in carers over time, particularly in women. Health professionals in primary care should be capacitated to assess and offer timely and appropriate support to family carers of PLWD in order to improve their mental health. Finally, interventions for carers should be an essential part of national dementia plans.

FC43: Decision-Making Capacity and Awareness in People with Young-Onset Alzheimer's Disease

Authors: Marcia Dourado, Tatiana Belfort, Marcela Nogueira, Natalie AP Souza, Maria Alice Baptista

Objectives: There is a lack of research on differences between decision-making capacity and awareness according to age at onset of dementia. We investigated the relationship between decision-making capacity and awareness domains in people with young-(YOAD) and late-onset Alzheimer's Disease (LOAD).

Methods: A cross-sectional study included 169 consecutively selected people with AD and their caregivers (124 people with LOAD and 45 people with YOAD). Decision-making capacity was assessed with the MacCAT-T and awareness with the ASPIDD scale.

Results: People with YOAD were more cognitively impaired, but more aware of their cognitive deficits and health condition, with moderate effect sizes. We did not find any other significant differences between the groups in the other domains of awareness. In addition, there were no significant differences in the domains of decision-making capacity between groups. All PwAD presented deficits in the domains of decision-making capacity with a greater impairment in the understanding domain (YOAD = mean 3.67, SD 1.57; LOAD = mean 3.80, SD 1.22). Understanding was the domain of MacCAT-T most significantly associated with awareness domains: ASPIDD Total ($p < 0.001$), awareness of cognitive deficits and health condition ($p < 0.001$), awareness of emotional state ($p < 0.008$), awareness of social functioning and relationships ($p < 0.001$), and awareness of impaired functional activity ($p < 0.001$). However, age at onset only impacted total ASPIDD ($p < 0.013$) and awareness of cognitive deficits and health condition ($p < 0.001$).

Conclusions: Better awareness involved better understanding in the YOAD group. Clinically, our findings shed light on the need to consider the differences in the domains of awareness and their relationship with other clinical aspects such as decision-making capacity according to age at onset of AD.

FC44: Sex differences in population attributable fractions of modifiable dementia risk factors: evidence from Rush University Memory and Aging Project.

Authors: Jissa Martin^{1,2}, Dr David D. Ward^{1,2}, Dr Natasha Reid^{1,2}, Prof. Ruth E. Hubbard^{1,2,3}, Dr Emily H. Gordon^{1,2,3}

1. Centre for Health Services Research, Faculty of Medicine, The University of Queensland, Brisbane, Queensland, Australia
2. Australian Frailty Network, The University of Queensland, Woolloongabba, QLD, Australia
3. Princess Alexandra Hospital, Metro South Hospital and Health Service, Queensland, Australia

Objectives: Understanding how the importance of modifiable risk factors for dementia varies by cognitive status and sex is vital for the development of effective approaches to dementia prevention. We aimed to calculate population attributable fractions (PAFs) for incident dementia associated with sets of risk factors while exploring sex differences in individuals who are cognitively normal (CN) or has mild cognitive impairment (MCI).