

search strategy. Relevant literature on palliative care in PSP and MSA was also reviewed. Results from both searches were qualitatively combined in order to suggest triggers for targeted palliative care throughout the disease trajectory. **Results:** ‘Milestones’ are well documented and clinically relevant disease points that prompt further care. Important milestones include: frequent falls, cognitive impairment, unintelligible speech, severe dysphagia, wheelchair dependence, urinary catheterisation, and nursing home placement. PSP-Richardson syndrome accumulates milestones earlier than PSP-Parkinsonism or MSA. Many PSP patients already have falls and cognitive impairment at the time of diagnosis. Time from milestone to death is variable. **Conclusions:** Milestones can be used to trace disease progression and help predict survival. Clinical milestones are likely to be important triggers for targeted palliative care interventions including the early incorporation of a palliative approach to care or referral to specialised palliative care services.

P.079

Factors influencing HINTS exam usage by Canadian Emergency Medicine Physicians

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Background: The HINTS examination is a sensitive and specific tool for determining whether a patient presenting with an acute vestibular syndrome has had a stroke. Despite its efficacy, it is often not used by Emergency Medicine (EM) physicians when assessing patients with vertigo. **Methods:** To ascertain why, we surveyed, by email, physicians registered with the Canadian Association of Emergency Physicians, to gather information on their practices when assessing patients with vertigo, and their utilization and perspectives concerning the HINTS examination. **Results:** 185 participants responded to our survey, demographically representative of Canadian EM physicians. The majority regularly use the HINTS exam in the appropriate setting, but significant minorities employ the exam inappropriately, such as in patients without nystagmus, with other neurological findings, or alongside tests for intermittent vertigo. Misapplication was associated with older age, years of practice, non-academic practice settings, and less residency training ($p < 0.05$). The predominant reasons for not using this examination are lack of confidence in recalling and performing component exam techniques, particularly the head-impulse test, and doubts about the necessity, safety, or validity of this examination. **Conclusions:** HINTS examination use is limited by lack of provider skill, safety concerns, and doubts on its validity in excluding stroke when employed by EM physicians.

P.080

Cognitive Profile, Disease Characteristics, and Neuroimaging Findings in Susac Syndrome: A Case Series of Seven Participants from British Columbia

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Background: Susac Syndrome (SuS) is a rare autoimmune disorder of the cerebral, retinal, and inner ear microvasculature. One of the cardinal manifestations of central nervous system (CNS) involvement is encephalopathy, however the cognitive profile in SuS is poorly characterized in the literature. **Methods:** In this cross-sectional case series of seven participants diagnosed with Susac Syndrome in remission in British Columbia, we use a battery of neuropsychological testing, subjective disease scores, and objective markers of disease severity to characterize the affected cognitive domains and determine if any disease characteristics predict neuropsychological performance. We also compare this battery of tests to neuroimaging markers to determine if correlation exists between radiographic markers of CNS disease and clinical evaluation of disease severity. **Results:** There were a variety of cognitive deficits, with memory and language dysfunction being the most common. Despite the variability, performance on some neuropsychological tests (MoCA) correlated to markers of functional disability (EDSS). Additionally, MoCA and EDSS scores correlated with neuroimaging findings of both corpus callosum and white matter changes. Finally, psychiatric scores correlated with participant reported scores of disease severity. **Conclusions:** There is a relationship between cognitive deficits, subjective and objective disease disability, and neuroimaging findings in Susac Syndrome.

P.081

Epidemiology of Neurological and Cardiac Complications of COVID-19 among Ontario Visible Minorities: A Retrospective Study of Chinese and South Asian Canadians

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Background: This is a population-based retrospective study of neurological and cardiac complications of COVID-19 among