

## 445 - The factors associated with the presence of psychotic symptoms in the HELIAD Greek community study of older adults

Helen-Maria Vasiliadis, PhD<sup>1</sup>  
Rossettos Gournelis, MD, PhD<sup>2</sup>  
Vassia Efstathiou, PhD<sup>2</sup>  
Nikos Stefanis, MD, PhD<sup>3</sup>  
Mary H. Kosmidis, PhD<sup>4</sup>  
Mary Yannakoulia, PhD<sup>5</sup>  
Efthimios Dardiotis, MD<sup>6</sup>  
Georgios Hadjigeorgiou, MD<sup>6</sup>  
Paraskevi Sakka, MD, PhD<sup>7</sup>  
Eva Ntanasi, PhD<sup>8</sup>  
Ioanna Pachi, MD<sup>9</sup>  
Leonidas Stefanis, MD, PhD<sup>10</sup>  
Nikolaos Scarmeas, MD, PhD<sup>11,12</sup>

### Affiliations

1. Faculty of Medicine and Health Sciences, University of Sherbrooke; Charles-Le Moyne Innovations in Health Research Center (CR-CSIS), Longueuil, Canada
2. 2nd Department of Psychiatry, Medical School, National and Kapodistrian University of Athens, University General Hospital Attikon, Athens, Greece.
3. First Department of Psychiatry, School of Medicine, National and Kapodistrian University of Athens; Community Mental Health Centre, University Mental Health Research Institute, Athens, Greece;
4. Laboratory of Cognitive Neuroscience, School of Psychology, Aristotle University of Thessaloniki, Thessaloniki, Greece
5. Department of Nutrition Science-Dietetics, Harokopio University, Athens, Greece
6. Department of Neurology, Faculty of Medicine, University of Thessaly, Larissa, Greece
7. Athens Association of Alzheimer's Disease and Related Disorders, Athens, Greece.
8. First Department of Neurology, Aiginition Hospital, National and Kapodistrian University of Athens Medical School, Greece.
9. First Neurology Clinic, Eginition Hospital, Athens University Medical School, Athens, Greece; 2nd Neurology Clinic, Attikon Hospital, Athens University Medical School, Athens, Greece.
10. First Department of Neurology, School of Medicine, National and Kapodistrian University of Athens, Greece
11. Department of Social Medicine, Psychiatry and Neurology, National and Kapodistrian University of Athens, Greece
12. Columbia University, New York, NY, USA

### ABSTRACT

**Background:** The prevalence and associated factors related to psychotic symptoms in older adults are understudied. The objectives were to assess the prevalence, incidence and factors associated with psychotic symptoms in a representative Greek sample of community living older adults.

**Methods:** This study includes older adults aged  $\geq 65$  years participating in the Hellenic Longitudinal Investigation of Aging and Diet. The analysis is based on  $n=1,904$  participants with available data at baseline and  $n=947$  participants at the 3-year follow-up. The presence of delusions and hallucinations in

the past month was assessed on the grounds of the 17 symptoms of the Columbia University Scale for Psychopathology in Alzheimer's Disease and of the 14 symptoms of the Neuropsychiatric Inventory Questionnaire. An affirmative answer to any of these 31 symptoms defined the presence of psychotic symptoms. A comprehensive neuropsychological assessment for probable diagnosis of dementia and physical comorbidity was carried out by neurologists. Study factors included age, education, marital status, widowed in the past year, occupation, hearing impairment and number of chronic comorbidities. Penalized logistic regression analyses were carried out to assess the socio-demographic and clinical factors associated with the prevalence and incidence of psychotic symptoms.

**Results:** The past-month prevalence of any psychotic symptom was 1.9% and 1.0% when excluding cases of dementia. The prevalence of any delusion and hallucination was 1.5% and 0.7%, and 0.8% and 0.3% when excluding cases with dementia. Paranoid delusions were the most prevalent. The incidence at the follow-up of any psychotic symptom was 2.1% and 1.3% when excluding dementia. Individuals not married had twice the odds and, farmers/breeders had three times the odds than public servants/teachers/executives of experiencing psychotic symptoms. Hearing impairment and the number of comorbidities increased the odds of the presence of psychotic symptoms. In addition to age and recent widowhood, these factors remained significantly associated with the presence of psychotic symptoms in cases without dementia.

**Conclusion:** Dementia was not related to over half of the cases observed with psychotic symptoms. Paranoid delusions were the most prevalent. Socio-economic and health status factors are significant predictors of psychotic symptoms.