Two groups of patients/caregivers were compared: a control group (CG) that followed regular controls in the office and another telematic group (TG) that followed controls on the TECUIDE platform. The follow-up has been carried out for one year.

Data on age, gender, comorbidity, treatment received, analytical parameters, and functional, nutritional, and sensory status were collected, as well as the Reisberg GDS scale and the self-administered Cummings Neuropsychiatric Inventory (NPI).

Results: 72 CG patients. 76 TG patients. mean GDS of CG: was 4.5, and the mean GDS of TG: was 4.7.
Total group baseline SPCD: Delusions: 48.6%, hallucinations: 43.8%, agitation/aggression: 46.6%, depression 66.4%, anxiety 5.7%, euphoria: 12.3%, apathy: 76%, disinhibition: 39%, irritability: 57.5%, abnormal motor behavior: 43.2%, sleep disorder, 37%, eating disorder: 46.6%.
Mean NPI at the beginning of the study: GC: 5.3, TG: 6. Mean NPI at the end of the study: GC was 4.5 and GT was 4. That is, the average SPCD is higher in the TG than in the GC at the beginning of the study, while at the end of the study, the GC exceeds the TG.
When comparing the BPSD at the beginning and end of the study, a decrease is seen in all in general in the TG and an increase in hallucinations and sleep disturbances in the CG.
In the analysis of drugs, an increase in the consumption of neuroleptics in the CG was observed with a statistically significant difference (p 0.039).

Conclusion: The TECUIDE telematic program is an effective tool for the control of patients with dementia, reducing BPSD and the consumption of drugs (neuroleptics, benzodiazepines, and antidepressants).

P197: Delirium in nursing homes (DeliA) - an interdisciplinary health services research project

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Background: Delirium is a potential emergency with serious consequences. Little attention has been paid to residents of nursing homes, although they are at extreme risk for developing delirium. Health Care Professionals (HCPs) such as nurses and general practitioners are assumed to know little about delirium in nursing homes.

Objectives: The German project DeliA (delirium in nursing homes) comprises three sub- studies and two reviews. The sub-studies have the following objectives: (1) to determine the prevalence of delirium and its sub-types in German nursing homes; (2) to describe and assess the quality of delirium care practices (prevention, diagnosis, therapy) of HCPs in nursing homes; and (3) to develop a Technology Enhanced Learning (TEL) to increase the delirium- specific knowledge of HCPs in nursing homes. The reviews aim to (a) summarize the prevalence of

delirium reported in international studies and (b) to find out how, why and under what context education for HCPs in nursing homes works.

Methods: A systematic review of the reported prevalence of delirium in nursing homes will be conducted (a). The prevalence study (1) will assess delirium and its proposed associated factors in at least 50 nursing homes using validated measurements. Medication schedules of participating residents will be analyzed to determine potential for delirium. To describe current practice, process-oriented semi-structured guided interviews will be conducted with 30 representatives of the (nursing home) medical service and the nursing service of nursing homes (2). As a theoretical basis for the TEL, a realist review will be conducted to understand the active ingredients of educational interventions and to develop an initial program theory (b). The curriculum for the proposed TEL will be developed based on a synthesis of existing curricula and evaluated by Delphi experts for relevance, comprehensiveness, and content. A final feasibility study will assess the potential increase in knowledge about delirium among HCPs (n = 50) in nursing homes (3).

Expected Results: It is expected that the project and the dissemination of its findings will raise awareness among HCPs and the public about delirium in nursing homes. The developed TEL and its underlying program theory will be further tested.

P200: Association between sleep disturbance and subjective well-being among community- dwelling older people: a serial multiple mediation model

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Objective: Sleep disturbance is negatively associated with subjective well-being in older people, but the potential underlying mechanisms of this association remain unclear. This study aimed to disentangle the pathways linking subjective versus objective sleep disturbance to subjective well-being through the serial mediation effect of loneliness and depression among community- dwelling older people.

Methods: This cross-sectional study was conducted in Sakai city of Japan. A total of 212 aged 65 and over participated in this study. The Athens Insomnia Scale, UCLA Loneliness Scale, Geriatric Depression Scale, and Self-perceived well-being were used to assess subjective sleep quality, loneliness, depression, and subjective well-being, respectively. A non-wearable actigraphy device was used to evaluate the objective sleep quality. Total sleep time, sleep latency, sleep efficiency, wake after sleep onset, number of awakenings, and average activity during sleep were recorded. Serial multiple mediation analysis was performed using SPSS PROCESS Version 4.1 macro. This study was approved by the Institutional Review Board of Osaka University.