

The aim of this article is to review the current literature regarding the role of new DMTs for Alzheimer's dementia and assess the preparedness of health care systems to implement these treatment options.

**Methods:** Review of the most recent literature regarding the role of new DMTs for Alzheimer's dementia and the challenges faced by the health care system to implement these treatment options. The research was carried out through the PubMed and UptoDate databases, using the terms "amyloid hypothesis", "Alzheimer", "disease modifying treatments" and "dementia".

**Results:** Research has been focusing on developing monoclonal antibodies as potential DMTs that target A $\beta$ . Aducanumab, a human antibody, or immunotherapy, is the only disease-modifying medication currently approved to treat AD. It targets the A $\beta$  protein and helps to reduce amyloid plaques and is currently the only FDA approved medication to slow the progression of AD. Lecanemab, a humanized IgG1 monoclonal antibody, binds to A $\beta$  soluble protofibrils with high affinity. Even though there is considerable optimism about its potential, lecanemab will probably be more useful to patients on early stages of the disease.

**Conclusion:** DMTs administration obeys to certain needs such as a vacancy in Day Hospital for infusion and regular monitorization and for lumbar puncture. It demands a complex network involving general practitioner, neurologist, psychiatrist, psychologist, and social services. It also involves a genetic study and complementary diagnosis exams such as PET (Positron emission tomography) scans and MRIs (Magnetic resonance imaging), which are expensive. There is an emerging need to develop enhanced and safer treatments.

## **P145: Insights into the impact of relocations within nursing homes on residents: an interview study with stakeholders**

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**Objectives:** Elderly people who live in nursing homes can be faced with intramural relocations for various reasons, whether individual or per group. Because the impact of these intramural relocations on residents is unknown, our aim is to explore how relocations within nursing homes affect residents from different stakeholder-perspectives.

**Methods:** We performed semi-structured individual interviews and a focus group with various stakeholders of intramural relocations to collect a broad outlook on its practice based on diverse perspectives and lived experiences. The interviews and focus group were audio-recorded, transcribed verbatim and analyzed using responsive and thematic analysis.

**Results:** Seventeen interviews were held and one online focus group with six participants. In the interviews, participants mentioned various reasons for intramural relocations, such as outdated real estate for group

relocations or changing healthcare demand for individual relocations. Participants distinguished various levels of impact on residents on different moments in time (before, during and after the relocation). The impact varied from very positive (e.g. looking forward and excited) to very negative (e.g. stressful, traumatic, hard to understand). Aspects that influenced the impact of relocation were related to 1) the mental resilience of residents, 2) how relocations were organized, 3) the presence and quality of social connections of residents and 4) if benefits of the new (care) environment were experienced. The focus group added insights on the importance of clear and timely communication with residents and recognizability of (personal) items and personnel from the former nursing home to reduce negative experiences of residents relocating within nursing homes.

**Conclusions:** The impact of relocations within nursing homes differs per situation, moment in time and resident. Aspects found that influence the impact provide targets to reduce the negative impact on residents: practices should focus on good preparation, clear communication, preserving social connections of residents where possible and paying attention to the benefits of the new (care) environment for the residents. Further research may focus on the lived experiences and perceived impact of relocations within nursing homes of residents themselves to develop in depth insights into tailored (care) needs of residents during the relocation process.

## P155: Circadian Rhythms and Alzheimer's Disease

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**Introduction:** Major neurocognitive disorder (or simply Dementia) is one of the main causes of disability and burden disease to caregivers and the health system, and a frequent cause of mortality worldwide. Alzheimer's disease (AD) is the most common type (60-70%).

AD is a progressive neurodegenerative disorder characterized by amyloid- $\beta$  ( $A\beta$ ) deposition, causing neuronal and synaptic loss with subsequent cognitive dysfunction.

There is cumulating evidence that sleep disturbances are associated with several pathological conditions, and AD is one of these. The prevalence and severity of sleep disorders is significant in AD patients, with sleep disturbances often precede its clinical diagnosis in many years. Some studies focus on possible mechanisms by which (abnormal) sleep participate in AD pathogenesis, and concluded individuals with sleep disturbances are at higher risk of developing dementia.

**Objectives:** To highlight the current evidence on whether sleep disorders could precipitate or accelerate the clinical course of AD.

**Methods:** Non-systematic review about sleep abnormalities and AD pathogenesis.

**Results:** Several authors described a two-way relationship between sleep and amyloid pathology - sleep deprivation would lead to increased production and decreased clearance of  $A\beta$ ; once  $A\beta$  is accumulated it results in more disrupted sleep, with an increase of  $A\beta$  production during wakefulness and a decrease of its clearance during sleep.