6:30 - 7:30pm Wednesday, 1st February, 2023 Flamingo Lawn

CE Workshop 07: Cognitive Effects of Cancer and Treatment: "Chemobrain" and Beyond

Presenter: Brenna C. McDonald

7:20 - 8:50am Thursday, 2nd February, 2023 Town & Country Ballroom B

Abstract & Learning Objectives:

Improvements in treatment for non-CNS cancer have greatly improved survivorship, allowing increased attention to cancer- and treatmentrelated sequelae. Cognitive symptoms (cancerrelated cognitive impairment, or CRCI) are reported by a large percentage of cancer survivors, and can have a clinically meaningful impact on educational, vocational, and social functioning, and thus overall quality of life. Better understanding of these concerns is therefore of critical importance, and is needed to guide treatment and potential prevention strategies. Neuropsychological studies over the past 40 years have demonstrated cognitive domains commonly affected in cancer patients treated with chemotherapy, but have also shown cognitive differences in patients not treated with systemic therapy and those receiving other types of treatment (e.g., hormonal therapies) relative to non-cancer control groups. More recently, structural and functional neuroimaging research has added to our understanding of the neural substrate of these cognitive symptoms. This course will describe various neuroimaging modalities used to investigate CRCI, including examination of grey and white matter volume and structural integrity, blood flow, brain activation during cognitive processing and at rest, and structural and functional connectivity. The presentation will also review how neuroimaging findings relate to objective and self-reported cognition and clinical and treatment factors, and discuss potential approaches currently being investigated to treat CRCI. Upon conclusion of this course, learners will be able to:

- 1. Explain commonly affected cognitive domains after non-CNS cancer and treatment
- 2. Discuss structural and functional brain changes related to cancer, chemotherapy, and other treatments
- 3. Describe treatment interventions being investigated to treat cancer- and treatment-related cognitive symptoms.

CE Workshop 08: Theory and Practice in the Design and Evaluation of Cognition-Oriented Treatments in Aging and Dementia

Presenter: Alex Bahar-Fuchs

7:20 - 8:50am Thursday, 2nd February, 2023 Pacific Ballroom A

Abstract & Learning Objectives: Cognition-Oriented Treatments (COTs) such as cognitive training and rehabilitation are increasingly recognized for their potential benefits for older people at risk of or with dementia, as well as for people with other conditions. An effective and well-informed use of such approaches depends on researchers and clinicians developing a careful understanding of key theoretical assumptions and of practical considerations. The workshop will provide participants with background theory and practical knowledge related to the application of COTs in research and practice, including review of the evidence, and demonstration of key principles in designing and delivering personcentered interventions likely to result in clinically meaningful outcomes. After attending this workshop, participants will be able to summarize the basic assumptions and techniques associated with different COTs, recognize important person and intervention-related factors likely to moderate treatment response, and able to apply those in designing COTs in research and clinical practice.

Upon conclusion of this course, learners will be able to:

- 1. Summarize basic theoretical assumptions and key techniques underpinning cognition-oriented treatments
- 2. Recognize key person-related and intervention-related factors moderating response to cognition-oriented treatments

3. Design appropriate clinical trials to evaluate cognition-oriented treatments

Student Liaison Committee (SLC) Student Welcome

7:30 - 8:30am Thursday, 2nd February, 2023
Pacific Ballroom C

Paper Session 01: Multi-cultural and diversity topics in adult populations

8:45 - 10:30am Thursday, 2nd February, 2023 Town & Country Ballroom C

Moderated by: Paola Suarez

1 Neuropsychological Assessment with Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) Individuals: Results from a Practice, Education, and Training Survey

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Objective: The field of clinical neuropsychology has increasingly recognized the importance of cultural and identity factors through the development of clinical, research, and educational initiatives. Only within the last 10 years have guidelines for psychological practice with lesbian, gay, bisexual, transgender, and queer (LGBTQ+) people included recommendations for neuropsychological assessment. However, it remains unclear to what extent neuropsychologists have acquired the knowledge and skills necessary to implement these recommendations. It is also unknown whether they engage in LGBTQ+ inclusive neuropsychological assessment. In this study, we surveyed the LGBTQ+ related education, training, and clinical practice of independently licensed neuropsychologists in the United States. We sought to understand the implementation of inclusive guidelines, including factors that predict affirmative neuropsychological assessment. We hypothesized that sexual/gender identities, female identity, recency of training, and LGBTQ+ related education would be associated with use of recommended practices. Participants and Methods: A workgroup of clinical psychologists with experience in LGBTQ+ psychology and neuropsychology developed a survey to identify personal and professional factors that predict LGBTQ+ affirmative neuropsychological assessment practices. The survey was distributed through professional organizations and listservs between August and September 2021 with 118 responses meeting inclusionary criteria. We used logistic, multinomial logistic, and ordinal logit regressions to examine unadjusted, univariate effects. Predictors included in the final, adjusted, univariate and multivariate models were those for which we had specific hypotheses and variables that predicted more than two affirming practice behaviors. Results: The majority of participants identified as heterosexual (70.3%), cisgender (97.5%), and female (66.1%). Participants reported obtaining their highest degree between 1977 and 2019. Most obtained a Ph.D. (73.7%), were not board-certified (69.5%), and worked primarily with adults (54.2%). Generally, participants reported having little experience working with LGBTQ+ patients. However, they reported greater exposure to lesbian, gay, and bisexual identities as compared to transgender and queer identities. Most (48-63%) received

LGBTQ+ training post-licensure. Between 19%