decrease of 2-point (p=.04) while cognitively healthy patients had a decrease in 1.08 points (p=.05) (Graph1). MOCA and NPI scores during hospitalization correlated significantly with cognitive decline in the four groups (r=.658, p<.01 and r=.439, p=.02, respectively.)

Results: From a total of 22 patients (12 C, 4 Dem, 2 D and 4 DD) delirium (D and DD groups) was associated with a worse score in MOCA of 3-points (p<.02) and 2.5-points (p<.03), respectively, at one year follow up. Dementia patients without delirium had a of 2-point (p=.04) while cognitively healthy patients had a decrease in 1.08 points (p=.05) (Graph1). MOCA and NPI scores during hospitalization correlated significantly with cognitive decline in the four groups (r=.658, p<.01 and r=.439, p=.02, respectively.)
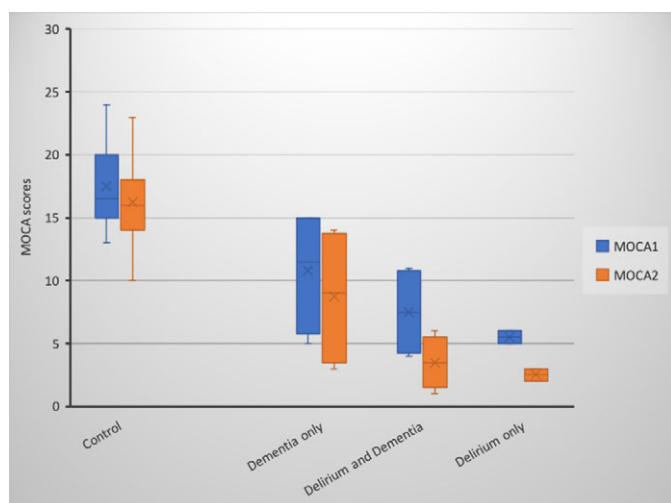
Conclusions: Individuals developing delirium while recovering from infection have higher rates of cognitive decline after one year, but the cognitive decline is also present to a lower extent for individuals with infections that did not develop delirium.

Disclosure: No significant relationships.
Keywords: delirium; cognitive impairment; Hospitalization; dementia

O195

Prevalence and nature of sexual violence in a gerontopsychiatric population in flanders

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doi: 10.1192/j.eurpsy.2021.380

Introduction: Sexual violence (SV) is an important public health concern which may induce important and long lasting mental health problems. However, studies on SV and its mental health impact on older adults and more specifically gerontopsychiatric patients are currently lacking.

Objectives: This study aims to contribute to a better understanding of the prevalence, risk factors and mental health impact of SV in a gerontopsychiatric patient population.

Methods: Between July 2019 and March 2020 100 patients (66%F, 34%M) participated in a face to face interview on health, sexuality and wellbeing during their admission at an old age psychiatry ward in one general hospital and two psychiatric hospitals across Flanders, Belgium. Participation rate was 58%. Interviews were performed by a psychiatric trainee and especially trained master students in medicine.

Results: 58% (65%F; 42%M) of the participants were sexually victimised during their life, 45% (51%F, 33%F) experienced hands-off SV, 43% (48%F, 33%M) sexual abuse with physical contact and 16% (6%M, 21%F) was raped. 7% were sexually victimised in the past year. Compared with non-victimized respondents, hands-on SV victims (incl. rape) described more symptoms of depression (p=0.007) and anxiety (p=0.003) and reported lower resilience (p=0.022).

Conclusions: SV appears to be common in the gerontopsychiatric population and is linked to even worse mental health outcomes. These findings confirm the long-lasting mental health impact of SV and highlight the importance of attention to (sexual) trauma in mental health care in old age.

Disclosure: No significant relationships.
Keywords: older adults; ageing; elder abuse and neglect; old age psychiatry

O197

Modeling the appearance and progression of cognitive impairment

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doi: 10.1192/j.eurpsy.2021.381

Introduction: It remains difficult to predict which individuals will develop cognitive impairment and progress to major neurocognitive disorders. Prevention studies suffer from the long time frames and the manner in which this topic does not lend itself to randomized, double-blinded controlled trials.

Objectives: We aimed to construct a computer simulation model that would accurate portray the time course for a series of individuals to develop cognitive impairment and to progress to major neurocognitive disorder.

Methods: We built a computer simulation model that incorporated the role of exercise, genetic load, age, quality of diet, presence of diabetes and level of hemoglobin A1C, ongoing levels of cognitive stimulation, presence or absence of micronutrients, presence or absence of other co-morbidities, an overall general health index, levels of smoking and other substance use, and family history. We modeled the life course of 10 individuals, adjusting parameters to make correct predictions for all 10 people. Then we entered the data