

**Objective:** The most recent treatment guidelines on delayed sleep phase disorder recommend the use of melatonin. However, these guidelines are in need of an update. Numerous systematic reviews and meta-analyses have since been conducted. This research aims to summarize all systematic reviews and meta-analyses investigating the efficacy of melatonin in delayed sleep phase disorder.

**Methods:** We performed a literature search using Pubmed, Embase, Cochrane Database of Systematic Reviews and Google. Characteristics and findings of all eligible systematic reviews and meta-analyses were summarised.

**Results:** Five reviews, which included trials up to 2014, were obtained. The timing of melatonin administration and outcomes of interest varied considerably amongst the trials. All of the reviews found improvement in sleep-onset latency, while two reviews noted advancement in melatonin onset time.

**Conclusions:** There is a need for more updated evidence exploring the use of melatonin in delayed sleep phase disorder. Future studies should also specify if they are evaluating the hypnotic and/or chronobiotic effects of melatonin and consider these in their design.

## **P178: Scope of post-diagnostic dementia care by Japanese primary care clinics using team-based care models**

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**Objective:** Primary care clinics (PCCs) in Japan have acquired the capacity for screening and diagnosing dementia in its early stage. They face challenges in accommodating the complex care needs of people with early-stage dementia in collaboration with other healthcare providers in the community. The study aims were; 1) to classify team-based care models of PCCs for post-diagnostic care for people with early-stage dementia in Japan's Community-based Integrative Care System and 2) to compare the scope of care in each model.

**Methods:** We conducted a cross-sectional postal survey to certified Dementia Support Doctors working in PCCs in Tokyo. To classify team-based care models, the questionnaire asked about the members, roles, and collaboration of the community-wide care team for early-stage dementia in which participants' PCCs were involved. We gathered information on care provision across seven domains that PCCs offered for people with early-stage dementia. Three-step latent class analysis was performed to classify models and analyze differences in the proportions of care provision in each domain. The Tokyo Metropolitan Institute for Geriatrics and Gerontology institutional review board approved the study.

**Results:** From the 188 responses, PCCs' team practices were categorized into three classes, which we named "co-managed," "carved-out," and "stand-alone" models. While the first two ran an extended care team through in-person communication across facilities in the community, the last applied a minimal team approach with limited and indirect external interaction. The "co-managed" and "carved-out" models were distinguished by how team members shared decision-making responsibilities for patient care. Maximum likelihood estimation grouped 46.6%, 32.8%, and 20.6% of the PCCs into each model in the above order. The three models significantly differed in the proportions of care provision in five of seven domains. The proportions in each domain were the highest for the "co-managed" model (60.7-100%), followed by the "carved-out" (46.2- 98.2%) and "stand-alone" (25.7-88.6%) models.

**Conclusion:** PCCs in Japan's Community-based Integrative Care System formed three models of post-diagnostic support for people with early-stage dementia. Considering the application of the team approach and the breadth

of care provision, either “co-managed” or “carved-out” models are recommended with available community resources in mind.

## **P181: Outreach initiative to promote healthy ageing: Experiences from a Geriatric Psychiatry Unit in India**

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**Aim:** To describe the experience, challenges and solutions in implementing an outreach initiative to promote healthy ageing

**Background:** Prevalence of mental health conditions in older adults is increasing rapidly in developing countries like India due to population ageing. UN Decade of Healthy Ageing (2021-2030) has been launched with focus on combatting ageism, promoting age friendly environment, integrated care and providing access to good quality long term care. Implementing interventions to promote healthy ageing in the Indian context has significant challenges in the background of limited availability dedicated elderly friendly health and social care systems.

**Methods:** Description of the outreach initiatives launched by the Geriatric Psychiatry Unit, Department of Psychiatry, National Institute of Mental Health and Neurosciences a tertiary care academic unit for old age psychiatry in India.

**Results:** A systematic and comprehensive outreach initiative for healthy ageing has been implemented over 2 years. The main objectives for the initiative includes promoting awareness about ageing and mental health, promoting age friendly environment, training of caregivers, volunteers and other stakeholders, psychosocial intervention in old age homes, promoting integrative medicine for healthy ageing and providing geriatric tele-psychiatry services. The important strengths of this initiative has been collaboration with non-governmental organizations, promoting active participation from older adults and volunteers, mobilizing resources through corporate social responsibility funding and effective use of technology.

**Conclusion:** The experience of implementing this outreach initiative has contributed to important learnings for the team. The proposed solutions to address the challenges in sustaining this initiative and scaling up to reach a larger population will be discussed.

## **P185: Comparison of social function in mild cognitive impairment and mild dementia using the Japanese version of the Social Functioning in Dementia scale (SF-DEM-J)**

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