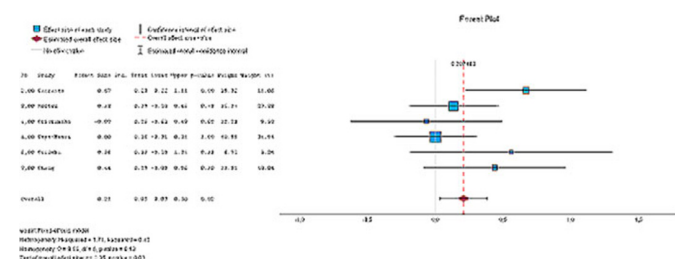


Objectives: This systematic review and meta-analysis aimed to evaluate the effectiveness of multi-component support programs on the caregiver burden of individuals caring for Alzheimer's patients.

Methods: The research was conducted through searches in five databases (CENTRAL, CINAHL, PsycINFO, PubMed, WOS), focusing on randomized controlled trials that met the inclusion criteria. Two researchers independently evaluated the full texts, assessing risk of bias with the Cochrane 'Risk of Bias-2' tool and evidence quality using the GRADE tool. Participants included individuals aged 18 and older who were the primary caregivers for those diagnosed with Alzheimer's disease and had provided care for at least three months. The intervention included at least two types of support, such as skill training, education, counseling, or therapy. The primary outcome was caregiver burden.

Results: The review included 8 studies overall. Among the 1147 participants, only one study was web-based, while the other seven interventions were conducted face-to-face. The components of the interventions were mainly educational, supportive, and skill-building, with only one intervention including respite care. Overall risk of bias assessment recorded one study with high risk, four with unclear risk, and one with low risk. The effect sizes of the interventions were calculated based on the means and standard deviations of caregiver burden scores before and after the intervention, as well as follow-up measurements. The multi-component intervention programs were found to have an uncertain short-term effect (Cohen's $d = 0.12$; 95% CI: -0.06 - 0.29; $p = 0.39$) but were effective in the long term (Cohen's $d = 0.21$; 95% CI: 0.03 - 0.38; $p = 0.02$). The certainty of evidence for caregiver burden outcomes was determined to be low before the intervention and follow-up, and very low from pre-intervention to post-intervention measurements. The data is current as of 12/12/2023.

Image 1:



Conclusions: Multi-component support programs are effective in reducing caregiver burden for Alzheimer's caregivers in the long term; however, more high-quality studies are needed to confirm this effectiveness.

Disclosure of Interest: None Declared

EPP686

Sexuality in the Elderly: Challenges and Opportunities

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Introduction: Sexuality in the elderly has become an increasingly important topic in healthcare as the global population continues to age, raising new challenges and considerations related to the quality of life and well-being of older adults.

Objectives: This work aims to explore the barriers faced by the elderly regarding sexuality and propose strategies for promoting healthy and fulfilling sexuality at this stage of life.

Methods: A narrative review was employed on the topic, aiming to broadly and exploratorily understand the main aspects related to sexuality in the elderly population.

Results: Recent studies suggest that sexual activity can remain an important part of life for older individuals, positively influencing both mental and physical health. The main obstacles to healthy sexuality in old age can be broadly categorized into physiological, psychological, and sociocultural factors. **Physiological changes** include a natural decline in hormone levels, such as estrogen in women and testosterone in men, leading to reduced libido, vaginal dryness, and erectile dysfunction. Chronic illnesses like cardiovascular disease, diabetes, and arthritis, along with medications for these conditions, can further impact sexual function. **Psychological factors**, such as anxiety, depression, and reduced self-esteem due to aging-related body changes, also play a significant role in diminishing sexual desire and activity. **Sociocultural factors** include long-standing societal taboos around older adults and sexuality, which can lead to embarrassment, reluctance to discuss sexual health issues, and feelings of shame. Healthcare professionals can adopt several strategies to improve sexuality in aging such as **open communication**. Regular sexual health assessments should be integrated into routine care, including questions about sexual function, relationship satisfaction, and any challenges faced. **Medical interventions**, such as hormone replacement therapy or treatments for erectile dysfunction can address physiological barriers. **Psychosocial support** can improve communication, body image issues, and mental health factors like anxiety or depression that often accompany aging.

Conclusions: The approach to sexuality in the elderly should be multifaceted, integrating biopsychosocial perspectives, with an emphasis on promoting sexual education and providing appropriate treatments that address individual challenges. Healthcare professionals should adopt a welcoming and open attitude, encouraging dialogue on this topic to improve the quality of life of older adults.

Disclosure of Interest: None Declared

EPP687

Cluster analysis of aging and sexual well-being: Insights from Portuguese and Spanish older adults

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Introduction: Aging well in a cross-cultural perspective may encompass pertinent challenges in terms of adjustment, sexual well-being and satisfaction with life in the late years.

Objectives: Considering the paucity of empirical data concerning cultural diversity of experiencing aging, this study aims to help fill this gap by assessing the specific patterns of sexual satisfaction,