

- **Managing uncertainly and attempting to create certainty through navigating knowledge.** Active ageing changed how participants viewed and dealt with MCI with attempts to clarify knowledge of dementia risk.
- **Being an active ager; actively able to be active and participate in active ageing.** Individuals demonstrated engagement through sharing achievements, ability and inabilities.

Conclusion: Active ageing is a collective habitus, with absence of clear knowledge and direction creating a mismatch between rhetoric and lived experiences of people with MCI. Ultimately results inform the development of concepts in social gerontological theory and active ageing

P43: Hormone therapy and the decreased risk of dementia in women with depression: a population-based cohort study

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Background: The literature has shown depression to be associated with an increased risk of dementia. In addition, hormone therapy can be a responsive treatment option for a certain type of depression. In this study, we examined the association between hormone therapy, including lifetime oral contraceptive (OC) use, and hormone replacement therapy (HRT) after menopause with the occurrence of dementia among female patients with depression.

Methods: The South Korean national claims data from January 1, 2005, to December 31, 2018, was used. Female subjects aged 40 years or older with depression were included in the analyses. Information on hormone therapy was identified from health examination data and followed up for the occurrence of dementia during the average follow-up period of 7.72 years.

Results: Among 209,588 subjects, 23,555 were diagnosed with Alzheimer's disease (AD) and 3023 with vascular dementia (VD). Lifetime OC usage was associated with a decreased risk of AD (OC use for < 1 year: HR, 0.92 [95% CI, 0.88–0.97]; OC use for ≥ 1 year: HR, 0.89 [95% CI, 0.84–0.94]), and HRT after menopause was associated with a decreased risk of AD (HRT for < 2 years: HR, 0.84 [95% CI, 0.79–0.89]; HRT for 2–5 years: HR, 0.80 [95% CI, 0.74–0.88]; and HRT for ≥ 5 years : HR, 0.78 [95% CI, 0.71–0.85]) and VD (HRT < 2 years: HR, 0.82 [95% CI, 0.71–0.96]; HRT for 2–5 years: HR, 0.81 [95% CI, 0.64–1.02]; and HRT for ≥ 5 years: HR, 0.61 [95% CI, 0.47–0.79]).

Conclusions: In this nationwide cohort study, lifetime OC use was associated with a decreased risk of AD, and HRT after menopause was associated with a decreased risk of AD and VD among female patients with depression. However, further studies are needed to establish causality.

P51: Correlation between skin conductance and anxiety in virtual reality

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Introduction: Despite the advantages of Virtual Reality (VR), the increase in anxiety caused by motion sickness makes it difficult to apply to patients with depression and anxiety. We studied correlation between skin conductance and anxiety in VR.

Methods: We conducted a clinical study of 81 healthy volunteers with high stress, which was defined as a score of 20 or more on the Perceived Stress Scale-10 (PSS-10). We used STAI-X-1 to measure anxiety, and Galvanic Skin Response to measure skin conductance. This study used an open, randomized, crossover design. The videos consisted of two types, less dizzying video (G1) and more dizzying video (G3). We divided into two groups with exposure order, G1 after watching G3 (Order 1), and G3 after watching G1 (Order 2).

Results: Anxiety significantly decreased in the Order 2 group ($p < 0.035$), whereas there was no significant change in anxiety in the Order 1 group. In both groups, skin conductance significantly increased after exposure to dizzying video. The skin conductance of the Order 1 group mean (SD) was 1.61 (1.07) ($p < 0.0001$), and the Order 2 group was 0.92 (0.90) ($p < 0.0001$). There was no significant difference between two groups ($p = 0.077$).

Conclusion: It is possible to reduce skin conductance and anxiety by viewing less dizzying VR video first and then viewing more dizzying video later.

P52: Gardening for others as meaningful activity for people living with dementia

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Objective: Time in nature is increasingly recognised as beneficial for people living with dementia, with research often focusing on the benefits of physical activity, proximity to natural environments and social interactions. However, limited research has investigated the role of purpose while gardening for people living with dementia. Purposeful activities are often lacking in programs for people living with dementia, who are sometimes excluded and have their capabilities underestimated, especially those with younger-onset dementia. Yet, these purposeful activities may be key to supporting people living with dementia to retain a sense of self-worth and connection to their communities.