Different singing groups in the United States. A qualitative and those leading the groups (n=10) across several dif
ticipants in singing groups (n=31), their caregivers (n=8),
was to understand the perceptions and experiences of par
leaders of the singing groups. The purpose of this study
study has sought to understand the perspectives of the
persons with PD (PwPD) and their caregivers (CGs) and
literature has explored perceptions of singing groups for
common treatment modality option that has been shown
to improve both motor and non-motor symptoms in PD
its prevalence is increasing. There is no cure, so symptom
ences between poor and good HRQoL in major bleeding
1.58, 95% CI: 1.05, 2.38). We found no significant differ
ratio [AHR]= 1.34, 95% CI: 1.00, 1.80) and death (AHR=
key covariates, poor HRQoL was associated with an in
200 participants (53% poor HRQoL). After adjusting for
pants, the mean age was 75.5 (SD: 7.1), 49% identified as
> 80 indicated good HRQoL. The clinical events included
of 0 to 100. AFEQT scores < 80 indicated poor HRQoL and
tween 2016-18 and followed until 2020. HRQoL was as
recruited from clinics in Massachusetts and Georgia be
address this gap, individuals with AF aged ≥ 65 years were
fibrillation (AF) to adverse clinical outcomes, little is known
Although there is a large body of literature linking atrial
related, mostly mild AEs, that were safely managed through
active interventions resulted in no serious related AEs and few
ulti with videoconference supervision, physical and cogni
for participants to continue in the study. When delivered vir
mild. There was only one serious AE, and it was unrelated to
mortality, and was associated with greater burden of health
e in nature. The majority (71.6%) of all AEs were unrelated
60% were urban. Of these participants, there was a total of
male. Forty percent were living in rural communities, and
8.9 years (SD 6.58), and the majority (76.7%) were fe
reviewed and managed by members of the research team,
curred during the intervention phase. All reported AEs were
verity, and relationship of the adverse events (AEs) that oc
imtaining at Home (SYNERGIC@Home/SYNERGIE~Chez soi) is
Brunswick) underwent 16 weeks (three sessions/week)
participants living in an Atlantic Canadian province (New
Synchronizing Exercises, Remedies in Gait and Cognition
Network, Saint John, New Brunswick, Canada
University of New Brunswick, Fredericton, New Brunswick,
University of New Brunswick, Fredericton, New Brunswick,
Samantha
Chris
Karla
COGNITIVE TRAINING
...
By 2040, over 9 million US adults will live with dementia. Understanding the relationship between risk factors and cognitive decline is critical to prevent disease and slow progression. Depression and cardiovascular disease (CVD) are independent risk factors for cognitive impairment (CI) which may interact, suggesting depression may play a mediating role in the relationship between CVD and CI, an hypothesis explored in this study. Data from the Systolic Blood Pressure Intervention Trial (SPRINT), a multi-center, randomized, controlled trial were used in this multivariate logistic regression analysis. CI was defined as adjudicated cases of mild CI and probable dementia. Depression was defined as a Patient Health Questionnaire-9 score ≥10 or current antidepressant therapy. We developed a CVD risk score using data from SPRINT participants and discretized the scores into tertiles. Of 9259 SPRINT participants, our analytic sample included 8456 who had adjudicated mild CI or dementia and had baseline depression scores. They were on average 68 years and 36% were female. After adjusting for age, sex, education, race, prior CVD, chronic kidney disease and treatment assignment, participants with high cardiovascular risk were more likely to have CI (OR: 1.55, 95% CI: 1.17-2.05). Participants with depression were more likely to have CI (OR: 1.29, 95% CI: 1.05-1.58) however, the interaction between cardiovascular risk and cognition was not significant. Findings from this study suggest that while depression and CVD are associated with CI, depression may not explain the CVD-CI relationship. More research is needed to understand the relationship between depression, CVD and CI.