

Results: While VO₂max scores of group 2 were better than group 1 ($p=0.001$) significantly, TUGT scores were similar in both groups ($p>0.91$). There was a significant difference between groups in terms of physical function ($p=0.001$), general health (GH) ($p=0.001$), vitality (VT) ($p=0.001$), role-emotional ($p=0.013$), mental health ($p=0.048$). However Groups were similar with regard to bodily pain (BP) ($p=0.124$), role-physical ($p=0.260$), social function (SF) ($p=0.956$) parameters of SF-36 questionnaire ($p>0.05$). On the other hand, a significant relationship was found between VO₂max and GH, VT, SF. TUGT was significantly correlated with BP, GH, VT, SF ($p<0.05$).

Conclusion: In this research it was concluded that high PAL increases VO₂max level and quality of life in community dwelling elderly.

Keywords: aging; physical activity; cardiorespiratory; fitness.

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Fatih district of geriatrics study: effective factors on depressive mood in elders living in the community

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Background: Geriatrics syndromes are clinical status that related morbidity and mortality. The prevalence of geriatric syndrome, have been reported in the elderly admitted to the polyclinic or hospitalized in our country. However, there is no similar study reported on the elderly living in the community in the field. Within this scope, a screening study was organized on the elderly living in the community in Istanbul Province, Fatih District. Depression is increasing incidence of aging and is a problem which plays an important role for morbidity and mortality in elderly. In this report the effective factors on depressive mood in the elderly who evaluated in geriatric study was investigated in Fatih district.

Methods: The elders who lives in Fatih/Istanbul were chosen by cluster sample. The third and fourth grade students of Istanbul Faculty of Medicine were served as interviewers. Interviewers took the standard training about measurement. The elders who is age of between 65 and 101 were taken for research. Cognitive states were screened with GDS-SF to measure of life quality were surveyed EQ5D, we evaluated with KATZ Activities of Daily Living Scale (ADL), LAWTON-BRODY Instrumental Activities of Daily Living Scale. Disease, number of drugs, hypertension (HT), diabetes mellitus (DM) and hyperlipidemia have been noted.

Results: 204(94 males, 110 females) elderly person were taken to the study. The average of age was 75.4 ± 7.3 years. It is summarized that demographic, cognitive, mood, functionality, verifies quality of life assessment mutual distribution among the sexes in research population. Illiteracy rates ($p=0.04$), female gender ($p<0.001$) demands diagnosis and positive scanning of cognitive disorders ($p=0.04/p<0.001$), dependence on ambulation ($p<0.001$), fear of falling ($p=0.001$), the prevalence of chronic pain ($p<0.001$), uriner incontinans ($p<0.001$), malnutrition ($p=0.002$) are more common in depressed patient. But there is no significant difference for the presence of fall DM HT obesity. Depressive events were more elder, more morbidity, more using drugs and scores of fragility are higher score of ADL, IADL, CDT, MNA, EQ5D and subjective health situation were less than other people. Depressive mood related factors in regression analyze (the dependent variable is depressive scanning positive, the independent variables are age, gender, education, the number of drug and disease, malnutrition, fragility the presence of cognitive disorders, DLA scores, life quality score) female sex ($p=0.027$) the cognitive of screening test positive ($p=0.005$) and low quality of life was ($p=0.014$).

Conclusion: Female gender, cognitive disorder, poor quality of life are outstanding risk factor for depressed mood in elders who live in

society mood situation assessment is specially important in elders who have this risk factor.

Keywords: elderly; geriatric; depressed mood; daily living activities.

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Is inspiratory muscle strength related with functional capacity?

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Introduction: The decrease in inspiratory muscle strength may affect the respiratory health, especially in the elderly. Generally, the handgrip strength is used as functional capacity indicator. Thus, our objective was to verify inspiratory muscle strength in a sample of elderly and investigate possible associations with measured handgrip strength.

Methods: Maximal inspiratory pressure (MIP in cmH₂O) was assessed using a dynamometer for respiratory muscles (MicroRPM[®]), whereas handgrip strength (HG in kg) was evaluated using a hydraulic dynamometer (JAMAR[®]). Body mass index (BMI in kg/m²) was calculated from weight (kg) and height (m). The association between MIP and HG was analysed based on Spearman's rank correlation coefficient for $p<0.05$.

Results: A sample of 21 older day-care center attendants (2 males and 19 females) aged 79 ± 6 years old with a BMI (29.6 ± 3.5 kg/m²) were assessed. MIP scored 64.0 ± 19.8 cmH₂O for males (around 65% of the expected 98.2 ± 2.7 cmH₂O) and 39.1 ± 19.5 cmH₂O for females (around 60% of the expected 64.1 ± 3.2 cmH₂O). Moreover, a HG of around 30.0 ± 9.9 kg and 24.2 ± 3.9 kg was obtained for males and females, respectively, which were below average for both genders. Lastly, a positive relation indicator between HG and MIP was attained with $p=0.001$ and $r_s=0.660$.

Conclusions: Results suggest an association between the diminishing of MIP and the decreasing of the functional capacity measured by the HG, indicating the importance of inspiratory muscle training in elderly. Nevertheless, further studies with larger samples are recommended to validate these results.

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Immigrants in geriatric rehabilitation: assumptions and opinions about self-reliance and healthcare

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Introduction: In our multicultural society, cultural diversity is an increasingly important topic in healthcare. Standards and values about self-reliance and healthcare is influenced by cultural aspects. It is unknown which cultural aspects are important in geriatric rehabilitation, and whether the current geriatric care offered is in line with frail elderly immigrants expectations.

Methods: The goal of this qualitative research is to explore assumptions and opinions about geriatric rehabilitation, provision of care and cultural aspects of healthcare. Included patients were admitted in geriatric rehabilitation for stroke or hip fracture in one of the three participating skilled nursing facilities. All patients were living at home and were not diagnosed with cognitive disabilities before admission. All underwent a semi-structured interview.

Results: Interviews with 9 patients were analysed. Two types of patients were identified: (1) Patients with a high self-reliance, who are still in working life and have a spouse. They actively participate in rehabilitation. (2) Patients with a low self-reliance, most of whom are without a spouse. Goal of rehabilitation was often unclear and participation in rehabilitation was low. There is an overall preference for provision of care by informal caregivers when patients need help with their (instrumental) activities of daily living.

Conclusions: Broadly 2 types of patients could be identified during rehabilitation. In both groups the knowledge and purpose of geriatric rehabilitation before admission was low or absent. Language-barrier