

Are trauma-related intrusions worse among war survivors in late-life? Associations with cognitive decline.

P#2981

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Older old-people may have greater trauma-related intrusive symptoms than younger peers, which appears to be associated with cognitive mechanisms.

INTRODUCTION

❖ Exposure to traumatic events can lead to long-lasting intrusive memories across the lifespan (Brewin et al., 2010).

❖ Executive functions, including inhibitory control, support the regulation of intrusive memories

❖ It remains unclear whether age-related cognitive decline following early-life war exposure influences the severity of intrusions in later life.

This study examined associations between age, trauma-related intrusions, and cognitive function in older adults exposed to war.

METHODS

Thirty-four participants (Mean AGE=75.85 years, SD= 11.05; Mean EDUCATION=11.11, SD=4.21; 58.82% female).

Exposed to conflict periods in Cyprus, including

- ❖ the British Occupation (1878-1960),
- ❖ the subsequent civil conflict (1955-1959), and
- ❖ the Turkish Invasion (1974)

Data:

- ❖ sociodemographic information
- ❖ Impact of Events Scale-IES (IES; Weiss & Marmar, 1997)
- ❖ Addenbrooke’s Cognitive Examination -Revised (ACE-R; Mioshi et al., 2006).

RESULTS

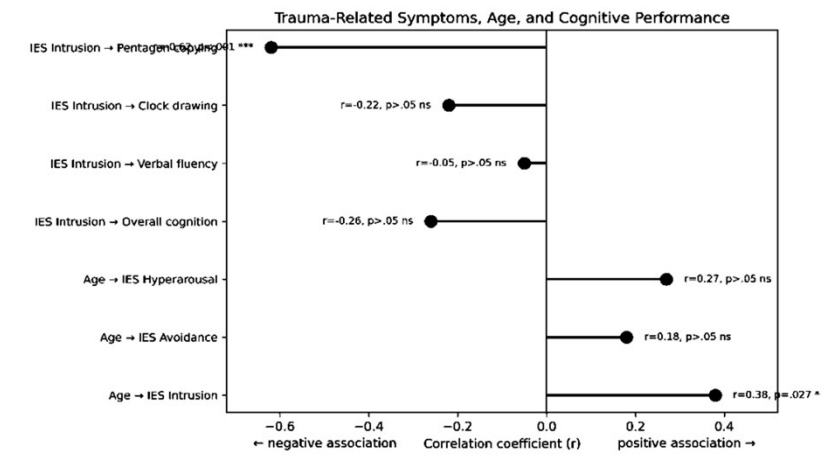
Age was positively correlated with IES Intrusion scores ($r(32)=.38, p=.027$).

Associations between age and IES Avoidance ($r(32)=.18, p>.05$) and IES Hyperarousal ($r(32)=.27, p>.05$) were not statistically significant.

IES Intrusion scores were not significantly associated with overall cognitive performance ($r(34)=-.26, p>.05$), nor with executive-related tasks, including verbal fluency ($r(28)=-.05, p>.05$) and clock drawing ($r(28)=-.22, p>.05$).

However, a negative correlation was observed between IES Intrusion scores and pentagon copying ($r(28)=-.62, p<.001$).

A visual representation can be found in the graph below.



Note. Preliminary sample: N=34. * p<.05; *** p<.001; ns = not significant. Pentagon copying showed the strongest association with IES Intrusion scores.

CONCLUSION

Older age was associated with greater trauma-related intrusive symptoms, although the underlying mechanisms remain unclear. The results may indicate a link between visuospatial processing and intrusive thoughts; however, these findings are preliminary and should be interpreted with caution, as data collection is ongoing.

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