

pain that can be recurring and severe, which are associated with decreased quality of life. This study aims to characterize overall symptom load by utilizing the Brief Symptom Scale in community dwelling older adults who experience mild to severe pain. Data were extracted from the UAB Study of Aging II, a prospective, population-based study of mobility among community-dwelling older adults 75 years and older. Self-reported pain in the past 4 weeks and symptoms (e.g., pain, tired, nausea, depression, anxiety, shortness of breath) were included. The SPSS version 27.0 statistical package was used for analysis. Sixty-six percent were Non-Hispanic White, 58% were female, 40% lived in housing designed especially for the disabled, 49% were widowed, and 30% had a High School degree or GED. The mean age was 81 years (standard deviation 4.8). Of interest, over one third of the sample (38.1%) experienced moderate to severe pain, upper back pain was the most common area where pain occurred and feeling tired was the most common symptom. As the aging population continues to increase, so will the prevalence rates for pain. Findings suggests older adults with pain have multiple concomitant symptoms. Because the elderly represents a fragile and large group of the population, it is important to pay close attention to these symptoms.

#### THE MODERATING ROLE OF DEPRESSION ON MOMENTARY PAIN-AFFECT ASSOCIATIONS IN OSTEOARTHRITIS

Emily Behrens,<sup>1</sup> Kyrsten Hill,<sup>2</sup> Dylan Smith,<sup>3</sup> Jason DeCaro,<sup>4</sup> Brian Cox,<sup>4</sup> and Patricia Parmelee,<sup>5</sup>  
 1. *University of Alabama, Alabama, United States*, 2. *The University of Alabama, Tuscaloosa, Alabama, United States*, 3. *Stony Brook University, Stony Brook, New York, United States*, 4. *University of Alabama, Tuscaloosa, Alabama, United States*, 5. *University of Alabama, University of Alabama, Alabama, United States*

Previous research has found a reciprocal relationship between pain and depression, in which each influences the severity of the other (Chou, 2007; Hawker et al., 2011, Kroenke et al., 2011; Schieir et al., 2009). Studies have found that depressed individuals exhibit stronger pain-mood associations than never-depressed individuals (Conner et al., 2006; Tennen et al., 2006). The current study investigated main and interactive effects of depressive symptoms on the momentary associations between pain and mood. Experience sampling (ESM) data was used from a multi-site study examining individuals with knee osteoarthritis (OA). Participants completed self-report measures of global depression and momentary pain, negative affect (NA), and positive affect (PA). Cross-sectional associations among momentary pain and affect were examined in a series of hierarchical multilevel models that nested the 28 ESM calls (Level 1) within participants (Level 2). A parallel set of multilevel models tested lagged associations among momentary variables. Depression significantly moderated the contemporaneous ( $p < .001$ ) and lagged ( $p < .003$ ) associations between pain and NA, suggesting that depression intensifies the momentary pain-NA linkage. There were no significant interaction effects for PA. These findings extend existing knowledge by illustrating how depressive symptoms influence the everyday experience of OA pain and its impact on affective well-being. (Supported by AG041655, P. Parmelee and D. Smith, Co-PIs)

## Session 9415 (Poster)

### Personality

#### A COORDINATED ANALYSIS EXAMINING THE ASSOCIATION BETWEEN PERSONALITY TRAITS AND COGNITIVE DISPERSION

Tomiko Yoneda,<sup>1</sup> Alejandra Marroig,<sup>2</sup> Emily Willroth,<sup>3</sup> Eileen Graham,<sup>3</sup> Scott Hofer,<sup>1</sup> Daniel Mroczek,<sup>3</sup> and Graciela Muniz-Terrera,<sup>4</sup> 1. *University of Victoria, Victoria, British Columbia, Canada*, 2. *Universidad de la República, Uruguay, Instituto de Estadística, Universidad de la República, Montevideo, Uruguay*, 3. *Northwestern University, Chicago, Illinois, United States*, 4. *University of Edinburgh, Edinburgh, Scotland, United Kingdom*

Cognitive dispersion is the degree of within-person variation in performance across cognitive tasks at the same testing occasion. Existing literature indicates that cognitive dispersion may be an early marker of poor brain health, dementia and mortality. Limited research, however, has examined individual differences in cognitive dispersion. Although personality traits are associated with individual differences in cognitive functioning, no research has examined personality and cognitive dispersion. In this project, we execute a pre-registered, coordinated analysis of seven diverse, international longitudinal studies of aging (Ntotal=33,581; mean age range=56.4-71.2) to investigate the extent to which the Big Five personality traits are associated with cognitive dispersion. For methodological approach, see [osf.io/wrnjq/](https://osf.io/wrnjq/). Cognitive dispersion scores were derived from cognitive test results, and independent linear regression models were fit independently in each study to examine personality traits as predictors of dispersion scores, adjusting for mean cognitive performance and socio-demographics (age, sex, education). Results from individual studies were synthesized using random-effects meta-analyses. Results revealed minimal evidence for associations between cognitive dispersion and personality traits in independent analyses or in meta-analyses. Based on the meta-analytic estimates, only higher levels of openness were associated with greater cognitive dispersion. Mean cognitive scores were negatively associated with cognitive dispersion across the majority of studies, indicating that individuals with higher mean performance had less dispersed cognitive scores. Our study contributes to the replicability and transparency efforts characteristic of open science by pre-registering our study and drawing on the collaborative network of the Integrative Analysis of Longitudinal Studies of Aging and Dementia (IALSA).

#### IMPACT OF PERSONALITY FEATURES AND INTERPERSONAL PROBLEMS ON ANXIETY AMONG OLDER ADULTS

Olivia Noel,<sup>1</sup> Daniel Segal,<sup>2</sup> Katie Granier,<sup>3</sup> Marissa Pifer,<sup>3</sup> and Lisa Stone,<sup>3</sup> 1. *Peak View Behavioral Health, Colorado Springs, Colorado, United States*, 2. *University of Colorado at Colorado Springs, University of Colorado at Colorado Springs, Colorado, United States*, 3. *University of Colorado Colorado Springs, Colorado Springs, Colorado, United States*