adults (OAs), less research has considered MHSUPs in hospice beneficiaries and their families. This secondary analysis filled this gap using the Health and Retirement Study's Core survey wave from 2014 and Exit wave data from 2016. These data are nationally-representative of OAs aged 50+. Each biennial wave introduces an experimental module to a random 10% of Core survey participants. One Core 2014 experimental module included self-report indicators assessing past MHSUPs, like depression and anxiety, using single items. Exit 2016 proxy-reported information about respondent deaths was used to create a decedent subsample. Descriptive statistics established MHSUP prevalence rates in OAs and their family. The self-report depression indicator was validated against the 8-item Center for Epidemiological Studies Depression Scale (CESD-8) at the ≥3, ≥4, and ≥5 cut points using $\chi 2$ analyses. The full sample's (N=1,461) average age was 68 years. Participants were mostly non-Hispanic (87.5%), White (72.8%), and female (59.7%). The decedent subsample (n=64) was bifurcated by hospice (54.7%) versus nonhospice (45.3%) utilization. Most participants in the full sample (63.9%), hospice decedent subsample (77.1%), and nonhospice decedent subsample (75.9%) endorsed at least one MHSUP. Depression and anxiety were the most common MHSUPs in each study sample. The CESD-8 was associated with the self-report depression indicator across all cut points (p<.001). Practitioners, policymakers, and researchers should consider the high prevalence rates of MHSUPs found in OAs and their families when designing programs, policies, and research.

TRAJECTORIES OF DEPRESSIVE SYMPTOMS IN COMMUNITY-DWELLING KOREAN OLDER ADULTS

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Objectives This study aimed to identify trajectories of depressive symptoms and investigate predictive variables of latent class in Korean community-dwelling older adults. Methods Study participants comprised 2,016 community-dwelling Korean adults aged over 65 years, using data from the Korean Longitudinal Study of Aging (KLoSA) from 2006–2016. The KLoSA, a nationally representative panel survey, has been conducted biannually since 2006. We used latent class growth analysis to identify depressive symptom trajectories. Multinomial logistic regression analysis was conducted to identify predictors of each class of depressive symptoms. Results Five depressive symptom trajectory groups were identified: Class 1, no depressive symptom (13.8%); Class 2, low depressive symptom (32.8%); Class 3, decreasing depressive symptom (10.6%); Class 4, increasing depressive symptoms (24.0%); and Class 5, persistent depressive symptoms (18.8%). We found that older adults followed five distinct depressive symptom trajectories over 10 years. Mini-Mental State Examination scores, number of chronic diseases, educational level, gender, current employment, contact with children, and social activity were associated with a higher risk of these trajectories. Conclusions Depressive symptoms are associated with social networks as cognitive function scores increase and number of chronic diseases decrease. Interventions to strengthening existing social networks and developing relationships should be tailored to target specific needs for each trajectory, and chronic disease

management, including cognitive function, may be beneficial in preventing depressive symptoms among older adults. KEYWORDS Older adults, Depressive symptom, Trajectory, Latent class growth analysis, Korean

SESSION 2887 (POSTER)

EPIDEMIOLOGY

ASSOCIATION OF VAGINAL MICROBIOTA WITH THE GENITOURINARY SYNDROME OF MENOPAUSE ACROSS REPRODUCTIVE STAGES

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The genitourinary syndrome of menopause (GSM) is a collection of signs and symptoms related to estrogen decline that involves physical changes to the vulva, vagina, and lower urinary tract. GSM signs and symptoms may occur during any reproductive stage but are most common during menopause. Vaginal microbiota, particularly Lactobacillus spp., protect the female genital tract from multiple conditions; however, Lactobacillus spp. abundance declines during menopause. We aimed to determine the longitudinal association of vaginal microbiota with GSM signs and symptoms across reproductive stages. In a two-year cohort study comprising 750 women aged 35-60 years who contributed 2111 semiannual person-visits, low-Lactobacillus spp. vaginal microbiota communities were observed at 21.2% (169/798), 22.9% (137/597), and 49.7% (356/716) of person-visits among pre-, peri-, and post-menopausal women, respectively (p<.001). After covariate adjustment, low-Lactobacillus spp. communities characterized by high Atopobium and Megasphaera relative abundance were associated with vulvovaginal atrophy relative to high-Lactobacillus spp. communities dominated by L. crispatus (OR[Odds Ratio]=3.04, 95% Confidence Interval[CI]=1.02-9.06) among post-menopausal, but not among peri- or pre-menopausal women. Also, post-menopausal women with low-Lactobacillus spp. communities reported decreased libido (OR=1.79, 95%CI=1.04-3.12) and vaginal dryness (OR=1.61, 95%CI=0.89-2.90) more frequently than their counterparts with high-Lactobacillus spp. communities, but not among peri- or pre-menopausal women (p for interaction<.05). Specifically, low-Lactobacillus spp. communities characterized by high Atopobium and Megasphaera relative abundance were related to both decreased libido (OR=2.82, 95%CI=1.11-7.14) and vaginal dryness (OR=3.50, 95%CI=1.18-10.44) compared with high-Lactobacillus spp. communities dominated by L. gasseri/L. jensenii. Vaginal microbiota, particularly Lactobacillus spp., and menopause may synergistically influence GSM.

DETERMINANTS OF SATISFACTION WITH HEALTH SERVICES BY DIMENSIONS OF CARE: AN AGE-STRATIFIED ANALYSIS

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