

investigates approximately 15% of all abuse, neglect, and exploitation reports in the country. Once abuse or neglect is substantiated, caseworkers design and implement a service plan for clients to reduce future risk; however, APS intervention effectiveness have not been extensively investigated. In partnership with San Francisco and Napa APS, risk and harm of abuse were measured by type using standardized items from the Identification, Services, and Outcomes Matrix, which is derived from the validated Elder Abuse Decision Support Short Form during case investigation (before APS interventions) and at case closure (after APS interventions). Data from 1,472 older adults' (on average 78 years old; 57% females) served by APS during the six-month pilot demonstration showed the reduction of risk/harm in self-neglect ( $p < .001$ ), neglect ( $p < .001$ ), emotional abuse ( $p < .001$ ), physical abuse ( $p = .002$ ), and financial abuse ( $p < .001$ ) after APS interventions. Effective interventions differ by type of abuse such that caregiver support ( $b = -.98$ ,  $p < .10$ ), emergency assistance ( $b = -1.14$ ,  $p < .05$ ), and client engagement ( $b = -1.85$ ,  $p < .05$ ) decreased self-neglect risk/harm; client engagement ( $b = -2.24$ ,  $p < .05$ ) decreased neglect by others risk/harm; case management services ( $b = -1.17$ ,  $p < .05$ ) decreased physical abuse risk/harm; and financial planning services ( $b = -3.99$ ,  $p < .05$ ) decreased financial abuse risk/harm. No services were identified as effective for emotional abuse. Since effective services differed by type of abuse, it is important to consider the etiology of abuse before implementing the services needed by older adults to effectively decrease harm/risk.

#### DETERMINING THE PREVALENCE OF SARCOPENIA IN AN INPATIENT GERIATRIC POPULATION USING EWGSOP2 OR FNIH DEFINITIONS

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Sarcopenia has been recognized as a progressive and generalized skeletal muscle disorder leading to loss of strength, muscle mass, and function. It is associated with an increased likelihood of adverse outcomes like falls, fractures, physical disability, and mortality. International consensus groups continue providing new definitions and clinical cut-off points despite over a decade of work in this area. Thus, the purpose of this research was to determine the prevalence of sarcopenia using two of the most current operational definitions (Foundation of NIH Sarcopenia Project (FNIH) and the European Working Group on Sarcopenia in Older Persons 2 (EWGSOP2)). Our cohort of acutely hospitalized older adults was formed from combining data from two randomized controlled trials and one cross-sectional observational study. Testing during hospitalization included measures of: demographics, body composition (DEXA), physical function tests, psychological wellbeing and independence questionnaires, and chart review. These were used to analyze the cohort according to three main groupings of low physical performance, low muscle strength, and low lean mass. We compared multiple tests and cutoffs for each of the three groupings under the FNIH and EWGSOP2 definitions, which varied 3% for low lean mass up to 48% for tests of low physical performance. After examining the efficacy of each cutoff, we evaluated the differences between FNIH and EWGSOP2. In our cohort, the prevalence of sarcopenia was

15.79% by EWGSOP2 and 13.59% by FNIH. The groupings within FNIH and EWGSOP2 were found to be near identical across almost all measures despite the definitions' discrepancies in cutoff points.

#### A TELEHEALTH DELIRIUM COACHING INTERVENTION FOR FAMILY CAREGIVERS OF OLDER ADULTS WITH ALZHEIMER'S DISEASE

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The purpose of this study is to develop and evaluate the feasibility of a telehealth coaching intervention for delirium prevention among family caregivers (FCs) of community-dwelling older adults with dementia. This study used an explanatory mixed methods design in which survey data was augmented with semi-structured interviews. A purposive sample of 20 older adult dyads participated. The intervention consisted of 6-weeks of telephone coaching sessions. FCs conducted daily delirium assessments. We employed correlations and GLM to investigate the relationships between variables and the outcomes. Results: The model showed a statistically significant positive correlation between the Human Connection Scale and the SF-36 pretest domain of general health ( $r = .47$ ,  $p = .04$ ). There were statistically significant positive correlations between the Human Connection Scale and the SF-36 posttest domains of physical functioning ( $r = .54$ ,  $p = .014$ ) and general health ( $r = .76$ ,  $p < .001$ ). There were a small positive changes in mean scores on each domain between the pre- and post-test scores on the SF-36. The most impressive findings came from FCs identification of delirium using the FAM-CAM. These participants had no history of delirium but 6 of 20 (30%) reported at least one episode of delirium. The qualitative data revealed that FGs found weekly coaching sessions beneficial and supportive. The results suggests that the intervention has a meaningful impact on how we assess delirium in the community and warrants further study.

#### ANGIOTENSIN (1-7) EXPRESSING LACTOBACILLUS DOSE-DEPENDENTLY BENEFITS THE GUT-BRAIN AXIS IN AGED RATS

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Aging is associated with gut dysbiosis – a condition linked with altered central nervous system function (i.e the “gut-brain axis”). Age-related health benefits have been ascribed to the renin-angiotensin system (RAS), mediated partially via the angiotensin (1-7) or Ang(1-7) axis. This pre-clinical study explored dosing of a genetically modified probiotic expressing Ang(1-7) – which we previously showed to induce dose-dependent increases in circulating Ang(1-7) – in modulating the gut-brain axis. Twenty-nine male F344BN rats were randomized at 24 months of age to receive oral gavage of Ang(1-7) Lactobacillus paracasei (LP) zero (control), one, three, or seven times/week over 28 days. At day 29, samples of feces, serum and pre-frontal cortex (PFC) were collected. Microbiome taxonomic analysis of fecal samples was performed via 16S-based PCR. Serum samples were analyzed for