

about the quality of the information, and approximately 70% had issues trusting health information from government agencies or diet programs. Six themes around key features for a digital nutrition intervention emerged: tailored and specific, inclusion of caregivers, promote self-efficacy, from a nutrition expert, contain a social element, and include a follow-up session. The results suggest that digital health interventions will need to be tailored to meet the needs of PwPD and their ICG.

#### THE INFLUENCE OF MULTIPLE FRAILTIES ON INSTITUTIONALIZATION AND MORTALITY IN COMMUNITY-LIVING OLDER ADULTS

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Frailty is a hallmark of accelerated aging, predisposing the older person to increased vulnerability to adverse health outcomes. Physical frailty is closely linked to other health dimensions, such as cognitive, psychological, and social functions. This study aims to examine the influence of multiple dimensions of frailty in predicting institutionalization and mortality. A nationally representative sample of Koreans 65 years or older from the Living Profiles of Older People Survey in 2008 was followed up for three years ( $n = 11,265$ ). Physical frailty was defined as being prefrail or frail using the Fried phenotype model. Those with cognitive impairment, depressive symptoms, and social vulnerabilities, in addition to physical frailty, were considered to have cognitive frailty, psychological frailty, and social frailty, respectively. The proportional hazards model was used to analyze the risk of institutionalization and mortality by the total number and different combinations of frailties, adjusting for covariates. More than half (50.1%) of the participants exhibited multiple frailties, with 8.1% concurrently displaying frailty in all four domains (mixed frailty). The risk of adverse outcomes was elevated with a higher number of frailties, with hazard ratios of 2.59 (95% confidence interval [CI]: 1.52, 4.42) for institutionalization and 3.40 (95% CI: 2.50, 4.63) for mortality among those presenting mixed frailty. Whereas psychological frailty demonstrated a stronger predictive ability of mortality than institutionalization, the reverse was observed for social frailty. Multiple frailties are prevalent in late life. Acquiring more frailties raises the risk of adverse outcomes, with varying effects according to multidimensional frailty profiles.

### SESSION 2917 (PAPER)

#### CHRONIC DISEASE AND MULTIMORBIDITY II

##### DUAL-TASK GAIT COST AND FRONTAL LOBE INTEGRITY IN POSTSTROKE: RESULTS FROM ONDRI

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Dual-task gait performance is a marker of motor-cognitive interactions modulated by the frontal lobes. After a stroke, gait disturbances are more evident, particularly when concurrently completing a mental task and walking, an effect called high dual-task cost (DTC). Following a stroke, the potential association of high-DTC, integrity of the frontal lobes and cognitive functioning is unclear. This study screened 161 participants with stroke history from the Ontario Neurodegenerative Disease Research Initiative (ONDRI)-cerebrovascular disease cohort ( $69.2 \pm 7.41$  years of age; 31.7% women). Individuals scoring zero in the National Institute of Health Stroke Scale were analyzed ( $n=102$ ). DTC was the percentage change in gait speed from the single to dual-task condition. Standardized normal-appearing white matter (NAWM) and grey matter (NAGM) volumes from superior, middle and inferior frontal lobe were compared between DTC quartiles (adjusted for age, sex, and education) using a multivariate model (MANOVA), with total frontal lobe volume as a covariate. Another model compared group performance across 5 adjusted cognitive domains (attention, memory, language, visuospatial performance, and executive functioning). Univariate tests revealed that NAWM volume in the superior frontal lobe ( $F=4.50$ ;  $p=0.005$ ; partial eta-squared=0.122) was significantly different across DTC quartiles. Contrast tests suggested that the first quartile had larger NAWM than the second and fourth. DTC quartiles also showed differences in attention ( $F=2.93$ ;  $p=0.03$ ; partial eta-squared=0.083) and contrast tests indicated that the first quartile performed significantly better than second and fourth. DTC poststroke may be a proxy for structural integrity of superior frontal lobe regions and attention.

##### OLDER U.S. ADULTS WITH NOCTURIA OFTEN CANNOT USE THE ONLY FDA-APPROVED DRUGS FOR THE CONDITION

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Nocturia, waking from sleep at night to void, is a common, bothersome symptom for which many older adults seek treatment. In 2017, the US FDA approved the first of two desmopressin analogues indicated for nocturia. While efficacious, these drugs can potentially cause severe hyponatremia that can be fatal, particularly if older adults have comorbid conditions (e.g., congestive heart failure, uncontrolled hypertension), laboratory abnormalities (e.g., low sodium, reduced renal function) and concomitant medications (e.g., diuretics, analgesics). Using secondary data from the National Health and Nutrition Examination Survey (NHANES) to identify a sample of U.S. adults 50 years and older with 2 or more nightly nocturia episodes, we determined the prevalence of contraindications, warnings, and need for more frequent