

PROPOSTA ABSTRACT CONGRESSO TAORMINA 2025

TITOLO: Subjective cognitive decline in Brazilian adults: a nationally representative cross-sectional analysis of social, lifestyle, and health-related associated factors from the ELSI-Brazil cohort

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ABSTRACT:

Introduction

Subjective cognitive decline (SCD) is considered an early stage of cognitive decline and a potential risk factor for dementia, although its associated factors may differ. This study aimed to investigate the association between selected dementia risk factors and SCD in Brazilian adults.

Methods

This cross-sectional study used data from wave 2 (2019-2021) of The Brazilian Longitudinal Study of Aging (ELSI-Brazil) on a nationally representative sample of Brazilian population aged ≥ 50 years. This is a research partnership between the University of Pavia, Italy, and the Federal University of Vale do São Francisco, Brazil. SCD was the outcome and defined as a self-reported cognitive decline without objective impairment or dementia diagnosis. Among the variables of interest, characteristics related to health, social and behavioral were considered, within a multidimensional health perspective. Adjusted logistic regression models were used to estimate odds ratios (OR) and 95% confidence intervals (CI) for SCD according to selected factors.

Results

Of the 6,631 participants, 57,5% women, 54,4% individuals of non-white race, with a mean age of 65.1 years (standard deviation: ± 9.70). A total of 1,346 (20.3%) individuals were classified as having SCD. Significant higher odds of SCD emerged with increasing age (OR=1.57; 95%CI: 1.19-2.09 for the older age group; p -value for trend <0.01), non-white race (OR=1.53; 95%CI:1.30-1.79), lower education (OR=2.79; 95%CI: 2.02-3.85 for the lowest compared to the highest level, p for trend <0.01), lower income (OR=1.58; 95%CI:1.14-2.21 for the lowest compared to the highest level; p for trend <0.01), loneliness (OR=1.35; 95%CI:1.15-1.59), and sedentary lifestyle (OR=1.33; 95%CI: 1.13-1.59). SCD was also associated with multimorbidity (OR=1.40; 95%CI:1.06-1.84 for 3+ compared to none chronic diseases), diabetes (OR=1.25; 95% CI: 1.02-1.53), visual loss (OR=1.31; 95% CI:1.11-1.56), hearing loss (OR=2.29; 95% CI:1.93-2.71), and depressive symptoms (OR=1.30; 95%CI:1.05 -1.60).

Conclusion

Social and racial determinants, lifestyle behaviours and specific health conditions are associated with SCD. Our findings highlight the need for targeted strategies to address early cognitive decline and health inequalities, especially among vulnerable populations in contexts that lack access to health care as well as social interactions and environments healthy.