PAIN AND DEPRESSION AMONG ASIAN AND NON-HISPANIC WHITE AMERICANS WITH KNEE OSTEOARTHRITIS
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There are 17.3 million Asians in the United States, and the Asian American was the fastest growing ethnic group in the United States between 2000 and 2010, increasing by 46%. However, to date, the relationship between pain and psychological variables (e.g., depression) in Asian Americans, is unclear. Thus, the purpose of this study was to examine whether depression mediated racial differences in knee osteoarthritis (OA) pain between Asian Americans and non-Hispanic whites (NHWs). Data were collected from 50 Asian Americans ages 45-85 and compared to age- and gender-matched NHWs with knee osteoarthritis pain. The Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) was used to assess the severity of knee pain, and the Center for Epidemiologic Studies Depression Scale (CES-D) was used to measure depression. Participants had a mean age of 55 years (SD = 8 years), and the majority were female (62%). Results indicated that Asian Americans had higher levels of pain and depression compared to NHWs (P < .01 for both). Moreover, depression significantly mediated the group difference in pain (percentile bootstrap 95% Confidence Interval 3.13 – 10.95). This meditational analysis suggests that depression may contribute to the higher OA pain in Asian Americans. Alternatively, it could also be argued that greater OA pain contributes to higher depression in Asian Americans. These findings add to the growing literature regarding ethnic and racial differences in pain and its associated psychological conditions. Whether interventions that improve the depression of Asian Americans affect pain is in need of investigation.

THE 10-ITEM KESSLER PSYCHOLOGICAL DISTRESS SCALE (K10) AND THE 7-ITEM GENERALIZED ANXIETY DISORDER SCALE (GAD-7): SCREENING INSTRUMENTS FOR A POPULATION OF OLDER ADULTS
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Screening tools that appropriately detect older adults’ mental disorders are of great public health importance. The present study aimed to establish cutoff scores for the 10-item KesslerPsychological Distress (K10) and the 7-item Generalized Anxiety Disorder (GAD-7) scales when screening for depression and anxiety. We used data from participants (n=1811) in the Enquête sur la Santé des Aînés-Service study. Depression and anxiety were measured using DSM-V and DSM-IV criteria. Receiver operating characteristic (ROC) curve analysis provided an area under the curve (AUC) of 0.767 and 0.833 for minor and for major depression when using K10. A cutoff of 19 was found to balance sensitivity (0.794) and specificity (0.664) for minor depression, whereas a cutoff of 23 was found to balance sensitivity (0.692) and specificity (0.811) for major depression. When screening for anxiety with GAD-7, ROC analysis yielded an AUC of 0.695; a cutoff of 5 was found to balance sensitivity (0.709) and specificity (0.568). No significant differences were found between subgroups of age and gender. Both K10 and GAD-7 were able to discriminate between cases and non-cases when screening for depression and anxiety in an older adult population of primary care service users.

RELATIONSHIPS AMONG FUNCTIONAL ABILITY, DEPRESSION, AND QUALITY OF LIFE AMONG NURSING HOME RESIDENTS IN CHINA: A MEDIATION ANALYSIS
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The importance of physical function and depression on quality of life among older adults has gained increasing attention; however, little research has examined a mediating role of depression on the relationships between physical function and quality of life in nursing homes. This study aimed to examine the relationship between physical function and quality of life mediated by depression based on the Wilson-Cleary model of health-related quality of life. Given the different mechanisms influencing quality of life (QoL) by age, two-group path analysis was conducted to examine the mediating effects of depression on the relationship between activities of daily living (ADL) and QoL (physical QoL and mental QoL). A total of 231 older adults (≥ 60 years) were cognitively intact were recruited from 7 nursing homes in Southeast China. The findings included the following: In the group of young-middle older adults (60 ≤ age < 85), ADL was directly related to the physical and mental quality of life, which relationships were partially mediated by depression. In the group of older old adults (age ≥ 85), ADL was directly associated with physical quality of life but also partially mediated by depression, while the relationship between ADL and mental quality of life was fully mediated by depression. This study provides insight into the different mediating effects of depression on the relationship between ADL and QoL by age groups. Nursing home staff should include depression related interventions aimed at reducing the impact of ADL function on mental quality of life in more old residents.

RELATIONSHIP BETWEEN ANXIETY & DEPRESSION AND RISK FOR INTRACRANIAL ANEURYSM RUPTURE
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Although the prevalence of preoperative aneurysm rupture (PAR) is only 2%–3.2%, PAR is very dangerous, resulting in subarachnoid hemorrhage with high morbidity and mortality. Previous studies have shown that the fluctuation of blood pressure and heart rates are closely related to intracranial aneurysm rupture but did not examine if pre-operative anxiety and depression plays a role in PAR. The purpose of this study is to examine the relationship of anxiety & depression and risk of PAR. A retrospective case-control design was employed. Sixty-six subjects were recruited from an