

## Fitness and frailty in adults linked to health outcomes

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The prevalence of frailty, which is linked to earlier death, increases throughout adulthood as people age and not just after age 65, found an article in *CMAJ* (*Canadian Medical Association Journal*). Relatively good fitness levels at all ages were predictive of lower mortality and less reliance on health care services.

Frailty in medical terms refers to a person's health status and the risk of adverse events related to various health conditions. It is usually associated with <u>older adults</u>.

The researchers sought to understand the impact of age on fitness and frailty, the profile of relatively fit people aged 15 to 102 compared with frail adults and the impact of fitness and frailty related to age and sex on mortality. They looked at data on 14 713 people, of whom 54% were women, over a 12 year period from 1994-95 to 2006-07 with two-year monitoring intervals. A Frailty Index, used to grade risk, rated people's health levels and the accumulation of health deficits. These included diseases, disabilities (e.g. needed help with meal preparation), symptoms (e.g. hearing impairment), allergies and other conditions.

Most participants (7183) reported fairly high relative fitness at the start of the study compared with 1019 who were frail. These relatively fit people generally stayed healthy and those who were frail at the start were most likely to die. As participants aged, their frailty level increased.

"We found that the prevalence of frailty increased exponentially with



age throughout the adult life span and not just after age 65, where the sharpest inflection of the curve occurred," writes Dr. Kenneth Rockwood, Dalhousie University, and the Centre for Health Care of the Elderly, Halifax, Nova Scotia, with coauthors. "At all ages, relatively fit people had a lower mortality and used fewer <u>health care services</u>."

People with higher frailty levels used more <u>health care</u> services and the risk of institutionalization increased for the frailest.

"That deficits accumulate with age is not surprising; indeed, at the subcellular level, this is said to be how aging occurs," write the authors. "Our data suggest that deficit accumulation is a fact of aging, not age, and that the antecedents of frailty in late life manifest at least by middle age."

The authors suggest a more integrated approach to managing frail patients is required given the complex nature of <u>frailty</u>.

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