

Frailty among older heart patients helps predicts severe outcomes

May 4 2015

Frailty among older people with cardiovascular disease appears to be more predictive than age for gauging their risk of heart attack, stroke and death, according to an international study that included researchers at Duke Medicine.

Publishing online in the issue of *European Heart Journal: Acute Cardiovascular Care*, the researchers noted that [frailty](#) is easily diagnosed and should be used in addition to the current scoring system that stratifies patients with [acute coronary syndrome](#).

"What we found was very powerful: even if you account for standard medical risks, frailty added more risk for a major cardiovascular event," said senior author E. Magnus Ohman, M.D., the Kent and Siri Rawson Director of the Program for Advanced Coronary Disease at Duke University School of Medicine. "Frailty is not hard to assess. We as physicians don't usually incorporate that into our thinking, and our study suggests that we should."

Ohman and colleagues used data collected during a large, international trial called TRILOGY ACS, which studied high-risk patients with unstable angina who were managed with medications rather than a procedure to open blocked vessels.

Nearly 28 percent of TRILOGY ACS participants over the age of 65 were classified as frail or pre-frail based on self-reported responses to five key questions: Had they experienced weight loss, decreased grip

strength, exhaustion, slower walking pace and declining activity levels?

The researchers found that 39.7 percent of patients with frailty were likely to experience cardiovascular death, [heart attack](#), or stroke events compared to 23.1 percent of non-frail patients.

Among frail patients, nearly 40 percent had a cardiovascular event over 30 months of follow-up and one in four experienced [cardiovascular death](#).

"Frailty may characterize older populations better than chronological age alone," Ohman said. "Incorporating frailty assessment is an important measure of patient vulnerability."

More information: "Frailty is associated with worse outcomes in non-ST-segment elevation acute coronary syndromes: Insights from the TaRgeted platelet Inhibition to cLarify the Optimal strateGy to medically manage Acute Coronary Syndromes (TRILOGY ACS) trial." *European Heart Journal: Acute Cardiovascular Care* 2048872615581502, first published on April 20, 2015 [DOI: 10.1177/2048872615581502](#)

Provided by Duke University

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