

New frailty index may help determine adverse outcomes in older patients after hospital discharge

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A new frailty index shows promise in determining how acute illness affects functional ability in older patients admitted to hospital, according to a new study in *CMAJ* (*Canadian Medical Association Journal*) co-led by researchers from Dalhousie University, Canada, and University College London (UCL), United Kingdom.

Older, frail adults often lose the ability to function if they are admitted to [hospital](#) for a sudden acute illness. Understanding how to measure seniors' frailty in the context of their illness may help in providing them with specific supports after discharge from hospital.

Researchers used routine laboratory tests to create a frailty index (FI-Laboratory) linked to hospital outcomes data based on a group of adults admitted to University College Hospital, London, UK. A [higher score](#) on the FI-Laboratory was associated with an 18% increased likelihood of readmission and 45% increased likelihood of death when accounting for other health factors.

"Assessing clinical frailty in the acute care setting is difficult," writes Dr. Samuel Searle, Dalhousie University and MRC Unit for Lifelong Health and Ageing at UCL, with coauthors. "The FI-Laboratory can help to identify complex, acutely ill [older adults](#) at hospital admission who have accumulated multiple health deficits and are at an increased risk of adverse outcomes."

"By quantifying both acute and chronic deficits, the score may draw attention to risk that is not always apparent clinically," write the authors.

The authors note that although the FI-Laboratory is being studied in several [clinical settings](#), it is not yet known whether it will help improve clinical outcomes for patients.

"Complementing chronic frailty assessment at hospital admission with an electronic frailty index (FI-Laboratory) comprising routine blood test results" is published January 6, 2020.

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