

Frailty as important as age or underlying health issues in COVID-19 death risk

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Frailty is as important as either age or underlying health issues in determining whether someone may die from COVID-19, a new study has found.

The analysis of 1,564 [hospital patients](#) at 10 sites in the UK and one in Italy by specialists in geriatric care suggests increasing [frailty](#) is linked to a higher risk of death and longer time spent in hospital.

The study, published today in *The Lancet Public Health*, was carried out by researchers from Cardiff University, King's College London, and the University of Aberdeen among others. It is the first to explore the impact of frailty on death risk in the current pandemic.

The researchers said their findings showed frailty assessment was crucial to inform clinical decisions in COVID-19 treatment and urged its use as a key indicator to assess a patient's risk of dying.

Chief investigator and lead author Dr. Jonathan Hewitt, from Cardiff University's School of Medicine, said: "NICE guidelines put in place in March already recommend using frailty to assess COVID-19 patients but we don't know how much this is being used in practice.

"Our study shows it is vital to frontline care; every COVID-19 patient should be assessed for frailty because we now know that being frail no matter how old you are or what underlying conditions you may have affects your chance of recovery from this disease.

"Up until now the focus has been on age and other [health](#) issues but we believe this should now shift to frailty to make sure patients are receiving the appropriate, targeted treatment."

Frailty is a clinical condition signified by a loss of reserves, energy and wellbeing that leaves people vulnerable to sudden changes in health and at risk of hospital admission, the need for long-term care or death. About 40% of the UK population are classed as frail.

The aim of the COPE (COVID-19 in Older People) study was to establish the prevalence of frailty in COVID-19 patients—and investigate its influence on mortality and length of hospital stay.

The study showed that patients who were considered to be severely frail were 2.4 times more likely to die from COVID-19 than those who weren't assessed as frail, after accounting for age, other health problems and the severity of illness when patients were admitted to hospital.

Dr. Ben Carter, lead epidemiologist on the study from the Institute of Psychiatry, Psychology and Neuroscience, King's College London, who co-ordinated the research, said: "With the measures in shielding being relaxed in coming months and the ongoing possibility of a second wave of COVID-19 it will be important to have a meaningful indicator to help inform decisions as to who may have to shield again.

"In this study we have shown the value of frailty in assessing the risk of death from COVID-19 and believe that it could provide helpful insight into if and when people may have to shield again in the future."

One of the senior authors, Professor Phyo Myint, Chair in Old Age Medicine at the University of Aberdeen added: "As we get older we become frailer but not all older people are frail.

"Our finding that frailty is associated with poor mortality outcome in patients with COVID-19 independently of either age or underlying [health issues](#) is important. Frailty should form part of routine assessment in determining whether someone may die from COVID-19 to inform future responses to COVID-19 as we move through the pandemic."

More information: Jonathan Hewitt et al. The effect of frailty on survival in patients with COVID-19 (COPE): a multicentre, European, observational cohort study, *The Lancet Public Health* (2020). [DOI: 10.1016/S2468-2667\(20\)30146-8](#)

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