

Deficits in geriatric assessment prevalent in seniors with IBD

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Older patients with inflammatory bowel disease (IBD) have high

prevalence of deficits in geriatric assessment, according to a study published in the May issue of *Clinical Gastroenterology & Hepatology*.

Vera E. R. Asscher, M.D., from Leiden University Medical Center in the Netherlands, and colleagues conducted a [prospective cohort study](#) involving 405 outpatients with IBD aged 65 years or older to examine which IBD characteristics associate with deficits in geriatric assessment. Somatic domain, impairment in activities of daily living, physical capacity, and mental and social domains were assessed. Deficits in geriatric assessment were defined as two or more abnormal domains; moderate deficits were defined as two or three impaired domains and severe deficits involved impairment in four or five domains.

The researchers found that the somatic domain and activities of daily living were most frequently impaired (51.6 and 43.0 percent, respectively). Overall, 39.5 and 7.9 percent of [patients](#) had moderate and severe deficits in their geriatric assessment, respectively. Clinical and biochemical disease activity was associated with deficits (adjusted odds ratios, 2.191 and 3.358, respectively). There was an independent association observed for deficits in geriatric assessment with lower health-related quality of life.

"Our findings underline the importance of assessing the presence of frailty in older patients with IBD, as the prevalence of geriatric deficits we found is high," the authors write. "As the population ages, we should strive to work towards a multidisciplinary evaluation of [older patients](#) with IBD to aim for the best possible treatment goals, while accounting for biological age-based [risk factors](#)."

More information: [Abstract/Full Text](#)

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