

## Visualisation détaillée de la communication

Titre:	<b>Frailty, chronic diseases and disability in the youngest old: An insight from the Lausanne cohort Lc65+</b>
Session:	<b>B2: Grands défis, grandes études</b>
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Heure de la présentation:	<b>16:20 - 16:35</b>
Session (salle):	<b>B2</b>
Auteur/Intervenant:	<b>Danon-Hersch, Nadia</b>
Organisation/institution:	<b>IUMSP Lausanne</b>
Co-auteur 1:	<b>Nicolas Rodondi, Department of Ambulatory Care and Community Medicine, University of Lausanne, Switzerland</b>
Co-auteur 2:	<b>Jacques Spagnoli, Institut universitaire de médecine sociale et préventive, CHUV</b>
Co-auteur 3:	<b>Brigitte Santos-Eggimann, Institut universitaire de médecine sociale et préventive, CHUV</b>

### **FRAILITY, CHRONIC DISEASES AND DISABILITY IN THE YOUNGEST OLD: AN INSIGHT FROM THE LAUSANNE COHORT LC65+**

#### **Background:**

While chronic diseases and disability are often measured for the surveillance of the health state of the youngest old, frailty has become a recognized dimension that independently predicts adverse health outcomes. Our aim was to estimate the prevalence of frailty, disability and chronic diseases in the Lausanne cohort Lc65+ at baseline and to identify the chronic diseases most frequently associated with pre-frailty.

**Design:** Cross-sectional analysis of a cohort study at baseline, non-institutionalized general population of Lausanne

**Participants:** 1422 individuals (59 % women) aged 65 to 70.

**Measurements:** Frailty was assessed according to the five criteria described by Fried *et al.*: shrinking, weakness, exhaustion, slowness and low activity (frailty:  $\geq 3$  criteria fulfilled, pre-frailty: 1-2). Medical diagnoses of chronic diseases and limitations in activities of daily living (ADL) were self-reported in questionnaires.

**Results:** At baseline, 35% of Lc65+ participants reported at least 2 chronic diseases (co-morbidity) and 6% reported ADL disability. The most frequent chronic diseases were hypertension (40%) and arthritis (35%). 1416 participants were classified as non-frail (72%), pre-frail (26%) or frail (2%). Across these 3 groups, there was a progressive increase in the proportion of women (respectively 57%, 64% and 72%,  $P=0.006$ ), in the prevalence of co-morbidity (28%, 49% and 78%,  $P<0.001$ ) and in the prevalence of ADL disability (2%, 13% and 59%,  $P<0.001$ ). Weakness was the most frequent frailty criterion (15%). When it was the only frailty criterion fulfilled, it was significantly associated with coronary heart disease, other heart diseases, diabetes and arthritis. Similarly, significant associations were identified between exhaustion and depression; slowness and osteoporosis.

**Conclusion:** While frailty and disability were rare, co-morbidity and pre-frailty were highly prevalent in the youngest old. The most prevalent frailty criterion was weakness and it was associated with the presence of cardio-vascular diseases. Longitudinal studies on the evolution of the pre-frail should explore the role of potential interactions between individual frailty criteria and specific chronic diseases.