



Association of executive function impairment, history of falls and physical performance in older adults: A cross-sectional population-based study in Eastern France

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Résumé en
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To estimate: 1) the association between executive function (EF) impairment and falls; and 2) the association of EF impairment on tests of physical function used in the evaluation of fall risk. Cross-sectional study. Thirteen health examination centres in Eastern France. Four thousand four hundred and eighty one community-dwelling older adults without dementia aged 65 to 97 years (mean age 71.8 +/- 5.4, women 47.6%). Participants underwent a comprehensive medical assessment that included evaluations of EF using the Clock Drawing Test and of physical performance using the Timed Up & Go Test (TUG). Analysis used multivariable modified Poisson regression to evaluate the association between impaired EF and each of the fall outcomes (any fall, recurrent falls, fall-related injuries). Multivariable linear regression was used to evaluate the association between EF impairment and performance on the TUG and grip strength. EF impairment, assessed using the clock drawing test, was present in 24.9% of participants. EF impairment was independently associated with an increased risk of any fall (RR=1.13, 95% CI (1.03, 1.25)) and major soft tissue fall-related injury (RR= 2.42, 95% CI (1.47, 4.00)). Additionally, EF impairment was associated with worse performance on the TUG (p < 0.0001). EF impairment among older adults without dementia was highly prevalent and was independently associated with an increased risk for falls, fall-related injuries and with decreased physical function. The use of the Clock Drawing Test is an easy to administer measure of EF that can be used routinely in comprehensive fall risk evaluations.

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