



Understanding Frailty and Dementia

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Frailty and dementia are “closely linked,” explain Song and colleagues in a recent article published in [JAMDA](#). In their study of more than 29,000 nursing home residents, the researchers found that more than half registered as frail on the frailty index (FI). Furthermore, increasing frailty correlates to higher risk of mortality, they noted. “The frailty index is a consistent and robust predictor of adverse outcomes,” note the authors.

Both residents with and without dementia may categorize as frail. Among those with dementia, the condition of frailty may interact with “neuropathological burden”. They also found that residents admitted without a diagnosis of dementia carried higher risks of developing dementia if they were frail. The average age of residents in their data set was 84.6.

What is frailty?

Song et al. define frailty as “an age-related health state of increased vulnerability to stressors that is also accompanied by a decline in function and reserve across multiple physiologic systems”. The frailty index is calculated as the number of deficits present divided by the total number of deficits queried. Deficits cover a range of symptoms, conditions, laboratory findings, and functional measures.

An overview of frailty by Clegg et al. published in [The Lancet](#) explains that frailty is a cumulative process emerging over time. Frailty compromises the body’s “homeostatic reserve,” increasing the impact of stressors such as a minor infection, a UTI, or a new drug regimen.

Resultingly, a condition of frailty can make a resident more likely to experience sudden changes in status, such as a fall or delirium, state the authors. It can fuel disability and create day-to-day variability in functional abilities. Like Song et al., these authors note an association between frailty and cognitive decline, as demonstrated by ongoing research.

Statistically, the impact of frailty relates to the total number of deficits on the FI, they add. They speculate that a certain level of accumulated deficits may represent a “tipping point” that positions residents for adverse outcomes. In aging populations overall, level of frailty tends to increase with age. Overall, increasing frailty leads to increasing care needs, note Clegg et al.

Recognizing the prevalence and impact of frailty has “profound implications” for how we plan and deliver healthcare, add the authors.

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Understanding Frailty and Dementia *continued*

Frailty and adverse drug reactions

Age-related changes in organ function, body water content, and physiologic capacity to respond make older adults more likely to experience adverse drug reactions, explain [Lavan et al.](#) They report that about 60% of nursing home residents “continue to experience” adverse drug reactions, making this “a pervasive problem in this vulnerable older cohort”. Contributing risk factors include polypharmacy, inappropriate prescribing practices, and poor monitoring. To ensure better outcomes, they advocate for comprehensive geriatric assessment and meticulous drug monitoring in the care of older adults.

Adverse effects - drugs

[The BEERS criteria](#) recognize that drugs may have different effects in older adults than in the general population. A wealth of recent research highlights adverse effects related to [antipsychotics](#), [anticonvulsants](#), [anxiolytics](#), and other drugs in dementia care.

Application of the BEERS criteria and specialized pharmaceutical protocols for dementia care, coupled with expert diagnostic assessment, can help prevent adverse effects, improve clinical outcomes, and promote a better quality of life for residents.

The prevalence of frailty, often co-occurring with dementia, places nursing home patients at higher risk of experiencing adverse health outcomes. Targeted clinical strategies based on accurate diagnoses are essential to delivering optimal care and achieving CMS compliance. To learn more about our proven clinical care practices for nursing home residents, [reach out to the GuideStar Eldercare team](#). We're listening, and we're here to help.

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