

P61: Frailty – Prediction of quality of life in a two year follow-up

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Introduction: Frailty is a state of high vulnerability that entails a high risk of clinically significant adverse outcomes. Traditional approaches define frailty as an exclusively physical condition. More recently, frailty has been defined by Gobbens as a multidimensional state as affecting the individual, who experiences loss of one or more domains of human functioning (physical, psychological, or social).

Objectives: To examine how frailty (measured as a multidimensional state contributes to the prediction of life quality in a two year follow-up, in a sample of community-dwelling elderly.

Materials and Methods: A longitudinal study was performed using a non-probabilistic sample of 110 individuals aged 65 years and older. Frailty was measured at baseline with the Tilburg Frailty Indicator (TFI) and quality of life was assessed at baseline and follow-up (two years later) with the WHOQOL-OLD and EUROHIS-QOL-8. Hierarchical multiple regressions were conducted.

Results and Discussion: The elderly's average age was of 77.6 ± 6.9 , and most were women (75.5%) and widowers (56.4%). Frailty at baseline significantly contributed to the prediction of quality of life at follow-up, adjusting for sociodemographic variables, lifestyle, life-events, comorbidity, satisfaction with home living environment and quality of life at baseline. Generally speaking and as in previous studies, higher frailty is associated with a lower quality of life. Regarding the contribution of each frailty domain, the social domain was the only one to predict quality of life, after adjusting for covariates.

Conclusion: It was possible to conclude that a multidimensional, holistic, view of frailty significantly predicted quality of life in a two year follow-up in a community-dwelling elderly. This evidence highlights the importance of screening for frailty in order to implement timely interventions.

References

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