ABSTRACT

TITLE: NUTRITIONAL STATUS OF ELDERLY PRESENTING TO GERIATRICS OUT–PATIENT CLINIC USING MINI NUTRITIONAL ASSESSMENT AND CORRELATION WITH FRAILTY.

DEPARTMENT: GERIATRICS, CHRISTIAN MEDICAL COLLEGE, VELLORE

NAME OF THE CANDIDATE: DR NIRANJANA SREEDEVI N

DEGREE AND SUBJECT: MD GERIATRIC MEDICINE

NAME OF THE GUIDE: DR PRASAD MATHEWS K

BACKGROUND
Advances in medical science have led to increased longevity and this in turn highlights problems unique to the elderly. Malnutrition and frailty are two under recognised problems which cause significant morbidity in the elderly. There is a lacuna in Indian data on these problems and also the association between them.

OBJECTIVES
To assess the prevalence of malnutrition and frailty in elderly patients who attend the Geriatrics OPD of a tertiary care send center and to study the correlation between nutritional status and frailty.
METHODS
Cross-sectional study conducted on subjects above 60 years of age who attend the Geriatrics outpatient department of Christian Medical College between May 2016 to August 2016. Nutritional status was assessed using Mini Nutritional Assessment(MNA) and frailty using Frieds Frailty Phenotype. Chi square test was used to compare the proportions between categorical variables. One way analysis of variance test and Kruskal Wallis test was used for the comparison of three groups. Pearson correlation coefficient test was used to find the correlation between quantitative variables.

RESULTS
The prevalence of malnutrition in this study was 1.09% (2/185) and that of at risk for malnutrition was 26.09% (48/185). The prevalence of frailty was 25.54% (47/185) and that for pre frailty was 72.83% (134/185) in this study. There was significant association between malnutrition and frailty (p value 0.20). Lower socioeconomic status, ischemic heart disease, cognitive impairment, abnormal clock drawing test, lower Barthel’s ADL score and slower timed get up a go test were the factors which were significantly associated with malnutrition. Age, female sex, lower socioeconomic status, abnormal clock drawing test and slower timed get up and go test correlated significantly with frailty.

CONCLUSION
The prevalence of malnutrition and frailty among elderly are higher in the developing world. There is significant association between these two conditions. Several parameters aid in diagnosing and assessing the severity of both these conditions. Evaluating malnutrition and frailty is of paramount importance in the Geriatric out-patient clinic to provide appropriate interventions to improve the quality of life significantly.

KEY WORDS: Elderly, MNA, Frailty