

Am I  
FRAIL?

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Tan Tock Seng  
HOSPITAL

Am I  
FRAIL?

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IGA  
Institute of Geriatrics  
and Active Ageing

# What is Frailty?

**Reduced health reserves** that make one **more vulnerable** to poor outcomes (e.g. functional decline) in times of **illness**

Clegg A, Young J, Iliffe S, Rikkert MO, Rockwood K. Frailty in elderly people. Lancet. 2013 Mar 2;381(9868):752-62. doi: 10.1016/S0140-6736(12)62167-9. Epub 2013 Feb 8.



Illness



Illness



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# FRAILTY is a syndrome, not a disease

**Disease** - medical condition with an established biological cause

**Syndrome** - groups of signs and symptoms that **do not fit into specific disease categories**

For Frailty, multiple factors contribute to this syndrome



Is my  
patient  
frail?

Tiredness

Slowness

## Characteristics of frailty

- ▽ 3 or more characteristics suggest our patient may be frail
- ▽ Disease(s) is one factor which may contribute to frailty
- ▽ Managing the disease(s) well is one aspect of preventing or reversing frailty

Fried et al. (2001)

Weight  
loss

Weakness

Low  
physical  
activity



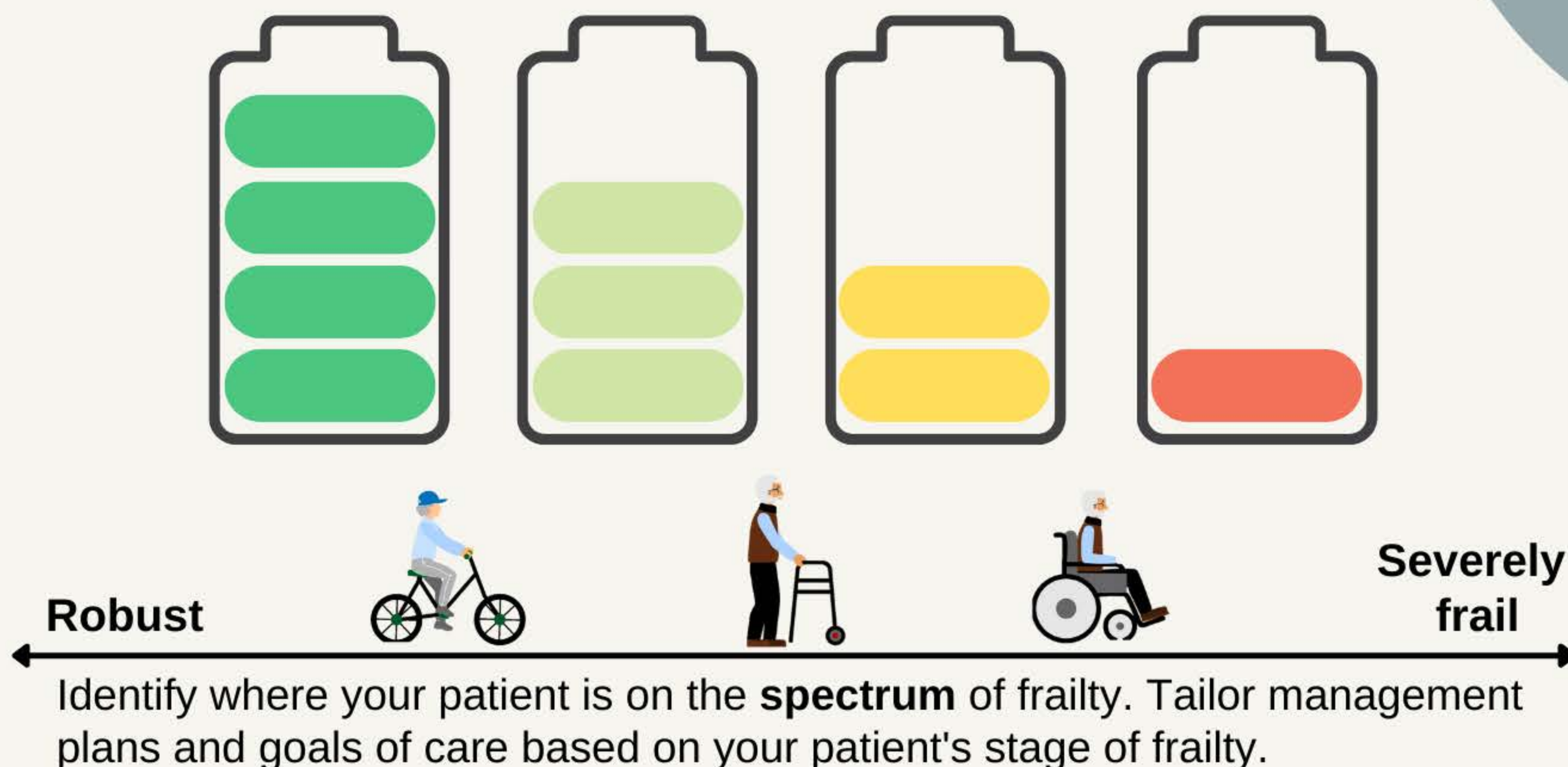
Stay tuned

to find out what else we  
can do to manage frailty



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# Frailty lies on a spectrum



## Clinical Frailty Scale (CFS)

is a simple 9-point scale that summarises the overall level of fitness or frailty of an older adult. Scan to find out more!



Rockwood K, Theou O. Using the Clinical Frailty Scale in Allocating Scarce Health Care Resources. *Can Geriatr J.* 2020 Sep 1;23(3):210-215



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## DID YOU KNOW?

- CFS is scored at ED for all P2-P4 ED attendees  $\geq 65$  years.
- It can be found when you search for 'CFS' on your flowsheet.

# Is **FRAILITY** the same as **COMORBIDITY** and **DISABILITY**?



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## Interrelationship of Frailty, Comorbidity and Disability

- Frailty, comorbidity and disability may increase with age, and often coexist and interact with each other
- These 3 can concurrently impact a person's health, increasing the risk of poor outcomes and thus greater healthcare utilisation

Fried LP, Ferrucci L, Darer J, Williamson JD, Anderson G. Untangling the concepts of disability, frailty, and comorbidity: implications for improved targeting and care. J Gerontol A Biol Sci Med Sci. 2004 Mar;59(3):255-63.

## Quick Tips

- Evaluate which of these are present in your patient
- Use validated scales to assess your patient's condition (e.g. Clinical Frailty Scale for the assessment of Frailty)
- Consider the interactions of these entities when managing your patients

# FRAILTY STATUS CAN GUIDE MANAGEMENT



- Consider frailty status as part of **person-centred care** and **shared decision-making**
- Determine severity of frailty and what matters to patients when counselling about risks and benefits of procedure/treatment
- Knowing the frailty status helps to rationalise care



**Planning for  
invasive  
procedure  
or treatment ?**



High chance of  
recovery from  
procedure

High risk of  
morbidity and  
mortality

**Benefits  
and Risks**



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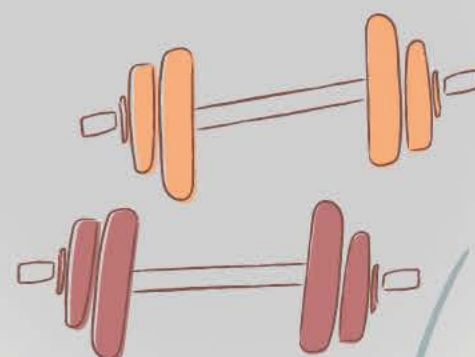
**Shared decision-making with the patient and family is important.  
Align treatment decisions with Goals of Care.**

# Frailty may be reversed or delayed

Take adequate protein and calories in your diet



Do regular exercises especially resistance exercises



Supplement vitamin D if deficient



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Lim WS, Cheong CY, Lim JP, et al. Singapore Clinical Practice Guidelines For Sarcopenia: Screening, Diagnosis, Management and Prevention. The Journal of Frailty & Aging. 2022. doi: 10.14283/jfa.2022.59. [Epub ahead of print].