

21-22 September 2019 • Rome, Italy

HOSTED BY:



IN PARTNERSHIP WITH:

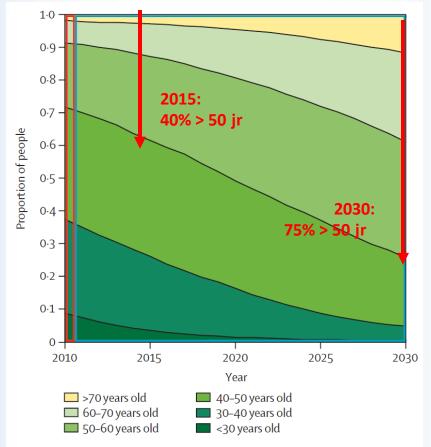






HIV and Frailty

Nienke Langebeek, PhD, MANP, MSc, RN
Nurse Practitioner Infectious Diseases
Rijnstate Hospital Arnhem
The Netherlands





Frailty

Frailty:

A clinical syndrome with multiple causes and contributors, resulting in enhanced vulnerability to stressors and increased risk of adverse outcomes.



Phenotype of Frailty

- Undesirable weight loss of ≥5% body weight in the previous year
- Self-reported exhaustion
- Weak grip strength
- Slow Walking speed
- Reduced physical activity

Fried et.al 2001, J.Gerontology A Biol.Sci.Med.Sci; 56; M146-156

Clinical Relevance

- Increased risk of falls, hospitalisation, nursing home admission and mortality
- A predictor of occurrence of new disabilities independent of age, burden of disease and psychosocial characteristics.
- Better predictor of mortality than age
- Higher risk of post-operative complications
- Higher risk of dementia

Measurements

- Self-reported
 - Weight loss
 - Physical activity
 - Exhaustion
- Measurements
 - Max. hand grip strengths
 - Walking speed



Early identification of onset of frailty with targeted interventions

PROMOTING HEALTHY AGING

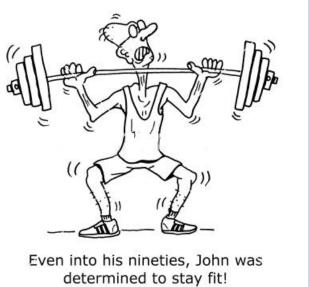
Optimize sensory options (hearing, vision)



Assess cognition and mood



Exercise



Fall prevention





Nutrion supplements



Optimizing vitamin D and Calcium



"Mary, you haven't been taking your calcium pills, have you?"

Questions

- Who are the (pre)frail subjects
- Why is there a need to identify frail elderly and proposing such a approach
- What approach should be considered

Take home messages

- Be aware of (pre) frailty in your patients
- Start measuring all your patients ≥ 50 years
- Prevent co-morbidities by promoting healthy lifestyle

