

# Prevalence of Sarcopenia in a Danish geriatric out-patient population

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#### BACKGROUND AND AIM

Using the European Working Group on Sarcopenia (EWGSOP) criterias on a geriatric outpatient-population the aim was to assess the prevalence of sarcopenia and to describe the association between sarcopenia and age, gender, body-mass index (BMI)







Measuring muscle function with 10 meter walk (GS), muscle mass with Dual Energy X-ray Absorptiometry (DXA) and muscle strength with Handgrip (HG)

# **METHODS**

According to the EWGSOP's recommendations, patients referred to a geriatric outpatient-clinic were assessed for sarcopenia by measuring

- Muscle mass (Appendicular skeletal muscle mass) (ASM)): Dual Energy X-ray Absorptiometry (DXA)
- Muscle strength: Hand-grip strength (HGS)
- Muscle function: 10 meter walk (GS) Skeletal Muscle Mass Index (SMI) was calculated by ASM/height² (kg/m²). Patients were classified:
- No sarcopenia (normal SMI)
- Pre-sarcopenia (reduced SMI, normal HGS and GS)
- Sarcopenia (reduced SMI and reduced HGS or GS)
- Severe sarcopenia (reduced SMI, HGS and GS)

#### **RESULTS**

189 patients were screened for inclusion; 80 were included.

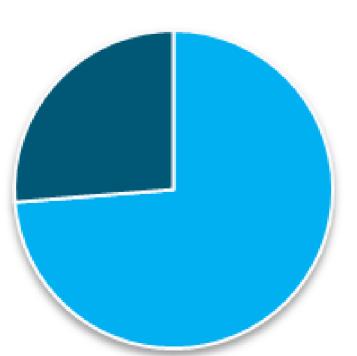
- 12 (15%) had severe sarcopenia
- 9 (11%) sarcopenia
- 8 (10%) pre-sarcopenia
- 51 (64%) no sarcopenia

Mean age was significantly higher in the SARC-GROUP (sarcopenia and severe sarcopenia) than in the NOSARC-GROUP (pre-sarcopenia and no sarcopenia) (p: 0.009) and BMI was significantly lower in the SARC-GROUP (p < 0.0001). No difference was found in gender distribution (p=0.729)

evalence of sarcopenia n=80		Variable	NOSARC-GROUP n=59	SARC-GROUP n=21	P-value
	■ NO SARC (no	Age, yrs, mean±SD*	78.1±6.4	82.5±6.3	0.009
	sarcopenia +	Gender			
	presarcopenia)	- Male, n (%)	20/59 (33.9 %)	8/21 (38.1 %)	0.729
	(64%)	- Female, n (%)	39/59 (66.1 %)	13/21 (61.9 %)	
	■ SARC (sarcopenia +	Low BMI (BMI ≤20.5 kg/m²), n (%)	2/59 (3.4 %)	9/21 (42.9)	<0.0001

<sup>\*</sup>SD = standard deviation

## Prev



severe sarcopenia) (26%)

### CONCLUSION

Prevalence of sarcopenia was 26% in our study highlighting that this condition is common in a geriatric outpatient population. Assessment using the EWGSOP diagnostic method was feasible and is suggested to be part of the standard clinical comprehensive geriatric assessment