Effectiveness of the interventions in preventing the progression of pre-frailty and frailty in older adults: preliminary results of a systematic review

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Introdução: Frailty is an age-related state of high vulnerability to adverse health outcomes after a stressor event, predisposing the individuals to progressive decline in different functional domains and contributing to the onset of geriatric syndromes (Clegg et al., 2013; Fried et al., 2004). So far, various types of intervention in preventing the frailty progression and/or minimizing of its consequences have been proposed. However, there is no systematic review that critically analyzes the existing evidence.

Objetivos: Summarize the best available evidence in relation to the effectiveness of the interventions in preventing progression of pre-frailty and frailty in older adults. More specifically, examine what is the effectiveness of interventions in preventing or reducing frailty in older adults, and how does it vary with degree of frailty? Are there factors that influence the effectiveness of those interventions? And what is their economic feasibility?

Metodologia: The review methodology followed Joanna Briggs Institute procedures (The Joanna Briggs Institute, 2014). Databases were searched from January 2001 to November 2015. Primary studies including older adults aged 65 and over, explicitly identified as pre-frail or frail and receiving health care and support services in any type of setting, were considered. The interventions of interest were those focusing on the prevention of pre-frailty and frailty progression, as compared to usual care, alternative therapeutic interventions or no intervention. Both clinical/medical and economic components of the interventions were addressed.

Resultados: This work is part of the project “664367/FOCUS” funded under the European Union’s Health Programme (2014-2020), which aim to critically reduce the burden of frailty in Europe. Various databases for published and unpublished studies were searched. A total of 2511 records were identified after removing duplicates. These were screened by title and 1887 irrelevant records were excluded. Presently, 624 records are screening by abstract. After this process full-text articles will be reviewed for inclusion criteria and methodological quality. The extraction of data from the eligible articles will consider changes in frailty (primary outcome). Also changes in different functional domains and in indicators of adverse outcomes, as well as economic data associated with implementing of the interventions (secondary outcomes) will be analyzed. It is expected that the critical analysis and dissemination of existing evidence will contribute to the definition of guidelines for interventions for frail and pre-frail patients and, consequently, for optimization of care by health professionals.

Conclusões: The consolidation of the available evidence on the effectiveness of existing interventions to prevent or reduce frailty in older adults has extreme relevance for clinical practice. It is expected that the results of this systematic review will be attended by health care professionals, social care practitioners, researchers and policy-makers in order to optimize the frailty treatment. We believe that this optimization process will have positive impact on care for older adults, minimizing the risk of adverse consequences and ameliorating the impact on independence or healthy and engaged lifestyles. Other possible implications are related with better management of healthcare costs.

Palavras-chave: frailty, elderly, intervention, systematic review