

Healthy Aging and Preventing Frailty

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Doctors of BC Position

Doctors of BC recognizes that frailty is not an inevitable part of aging and with appropriate interventions can be prevented or reversed. Frailty is an increasingly significant public health issue and preventing frailty requires a multidisciplinary and multisectoral approach.

Doctors of BC recommends that the BC Ministry of Health, working with stakeholders and ensuring meaningful input from physicians and other health care providers, update its provincial healthy aging strategy to include prioritization of frailty prevention. This includes:

- Developing messaging to increase frailty awareness and accompanying preventative strategies.
- Improving access to and funding for pharmacological and non-pharmacological interventions that support frailty prevention, such as provision of vaccinations, optimizing medications, and implementing and enhancing culturally appropriate physical activity, nutrition, and psychosocial programming.
- Supporting older adults and their caregivers to utilize programs, services, and technology to stay connected with their community.

To support physicians to prevent frailty, Doctors of BC commits to:

- Raising physician awareness of the role they can play in healthy aging and frailty prevention, including identifying frailty and risk factors for frailty, and using appropriate early interventions when they can have the most effect.
- Promoting clinical resources and tools to help physicians in early frailty identification and management.
- Raising physician awareness of available community resources that support healthy aging and frailty prevention.

Background

Over 1.5 million Canadians are living with frailty, a state of “increased vulnerability and functional impairment that is caused by an accumulation of multi-systemic decline” [1]. Within the next 10 years, it is projected that well over two million Canadians may be living with frailty [2].

Frailty is multidimensional and consists of physical, psychological, and social aspects that impact an individual’s ability to withstand and recover from minor challenges [3]. Frailty may include loss of muscle mass and strength, reduced energy and tolerance to physical activity, and decreased physiological and/or cognitive

reserve. This increased vulnerability puts older adults at risk of adverse health outcomes, including falls and injuries, progressive disability, a reduced ability to recover from acute stress, increased hospitalization and nursing home admission, and mortality. [4].

Analysis

Frailty and common misconceptions

While frailty is common with increasing age, it is not an inevitable part of aging. Frailty exists on a spectrum and while it is often chronic and progressive, it is also

dynamic and research reveals that frailty can in fact be delayed and/or reversed [5, 6].

However, frailty is poorly understood and under-recognized by the public. Generally, there is a tendency for people to believe that frailty is unavoidable and that being elderly and being frail are synonymous; yet, frailty is different from advanced aging.

Collaboration across sectors provides an opportunity to change the public's perception of frailty and to leverage actions to help minimize, delay, or prevent frailty. As such, Doctors of BC recommends a multidisciplinary and multisectoral approach to updating the provincial healthy aging strategy to include prioritization of frailty prevention. This includes developing messaging to increase frailty awareness and accompanying preventative strategies.

Avoiding frailty

There are many risk factors associated with frailty [1]. Many of these risk factors are modifiable at either the individual or health system level. The Canadian Frailty Network has launched a public awareness campaign using a simple acronym, AVOID, which stands for Activity, Vaccinate, Optimize medications, Interact, and Diet/nutrition. The campaign is designed to help Canadians remain healthy and prevent frailty through addressing various risk factors.

Activity: Targeted interventions that focus on increasing mobility, strength, balance, endurance, and flexibility can not only prevent frailty, but also reverse existing frailty [7]. Physicians can prescribe physical activity and support people to remain physically active as they age through assessments, goal setting, and monitoring.

Vaccinate: With age, the ability to fight off infection is reduced. Immunization can help prevent the spread of infectious diseases. Physicians have a role in ensuring evidence-based vaccinations are a part of regular health maintenance. As influenza and pneumonia

disproportionally impact older adults, there should be increased efforts to encourage uptake of these vaccines and ensure that booster shots for other diseases are up to date.

Optimize medications: Polypharmacy, the use of multiple medications concurrently, is a significant risk factor associated with frailty and increased rates of falls, hospitalization, and mortality. Physicians, pharmacists, and health care providers can play a key role in reducing inappropriate polypharmacy, through safe prescribing, deprescribing, and improved patient medication compliance [8].

Interact: Supportive social networks are an important factor in aging well and preventing frailty, as increased social connections can support independence and resilience. Increased social connections can help older adults age in place in their communities [9].

A provincial healthy aging strategy should include supports for people to utilize programs and services to stay connected with their community. These supports and programs, including safe housing for those with functional decline, can help prevent frailty and delay frailty progression. Lastly, supporting older adults to use technology can keep them socially engaged and safer in their homes.

Diet and nutrition: Many studies indicate various associations between nutritional status, nutrient intake, particularly low protein intake, and frailty [10]. Supporting healthy diet and ensuring food security can be effective in frailty prevention and management.

In addition to the key points above, Doctors of BC recognizes there are other factors, including social inequities and determinants of health, that should be addressed at a health system level to reduce the risk of becoming frail. Lower education and poverty impact frailty and contribute to increased severity of frailty [11].

There is also a need to promote a paradigm shift on aging, as existing ageist stereotypes contribute to people's beliefs and perceptions about aging and frailty [12]. Shifting the culture on aging will help remove

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existing barriers to allow for the development of healthy public policy that supports older adults to age well.

Conclusion

Doctors of BC commends the BC Government on its commitment to ensuring older adults can live healthy, safe, active, and socially engaged lives. Doctors of BC is committed to raising physician awareness of the role they can play in frailty prevention, including identifying risk factors for frailty and using appropriate early interventions.

Healthy aging and frailty prevention often require adopting and sustaining lifestyle behavioural changes. Physicians should be supported to help patients make these lifestyle changes through the use of social prescribing and other evidence-informed prevention and screening resources and tools. Community-based organizations, including the divisions of family practice and primary care networks, can provide a foundation for supporting physicians and health care providers to use a multidisciplinary approach to help British Columbians age well and avoid frailty by connecting them to social and community services.

Aging is inevitable; however, there is an opportunity to support and empower British Columbians to age well. This includes raising awareness of frailty and how it can be avoided.

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