Ageing & Frailty In the UK

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Introduction

In an ever ageing UK population, frailty is a growing concern. This multidimensional geriatric syndrome is associated with deconditioning and as such worsening patient outcomes and is an increasing burden on the healthcare system.

It is predicted that the prevalence of multi-morbid frail individuals will increase exponentially with a 17% increase in this patient cohort by 2035, of which 67% will suffer from cognitive impairment/dementia.[1] With life expectancy expected to increase to 85.7 years for men and 87.7 years for women by 2030, the importance of recognising frailty cannot be understated.[2]

One such widely used validated tool is the Clinical Frailty Scale (CFS). This scale, which when published in 2005, originally scored from 1 (very fit) to 7 (severely frail) was modified in 2007 to reflect a terminally ill stage and now comprises of 9 points.[3] The advantage of CFS scoring is to predict patient outcomes in an acute setting and utilise Geriatric speciality input.

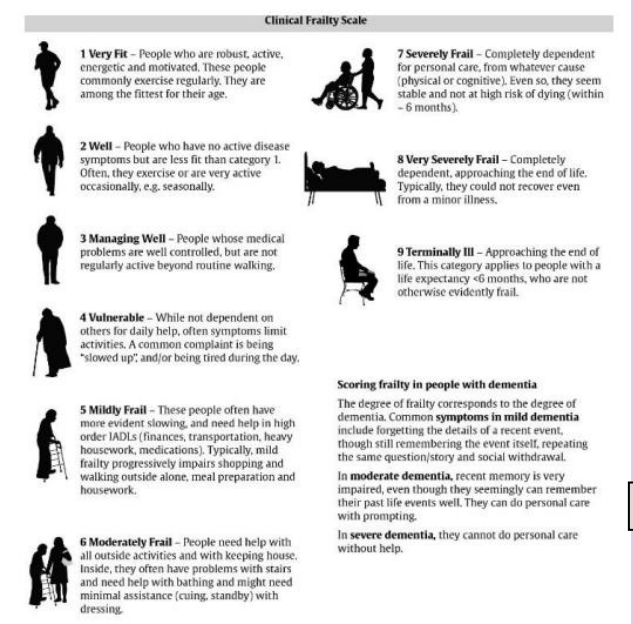


Image 2: Rockwood Clinical Frailty Scale[4]

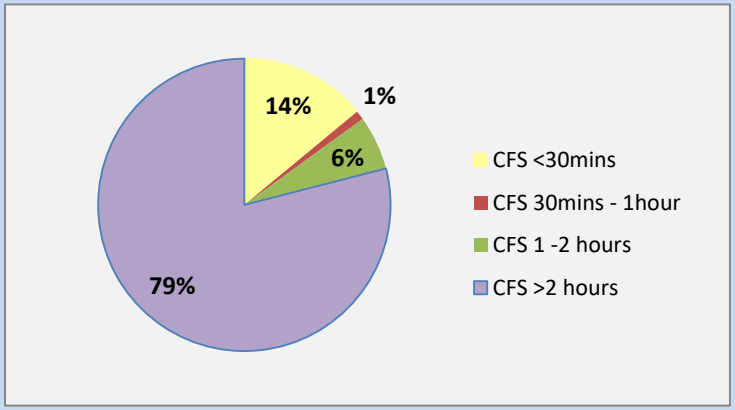
Comprehensive Geriatric Assessments

CGAs are multidisciplinary diagnostic processes to evaluate various factors including medical, functional, social and psychological.[5] Whilst a full CGA in an acute setting may not be possible due to time pressures, the initiation and continuation in community settings allows for better prognoses for these patients and in turn can lead to fewer hospital attendances and re-admissions.

Audits and Data

In an audit undertaken at a local hospital in Surrey in November 2021 of patients who were referred to the Acute Frailty Team in A&E, it was noted 79% of patients had a CFS score done after 2 hours and various studies have shown that the increasing level of frailty and the delay in identifying this, leads to longer length of stays with a mean 12.6 days of those who are severely frail (CFS >7) compared to a mean of 4.1 days of the non-frail cohort (CFS <4).[4] With higher readmission rates of 31.2% of the severely frail compared to 19% in the non-frail cohort, early identification and importance of Comprehensive Geriatric Assessments (CGA) can prevent complications with more effective and prompt discharge planning.[4]

Image 1: Time taken for CFS scoring to be done in A&E – total 96 patients (November 2021)



Conclusion

In conclusion, the ever-growing burden of an ageing population with multi-morbidities and frailty will lead to an increasing cost and burden on the National Health Service (NHS) and as such the importance of recognising frailty in an acute setting and the consequences of delays will ultimately cost time and money. Therefore, the emphasis now must be on education to all healthcare professionals in primary care, secondary care and community teams on the early identification of and the management of frailty, CFS and CGAs. With the aim that with education, we will meet the needs of this ever-growing frail population.

References

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