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The Prevalence and Associated Factors of Frailty and Its Relationship with Falls in Patients with Schizophrenia

Authors: Bo-Jian Wu, Si-Heng Wu

Abstract: Objectives: Frailty is a condition of a person who has chronic health problems complicated by a loss of physiological reserve and deteriorating functional abilities. The frailty syndrome was defined by Fried and colleagues, i.e., weight loss, fatique, decreased grip strength, slow gait speed, and low physical activity. However, to our best knowledge, there have been rare studies exploring the prevalence of frailty and its association with falls in patients with schizophrenia. Methods: A total of 559 hospitalized patients were recruited from a public psychiatric hospital in 2013. The majority of the subjects were males (361, 64.6%). The average age was 53.5 years. All patients received the assessment of frailty status defined by Fried and colleagues. The status of a fall within one year after the assessment of frailty, clinical and demographic data was collected from medical records. Logistic regression was used to calculate the odds ratio of associated factors. Results: A total of 9.2% of the participants met the criteria of frailty. The percentage of patients having a fall was 7.2%. Age were significantly associated with frailty (odds ratio = 1.057, 95% confidence interval = 1.025-1.091); however, sex was not associated with frailty (p = 0.17). After adjustment for age and sex, frailty status was associated with a fall (odds ratio = 3.62, 95% confidence interval = 1.58-8.28). Concerning the components of frailty, decreased grip strength (odds ratio = 2.44, 95% confidence interval = 1.16-5.14), slow gait speed (odds ratio = 2.82, 95% confidence interval = 1.21-6.53), and low physical activity (odds ratio = 2.64, 95% confidence interval = 1.21-5.78) were found to be associated with a fall. Conclusions: Our findings suggest the prevalence of frailty was about 10% in hospitalized patients with chronic patients with schizophrenia, and frailty status was significant with a fall in this group. By using the status of frailty, it may be beneficial to potential target candidates having fallen in the future as early as possible. The effective intervention of prevention of further falls may be given in advance. Our results bridge this gap and open a potential avenue for the prevention of falls in patients with schizophrenia. Frailty is certainly an important factor for maintaining wellbeing among these patients.

Keywords: fall, frailty, schizophrenia, Taiwan

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