

Sarcopenia and dysphagia risk assessment instruments in Parkinson's Disease



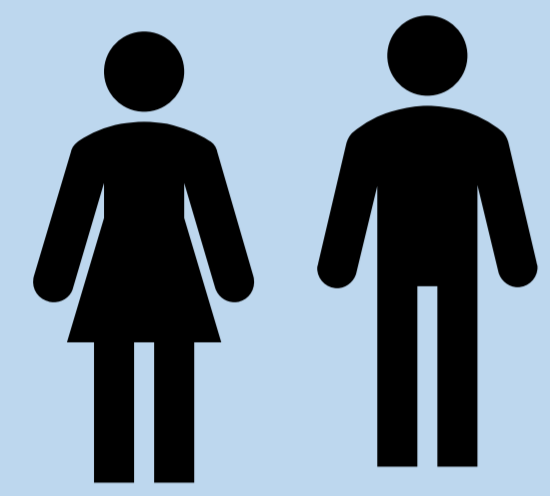
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 DYSPHAGIA RESEARCH SOCIETY
 29TH ANNUAL MEETING

Included: 24 idiopathic Parkinson's Disease

Medical Records



- Disease duration
- Hoehn & Yahr scale (H&Y)
- Unified Parkinson's Disease Rating Scale (UPDRS)

Adults: 41-59 y.o.
 Elderly: 61-87 y.o.

Sarcopenia¹

• Risk



- SARC-F
- Cutoff values: scores equal to or greater than 4²



- Calf circumference – CC
- Cutoff values: 33 cm females/34 cm males³

• Probable



- Handgrip strength (dynamometer)
- Cutoff values: 16 kg females/27 kg males⁴

Dysphagia risk



- Eating Assessment Tool (EAT-10)⁵
 - Cutoff value: 3
- Swallowing Disturbance Questionnaire (SDQ-PD)⁶
 - Cutoff value: 11

Objective

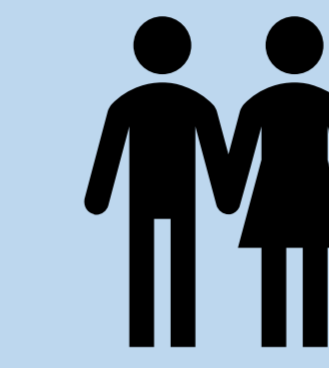
The purpose of this study is to determine the correlation between dysphagia risk and sarcopenia risk in PD patients, taking into account age, disease duration, neurological scales and risk assessment instruments

Conclusion

- Higher motor and global impairments on the scale (UPDRS) entails lower hand grip strength and calf circumference measurements, as well as worse SARC-F scores
- Elderly group with PD at risk of dysphagia (SDQ), presented lower CC values, indicating a loss of muscle mass.
- This condition also affects muscles responsible for swallowing, heightening the risk of dysphagia in elderly PD subjects

References

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Mean participant age:
 66.37 ± 12.71 years



Mean disease duration:
 9.7 ± 6.56 years



Median H&Y = 2.5
 and UPDRS = 40

Correlation Clinical aspects

Dysphagia risk EAT-10

Disease duration
 (r=0.457 p=0.025)

Sarcopenia risk SARC-F

Age
 (r=0.695 p<0.000)

Correlation Neurological scales

• Higher UPDRS total score
 • Higher UPDRS motor subscale



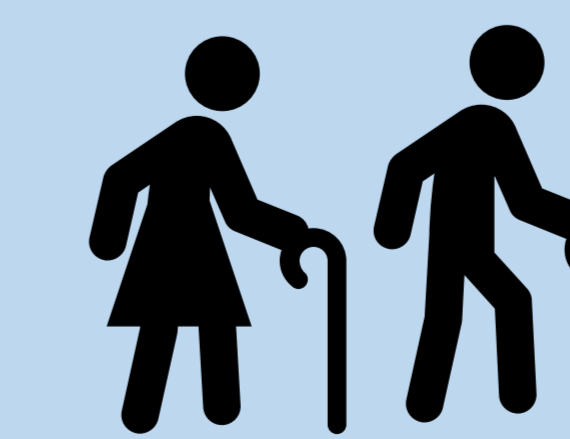
SARC-F scores



Comparison sarcopenia and dysphagia risk

(Over 60 y.o./N = 18)

SDQ = Without risk x With risk



With risk SDQ



CC
 p=0.019

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