

Swallowing symptoms increase the risk of dynapenia in community- dwelling oldest-old: Retrospective cohort study



The aim of this retrospective cohort study was to verify the symptoms of swallowing and the demographic characteristics, at baseline, which contribute the most to dynapenia, in the follow-up, in community- dwelling oldest-old adults.



Two cities in countryside of São Paulo

Epidemiological inquery: Frailty in brazilian elderly (FIBRA)

RETROSPECTIVE COHORT STUDY

2008-2009 FIBRA **Baseline (n=419)**

BODY MASS INDEX

Low weight: < 23kg/m² Eutrophy: $\geq 23 \text{kg/m}^2 \text{ e} \leq 28 \text{kg/m}^2$ Overweight : $\geq 28 e \leq 30 \text{kg/m}^2$ Obesity: ≥30kg/m²

SWALLOWING SYMPTOMS

Taste changes Chewing difficulties Swallowing difficulties Sensation of food stuck in throat Reflux of food to mouth and nose Clear throat after eat Choking after eating and drinking Swallowing liquids after eating food Dry mouth in past 4 weeks

HANDGRIP STRENGTH

Dynamometer (follow-up) < 27kgf (male); < 16 kgf (female)

Component 1*

Taste changes Chewing difficulties Swallowing difficulties Sensation of food stuck in throat

Component 2*

Dry mouth in past 4 weeks Reflux of food to mouth and nose Clear throat after eat Choking after eating and drinking Swallowing liquids after eating food

*Component 1 and 2 were determined by fatorial analysis (statistical)

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METHODS

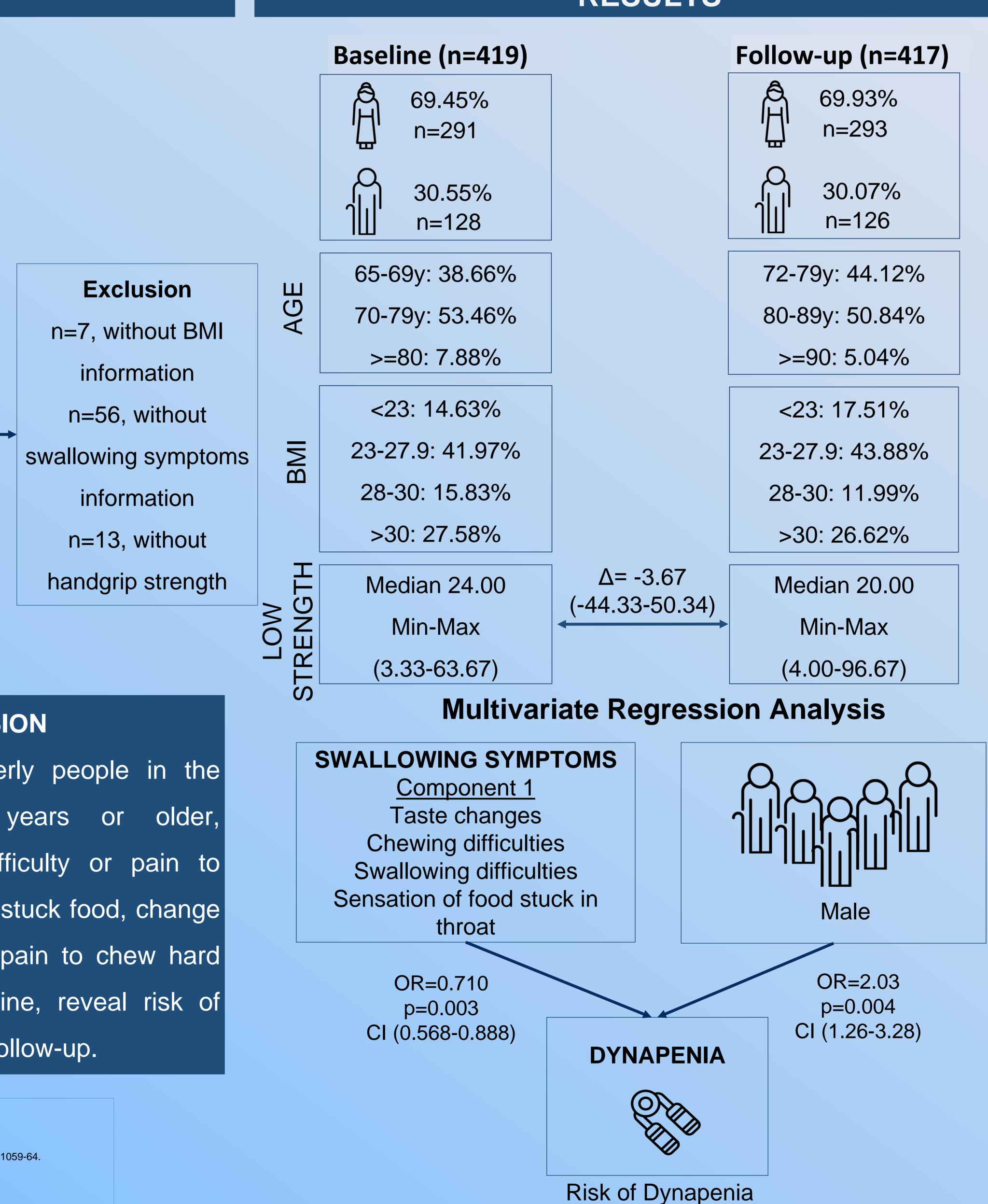
2016-2017 FIBRA 80+ Follow-up (n=417)

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Sample Baseline (n=1284) Sample Follow-up (n=424) Final Sample (n=348)

CONCLUSION

In a sample of elderly people in the community 80 aged swallowing problems: difficulty or pain to swallow, feeling of still or stuck food, change in taste and difficulty or pain to chew hard food, in males, at baseline, reveal risk of developing dynapenia at follow-up.







RESULTS

Poster presented at:

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