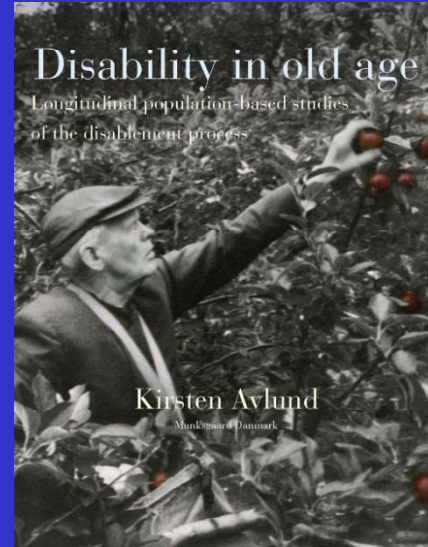
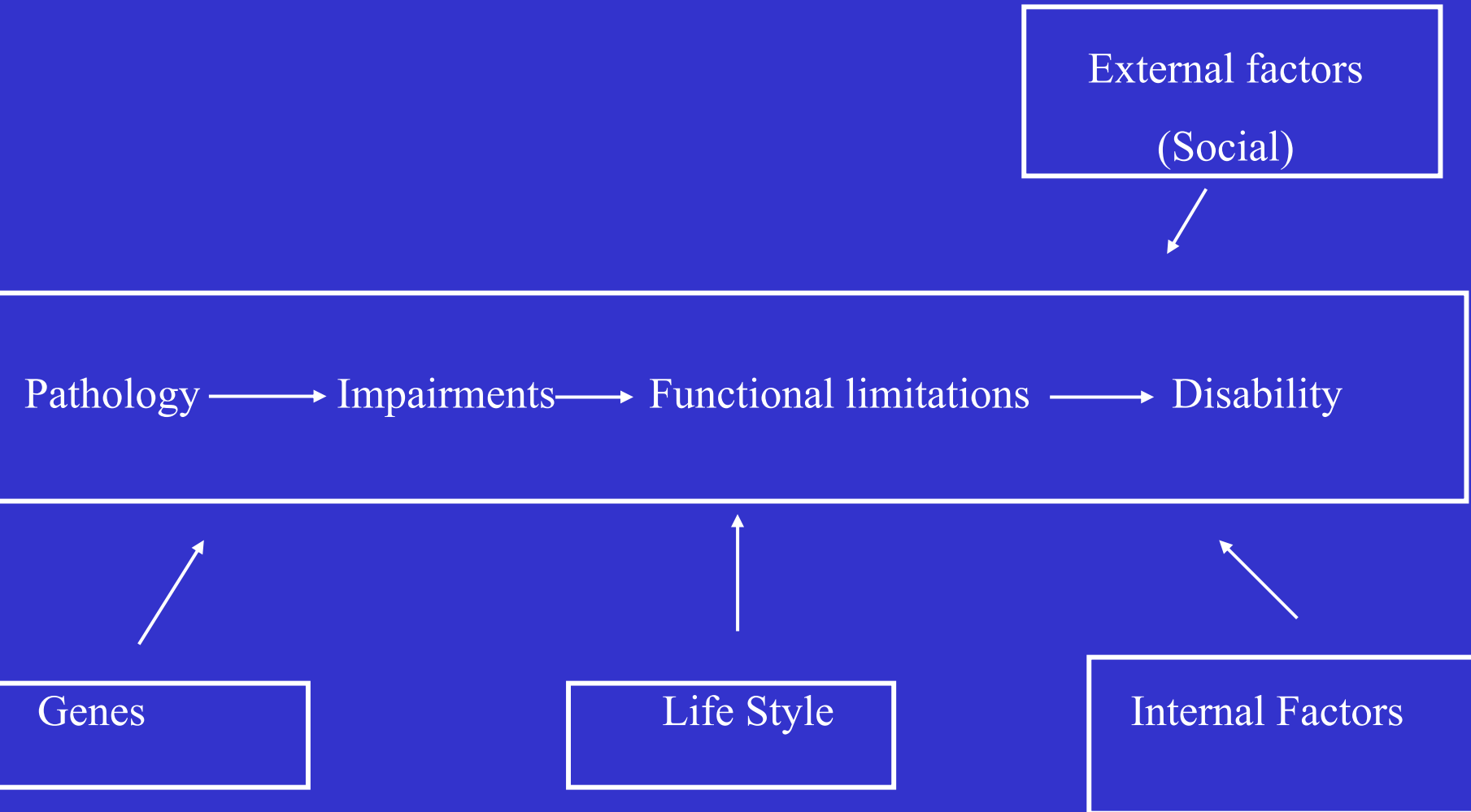


How to measure disability, the disablement process and early signs of disability?

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-
- REVES
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The disablement process



The disablement process

- Pathology
 - Disease, injury, developmental conditions
- Impairment
 - Dysfunction and structural abnormalities in specific body systems
- Functional limitations
 - Restrictions in basic physical and mental actions
- Disability
 - Difficulties doing activities of daily life

Impairments, functional limitations and disability

Impairment

Anatomical,
physiological,
mental abnormality
or loss

e.g.

Gait assessment

Func limitations

Limitation in
performance at the
level of the whole
person

Walking speed

Disability

Difficulty in doing
socially defined
roles and tasks
within a socio-
cultural and
physical
environment

Trouble walking on
stairs

Pathology → Impairment → Functional Limitation → Disability

Denervated
muscle in
arm due to
trauma

Atrophy of
muscle

Cannot pull
with arm

Change of
job; can no
longer swim
recreationally

Differentiating Functional Limitation and Disability

Nagi, IOM Report, 1991

Functional Limitation

Limitation in performance
at the level of the whole
organism or person

Disability

Limitation in performance of
socially defined roles and
tasks within a sociocultural
and physical environment

Functional limitation refers to organismic performance; **disability** refers to social performance

Measuring Functional Limitations and Disability

- Functional limitations and physical disability refer to different behaviors not to different ways of measuring the same behavior.
- Thus, you can measure functional limitations and physical disabilities using either subjective or objective measures.

Examples of Objective Performance Tests Used to Evaluate Functional Limitations

- Pegboard test
- Picking up object
- Lifting 10 pounds
- Gait speed
- Chair rise – single and repeated
- Stair climb

Most measures of disability include

Mobility e.g. walk on stairs, take long walks

ADL Activities of Daily Living e.g. bathing, dressing

IADL Instrumental Activities of Daily Living e.g.
housework, shopping

Most measures of disability are based on questions about ability to perform on activity with or without

- need of help
- difficulties
- pain
- technical aids
- tiredness
- reduced speed

What do the 70-year-olds do? Examples in %

(n)	Men (366)	Women (368)	p
<u>Mobility</u>			
Walk outside in nice weather	100	100	
Walk on stairs	99	99	
<u>ADL</u>			
Wash upper body	100	100	
Shoes /Stockings on/off	100	100	
<u>IADL</u>			
Cook for guests	18	89	***
Garden work	71	54	***

P describes gender differences by Chi-Square test. *** p<0.001

Source: Avlund & Schultz-Larsen 1991

Reasons for not performing an IADL-activity

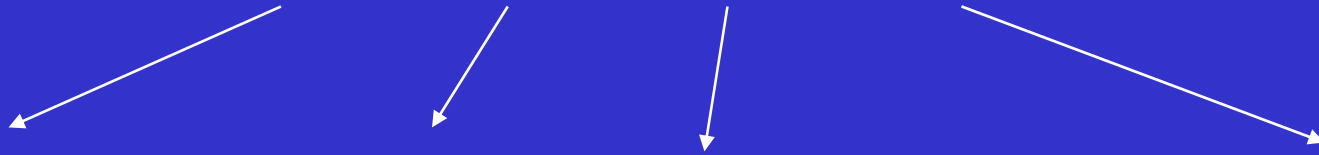
- 1) Irrelevant
- 2) No need, another person does it
- 3) Doesn't know how to do it
- 4) Not motivated
- 5) Physical problems
- 6) Health problems
- 7) Fear of falling
- 8) Problems in the physical environment

Recommendations for measures of disablement process

- Be cautious about
 - Combining measures of different concepts in the disablement process
 - Combining measures of ADL and IADL

The disablement process

Early signs of disability



Pathology → Impairments → Functional limitations → Disability

Indicators of later disability

Inflammation (Ferrucci et al. 1999; Penninx et al. 2004)

Inflammation in the periodontium (Holm-Pedersen 2006; Avlund et al. 2009)

Hand grip strength (Rantanen et al. 1999)

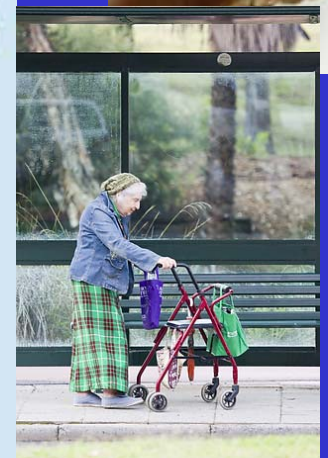
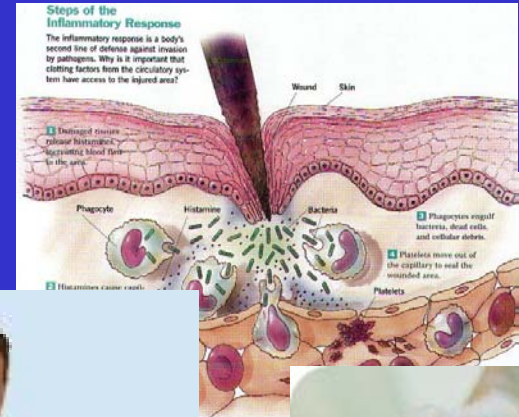
Physical performance (Guralnik et al. 1995; Gill et al. 1996; Ostir et al. 1998)

Difficulty with ADL (Sonn et al. 1996; Gill et al. 1998)

Task modification (Fried et al. 2001; Mänty et al. 2006)

Perceived security (Dahlin Ivanoff 2006)

Fatigue in daily activities (Avlund et al. 1995-2008)



Risk of incident disability in mobility after 18 months*

	Difficulty walking ½ mile	Difficulty climbing up
Task modification but no difficulty in tasks	3.77(1.91-7.47)	3.86(1.83-8.17)

*Adjusted by walking speed, stair climb speed, age, education, living alone, chronic diseases, depression, knee strength, balance

Task modification as indicator of early decline in performance and early disease

	Walking speed (sec)	Exercise tolerance (sec on tread mill)	Muscle strength	Balance (sec)
High function	Higher speed	Higher speed	Stronger	Higher speed
Task modification	↓	↓	↓	↓
Difficulty	Slower speed	Slower speed	Weaker	Slower speed
p value - Trendtest	0.001	0.001	0.001	0.001

Fatigue measured as Tiredness in daily activities

Mob-T*

Transfer

Get outdoors

Walk indoors

Walk outdoors in nice weather

Walk outdoors in poor weather

Walk on stairs

Lower Limb-T

Use toilet

Wash lower body

Dress lower body

Take shoes/stockings on/off*

Cut toenails



Sources: Avlund et al. 1995; 1996;1996; 1998

Odds ratios (95% CI) for onset of disability at five year follow-up by fatigue at age 75

	Mobility disability (n = 510)	Disability in ADL (n = 429)
Tired in 2-4 activities	3.2 (1.4-7.6)	2.1 (1.0-4.2)
Tired in 1 activity	1.7 (0.8-3.8)	2.0 (1.0-3.9)
Not tired	1.0	1.0

Adjusted by sex, chronic diseases, cognitive function, self-rated health, depressive symptoms, housing tenure, social relations, physical activity

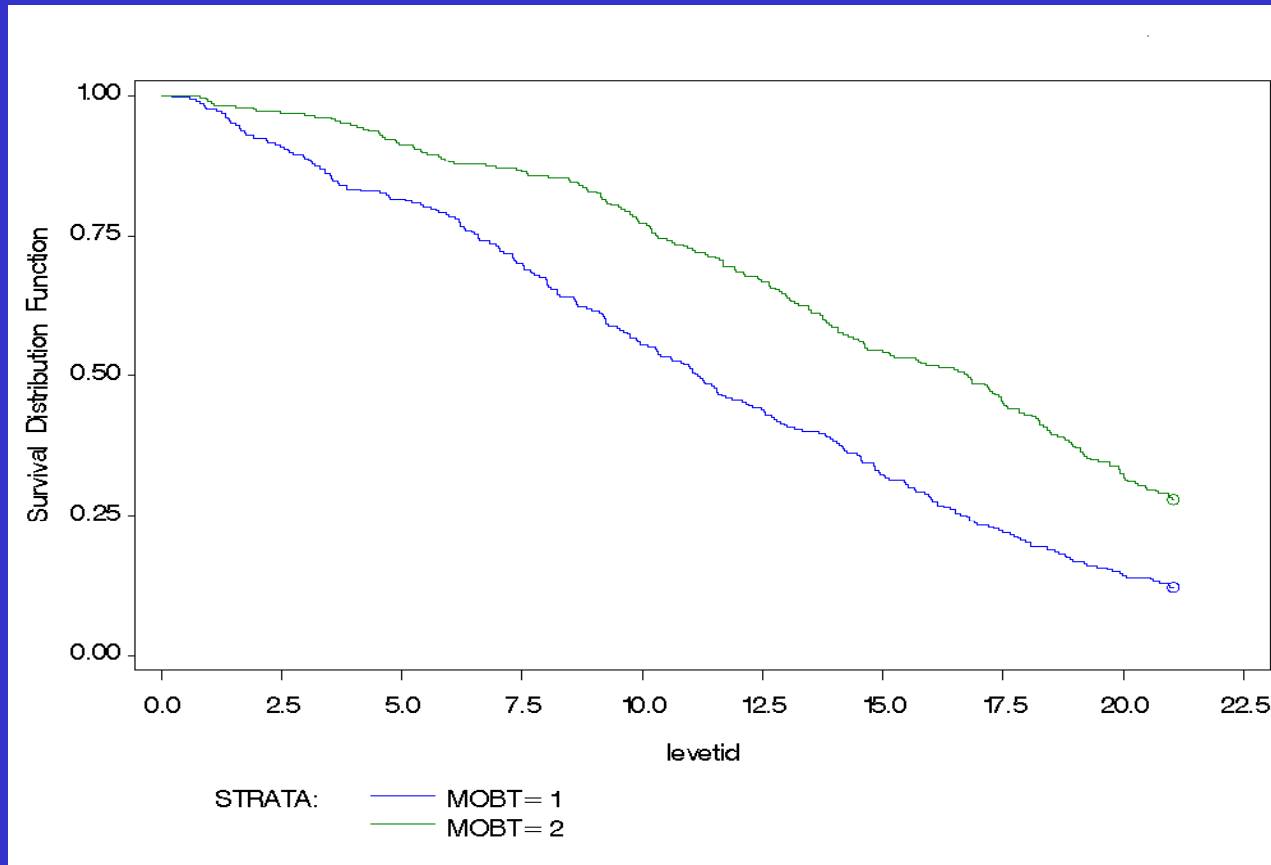
Source: Avlund et al. J Clin Epidemiol 2002

Odds ratios (95%) onset of disability and mortality at 5-, 10- and 15- year follow-up by fatigue at age 70

5-year follow-up	10-year follow-up	15-year follow-up
Onset of disability*		
(n = 564)	(n = 360)	(n = 181)
9.09 (4.71-17.54)	1.87 (1.17-2.99)	1.84 (0.93-3.64)
Mortality*		
(n = 705)	(n = 705)	(n = 705)
1.83 (1.17-2.85)	2.16 (1.52-3.05)	2.31 (1.64-3.24)

Adjusted by sex, number of diseases, VO² max

Survival curves among 70-year-olds with and without fatigue during 21 year follow-up



Onset of walking limitation at 5-year follow-up

- Measured by a 10 meter laboratory test using a stop watch
- Onset of walking limitations was defined as onset into the slowest quartile of maximal walking speed: $> 1.33 \text{ m / sec.}$

Odds ratios (95% CI) for onset of walking limitations at 5-year follow-up by fatigue (n = 319)

	Crude	Adjusted*
Tired	3.97(2.16-7.29)	2.78(1.43-5.41)
Not tired	1.0	1.0

* Adjusted by sex, walking speed and chronic diseases at baseline

Source: Avlund, Sakari-Rantala, Rantanen et al. J Am Geriatr Soc. 2004

Fatigue measured as Tiredness in daily activities is predictive of

- Onset of disability after
- 1 year (Avlund et al. 2008)
- 1½ years (Avlund et al. 2003)
- 5 years (Avlund et al. 2002; 2003; Schultz-Larsen et al. 2007)
- 10 years (Avlund et al. 2003; Schultz-Larsen et al. 2007)
- 15 years (Schultz-Larsen et al. 2007)



Fatigue measured as Tiredness in daily activities is predictive of

- Onset of disability
- Both in young, young-old and old-old populations
- In different geographic localities
-



Fatigue measured as Tiredness in daily activities is predictive of

Onset of walking limitations

(Avlund et al. 2004)

Use of health and social
services

(Avlund et al. 2001)

Decline in physical activity

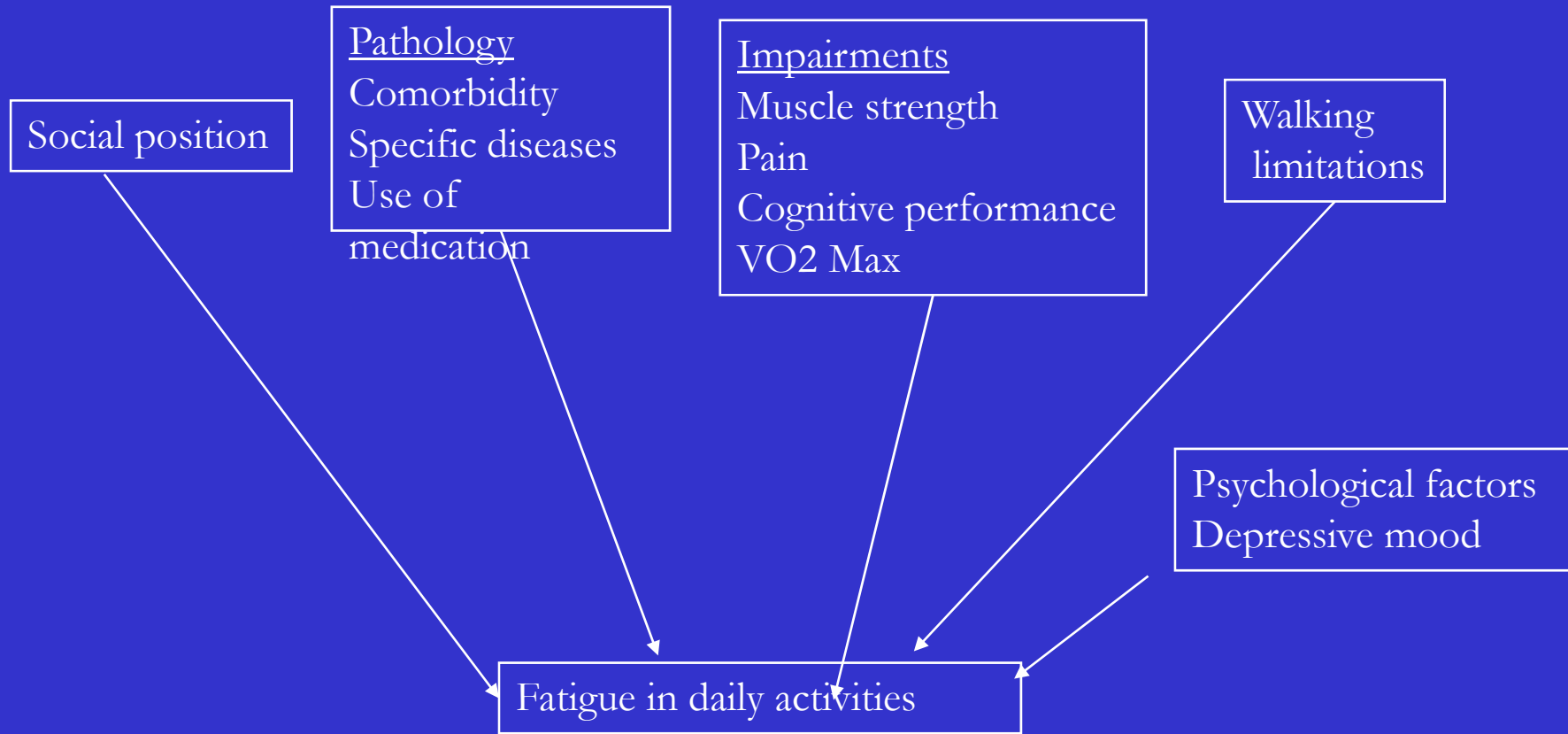
(Elkjær et al. 2006)

Mortality

(Avlund et al. 1998; Avlund et al. 2003;
Schultz-Larsen et al. 2007)



Factors related to fatigue in non-disabled older adults



Sources: Schultz-Larsen 1992; Avlund et al. 1994a; 1997; 2003c; 2006; 2007

Conclusions

- Fatigue is influenced by multiple potential modifiable factors
- None of these factors explain the associations between fatigue and the various outcomes
- Fatigue may thus be regarded as a subjective measure of frailty
- Fatigue may be used to identify non-disabled individuals at high risk of functional decline

New research questions about early signs of disability will be followed during the next years at

- The Research Group in Gerontology at Department of Social Medicine
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