Sarcopenia knowledge, barriers and enablers to clinical implementation in geriatric rehabilitation: EMPOWER-GR

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Background

- Sarcopenia is prevalent in 20-50\% of geriatric rehabilitation inpatients\textsuperscript{1}; it is associated with impaired functional recovery\textsuperscript{2} and mortality.\textsuperscript{3}
- Sarcopenia knowledge is low in community-dwelling older adults\textsuperscript{4} and it remains largely undiagnosed in routine clinical care due to equipment availability and time constraints.\textsuperscript{5}
- Research on sarcopenia knowledge and diagnosis/treatment practices is lacking in geriatric rehabilitation.

Objectives

To assess sarcopenia knowledge and perceived barriers and enablers to diagnosis and treatment in geriatric rehabilitation:

1) inpatients
2) healthcare professionals

Methods

Two surveys were undertaken (2020-2021):

- Observational cohort of geriatric rehabilitation inpatients (Cordaan, Amsterdam, the Netherlands) – Comprehensive Geriatric Assessment at admission
- Geriatric rehabilitation healthcare professionals (HCPs) working in the Netherlands (Cordaan, HCPs associations, professional networks, social media)

Scan the QR Code to get access to both surveys

Results

**Inpatients** (N=157)

| Age (years) | 80 [75-86] |
| Education (years) | 10 [9-14] |
| Cognitive impairment | 29\% |
| Malnutrition (GUM) | 73\% |
| Sarcopenia (EWGSOP2) | 22\% |

**Knowledge**

- **Sarcopenia**
  - Importance of protein: 63\%
  - Muscle poverty: 26\%

**Treatment willingness**

- RET: resistance exercise training, ONS: oral nutritional supplement

**Top 4 treatment barriers**

- ONS dislike
- Too many health issues
- Doubts effectiveness
- RET intensity/difficulty

**Clinical practice**

- **Survey participants (N=501)**
  - Question not answered (n=85)

- **Screening:** 22\% Adequately*: 19\%
- **Diagnosis:** 15\% Adequately*: 3\%
- **Treatment:** 65\% RET: 79\%, ONS: 70\%, diet: 85\%

**Top 4 barriers/enablers**

- **Protocols**
- Access to training
- Clear responsibilities
- It is a priority

Conclusions

- Knowledge of sarcopenia is very low in geriatric rehabilitation inpatients, but high in healthcare professionals.
- While inpatients are willing to start treatment, adequate screening and diagnosis is almost non-existent in current clinical practice.
- Increased knowledge, clear responsibilities among healthcare professionals, and better access to tools and protocols are needed for clinical implementation of sarcopenia.

References