A Précis of the publication: Malnutrition or frailty? Overlap and evidence gaps in the
diagnosis and treatment of frailty and malnutrition.

C. Laur, T. McNicholl, R. Valaitis and H. Keller. dx.doi.org/10.1139/apnm-2016-0652
This paper received the 2016 Award for Nutrition Translation, which was granted by the
Canadian Nutrition Society in conjunction with Canadian Science Publishing and the
Editorial Staff of Applied Physiology Nutrition and Metabolism (APNM).

The purpose of this review paper was to describe how the conditions of malnutrition and
frailty overlap and to provide a better understanding of identification and treatment
strategies for frail, malnourished older adults.

Frailty
While there are several definitions of frailty, generally it is a medical syndrome with
multiple causes and contributors that manifests itself by diminished strength, endurance
and physiologic function. Frailty is associated with risk of functional decline, loss of
independence, deterioration in health status, increased risk of hospitalization, and
ultimately increased risk of death. Interventions for preventing or minimizing the effects of
frailty in older adults include physical activity, nutrition and lifestyle changes.

Malnutrition
As with frailty, there are various definitions of malnutrition but the overlapping
characteristics of these definitions is that the individual presents with an unbalanced
nutrition intake, changes in body composition are evidence and there is diminished
function. Being malnourished increases mortality, impaired wound healing and increased
rates of infection. Interventions focus on improvement in nutrition by understanding the
root causes of the poor nutrient intake and devising effective strategies.

Clinical relevance:
Clinicians need to understand the differences and similarities between frailty and
malnutrition and know how they can be instrumental in preventing and treating these
conditions. Screening to identify malnutrition should be considered for all clients that are
considered frail due to the high proportion of overlap between frailty and malnutrition. And
similarly, identifying frailty in malnourished patients can be a way to further improve care
and outcomes. Treatment is complementary with exercise and improved nutritional intake
being key components.

This resource is made possible by unrestricted educational grants received in 2017
from our Visionary partner - Abbott Nutrition and Support partner- Nestlé Health
Science.