



Canadian  
Malnutrition  
Task Force™

le Groupe de  
travail canadien  
sur la malnutrition<sup>MC</sup>

---

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](https://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.**