Abstract

Background: Immobility syndrome is the impairment of the ability to do the daily vital activities by motor functions deterioration. Muscle mass loss in the hospitalized elderly has very important clinical consequences. Objectives: To identify the changes occurring in a week in the muscle mass of the hospitalized geriatric population, to document changes in the distal thigh, and to identify risk factors. Patients and method: Cross-sectional study of a cohort of 32 hospitalized patients older than 60 years, males and females, who signed acceptance form. Those patients who suffered chronic renal disease, peripheral vascular insufficiency, soft tissue infection, pelvic members edema and receiving diuretics were excluded. We measured distal third of thigh with a metric simple tape the day they were admitted, and third and seventh day of hospitalization. Functional scale was assessed by Barthel Scale. Results: We found a similar distribution of age (70 ± 7.9), gender and marital status; the schooling level was elementary school in 81.3%. We observed maximum five comorbidities; 21.9% of patients were diabetic, 59.4% were hypertensive, 18.8% suffered stroke, 15.6% dyslipidemia, and 12.5% soft tissue infection. The first mean measure was: 45.06; the second was 44.06 and the third was 43.35 cm (U Wilcoxon p < 0.01 y 0.06) with hypoalbuminemia values of 44.28 ± 4.7, 43.64 ± 4.9 and 42.79 ± 5.3, respectively. Barthel’s functional scale was 84 ± 13.58 points. Conclusions: There was a statistically significant decrease between measurements made in the thigh; no clear factors were identified concerning to muscle loss, except trend in relation to education and occupation.

Keywords

Elderly, muscle mass loss, immobility syndrome.