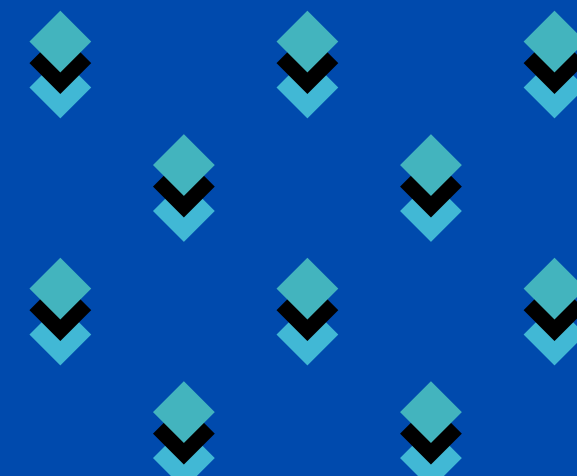


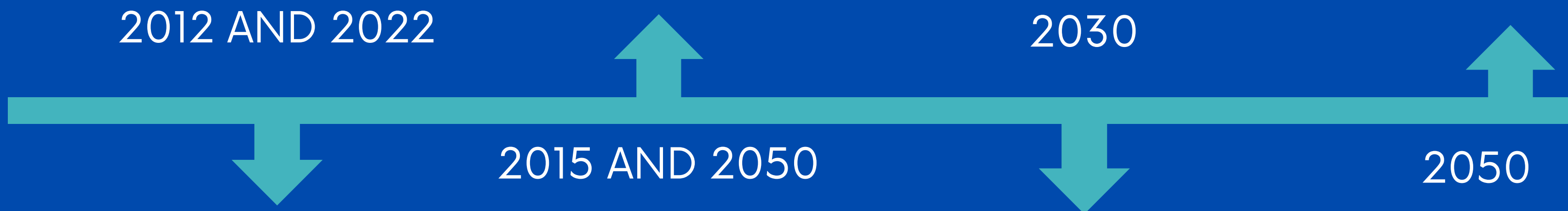
COMISSÃO DO IDOSO DR. MARCOS WAGNER MÉDICO NEUROCIRURGIÃO CAMPINA GRANDE PB





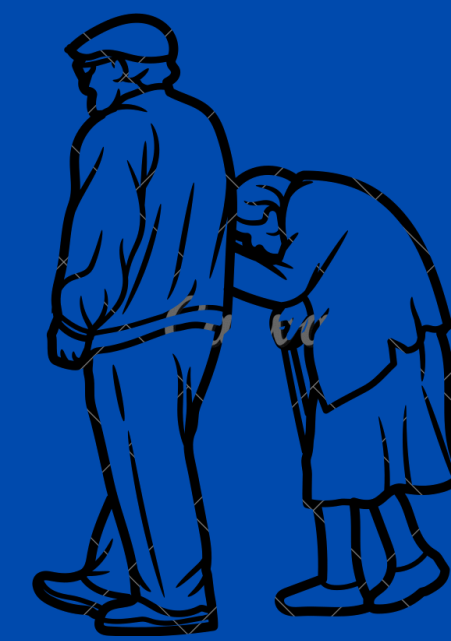
Entre 2015 and 2050, a proporção populacional acima dos 60 anos irá duplicar entre 12% to 22%.
WHO, 2022

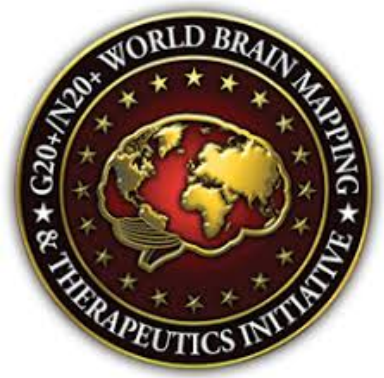
Em 2050, a população >60 anos irá duplicar (2.1 billion)
WHO, 2022








Entre 2012 e 2022:
11,3% a 15,1%;
IBGE, 2022





1 em 6 pessoas no mundo terá 60 anos ou mais
WHO, 2022





CLINICAL FRAILTY SCALE

	1	VERY FIT	People who are robust, active, energetic and motivated. They tend to exercise regularly and are among the fittest for their age.
	2	FIT	People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally , e.g., seasonally.
	3	MANAGING WELL	People whose medical problems are well controlled , even if occasionally symptomatic, but often are not regularly active beyond routine walking.
	4	LIVING WITH VERY MILD FRAILITY	Previously "vulnerable," this category marks early transition from complete independence. While not dependent on others for daily help, often symptoms limit activities . A common complaint is being "slowed up" and/or being tired during the day.
	5	LIVING WITH MILD FRAILITY	People who often have more evident slowing , and need help with high order instrumental activities of daily living (finances, transportation, heavy housework). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation, medications and begins to restrict light housework.

	6	LIVING WITH MODERATE FRAILITY	People who need help with all outside activities and with keeping house . Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing.
	7	LIVING WITH SEVERE FRAILITY	Completely dependent for personal care , from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~6 months).
	8	LIVING WITH VERY SEVERE FRAILITY	Completely dependent for personal care and approaching end of life. Typically, they could not recover even from a minor illness.
	9	TERMINALLY ILL	Approaching the end of life. This category applies to people with a life expectancy <6 months , who are not otherwise living with severe frailty . (Many terminally ill people can still exercise until very close to death.)

SCORING FRAILITY IN PEOPLE WITH DEMENTIA

The degree of frailty generally corresponds to the degree of dementia. Common **symptoms in mild dementia** include forgetting the details of a recent event, though still remembering the event itself, repeating the same question/story and social withdrawal.

In **moderate dementia**, recent memory is very impaired, even though they seemingly can remember their past life events well. They can do personal care with prompting.

In **severe dementia**, they cannot do personal care without help.

In **very severe dementia** they are often bedfast. Many are virtually mute.



Clinical Frailty Scale ©2005–2020 Rockwood, Version 2.0 (EN). All rights reserved. For permission: www.geriatricmedicinere search.ca
 Rockwood K et al. A global clinical measure of fitness and frailty in elderly people. CMAJ 2005;173:489–495.



Initial questions	Follow-up questions	Symptom characterization	KPS %	Comments
Is the patient able to carry on with his/her normal work or activity?	A Does the patient have symptoms? (pain, loss or gain of weight, reduced energy etc.)	No symptoms.	100	Normal, no complaints, no evidence of disease.
		Mild symptoms.	90	Able to carry on normal activity, minor signs or symptoms of disease.
		Moderate symptoms.	80	Normal activity with effort, some signs or symptoms of disease.
Is the patient bedridden for more than half a day?	B Does the patient need assistance? (grooming, food intake, dressing, other daily activities)	No assistance.	70	Cares for self, unable to carry on normal activity or to do active work.
		Occasional assistance.	60	Requires occasional assistance, but is able to care for most of his needs.
		Considerable assistance.	50	Requires considerable assistance and frequent medical care.
Is the patient bedridden for more than half a day?	C What is the patient's degree of disability in terms of bed confinement?	Bedridden in more than 50 % of the time.	40	Disabled, requires special care and assistance.
		Almost completely bedridden.	30	Severely disabled, hospitalization is indicated although death not imminent.
		Completely bedridden and dependent upon extensive nursing care by professionals and/or family.	20	Hospitalization necessary, very sick, active supportive treatment necessary.
		Completely bedridden and comatose or barely arousable.	10	Moribund, fatal processes progressing rapidly.
		Dead.	0	Dead.



TO ILLUSTRATE WHAT HAS BEEN SAID BEFORE:

Brazil's demographic pyramid

X

Germany's demographic pyramid

