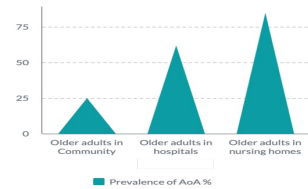




Introduction

Definition: Anorexia of Aging (AoA) is the age-related reduction in appetite and food intake, leading to malnutrition, frailty, and increased mortality. (1)

Prevalence: Affects **25%** of older adults in the community, **62%** in hospitals, **85%** in nursing homes (2). AoA contributes to a **3-fold increase** in hospital admissions and **2.5 times** higher mortality rates among affected individuals (3).



Significance: AoA is often seen in clinical practice and can initially be attributed to psychiatric causes. Collaborative approaches involving psychiatry, geriatrics, and nutrition ensure comprehensive care and accurate management, reducing the risks associated with misinterpretation and unnecessary treatments

Objectives

- **Primary Goal:** Develop a patient-centered, stepwise clinical approach for managing AoA in hospitalized elderly patients
- **Specific Aims:** Identify key risk factors for malnutrition (clinical, physiological, psychological, environmental, and socioeconomic).
- Propose an interdisciplinary team approach, integrating psychiatry, geriatrics, and nutrition, to guide interventions.

AoA management – Stepwise approach



Figure 1: AoA management

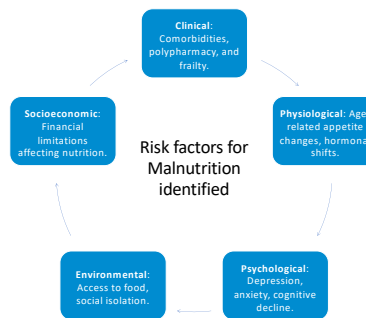


Figure 2: Risk factors for malnutrition

Methods

- **Literature Review:** PubMed search focusing on studies with patients aged 65+ that discussed AoA management.
- Inclusion of studies with any design discussing anorexia, nutrition, and psychiatric consultation in elderly patients.

Results

- A comprehensive search of the PubMed database yielded **217 articles** since 2005 on **Anorexia of Aging (AoA)** in patients aged **65 and older**. Of these, **35 articles** specifically addressed the **assessment and management** of AoA.
- Key findings from the reviewed studies highlight the need for a **multidisciplinary approach** to adequately assess AoA in hospital settings.
- **Stepwise Approach Development:** Based on review findings, we developed a stepwise strategy for hospital teams to systematically assess and manage AoA.
- **Interdisciplinary Collaboration:** Psychiatry, geriatric medicine, and nutritionists working together can reduce unnecessary psychiatric referrals and overmedication, ensuring tailored interventions.

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