

Cognitive frailty and anxiety in older adults: A scoping review

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Background: Cognitive frailty (CF) is a syndrome affecting older adults, involving a combination of physical frailty and cognitive impairment. CF has been associated with adverse outcomes in older adults, including hospitalisation, mortality, disability, and increased falls. The relationship between depression and CF, and fear of falling and CF, has been well-documented. Less is known about how other psychological conditions, including anxiety, may contribute to CF.

We drew upon the PRISMA scoping review approach (Tricco et al., 2018).

- (1) What is the scope or coverage of literature on anxiety and cognitive frailty in older adults?
- (2) How have anxiety and cognitive frailty been measured and analysed in older adults?

Research Design and Methods:

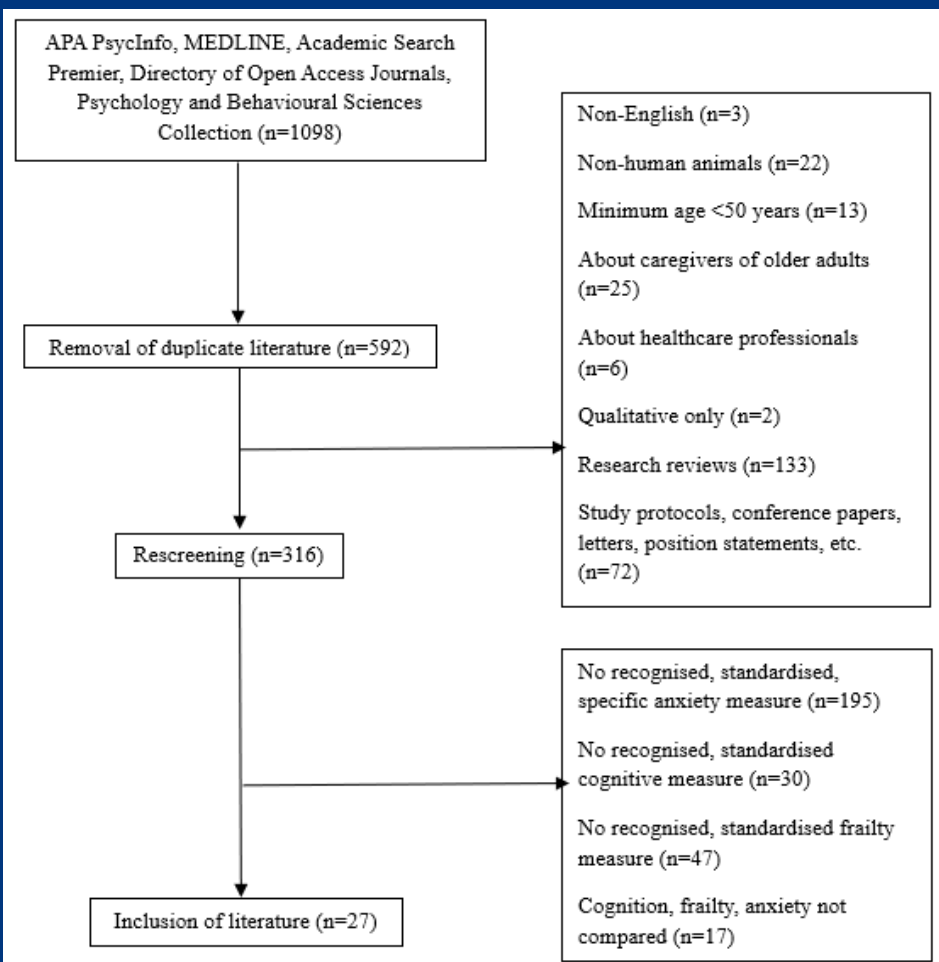
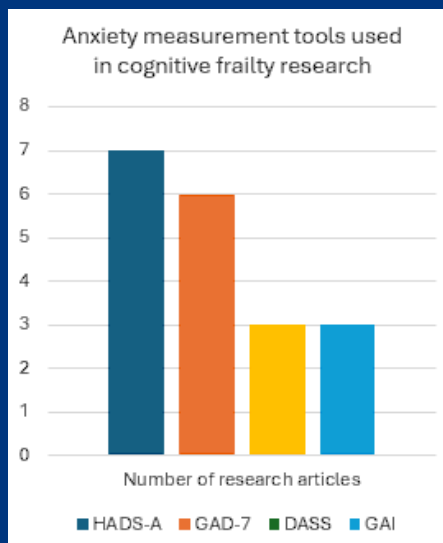
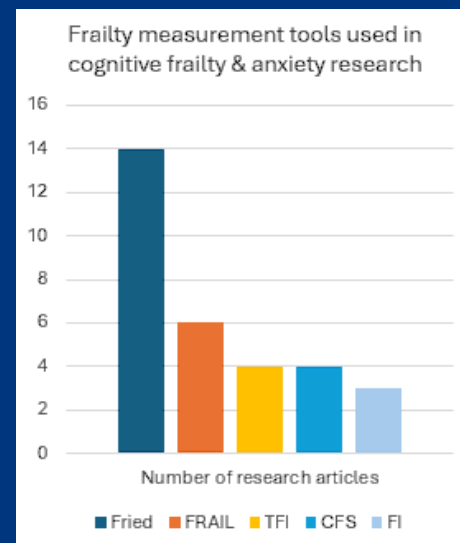


Figure 1: Scoping review procedure

Results: Most studies exploring cognitive frailty and anxiety were cross-sectional, conducted in Asia or Europe, and examined community-dwelling older adults, with a sample size between 50 and 500 participants. Most used the MMSE for measuring cognition. The proportion of participants with anxiety ranged from 14.5% to 39.3%. Frailty was present in 6.9% to 80% of participants. Cognitive decline was observed in 17.7% to 67.0% of participants. Only 5 articles explicitly discussed CF. Most articles showed that anxiety was significantly positively associated with the presence of cognitive decline and physical frailty.



HADS-A: Hospital Anxiety Depression Scale-Anxiety; GAD-7: Generalised Anxiety Disorder-7; DASS: Depression Anxiety Stress Scale; GAI: Geriatric Anxiety Index.



Fried: Fried phenotypic criteria; FRAIL: Fatigue, Resistance, Ambulation, Illness, Loss of Weight scale; TFI: Tilburg Frailty Indicator; CFS: Clinical Frailty Scale; FI: Frailty Index.

Discussion: The tools used to measure anxiety and CF in older populations widely vary. Symptoms of anxiety, depression, and CF can be difficult to tease apart, and the directionality of these associations needs further exploration due to a lack of longitudinal research. Researchers agree that there is a lack of research regarding anxiety and CF. Treating anxiety symptoms in older adults early on may be crucial to preventing the development of CF, easing the burden on caregivers and the medical system, and prolonging quality of life.