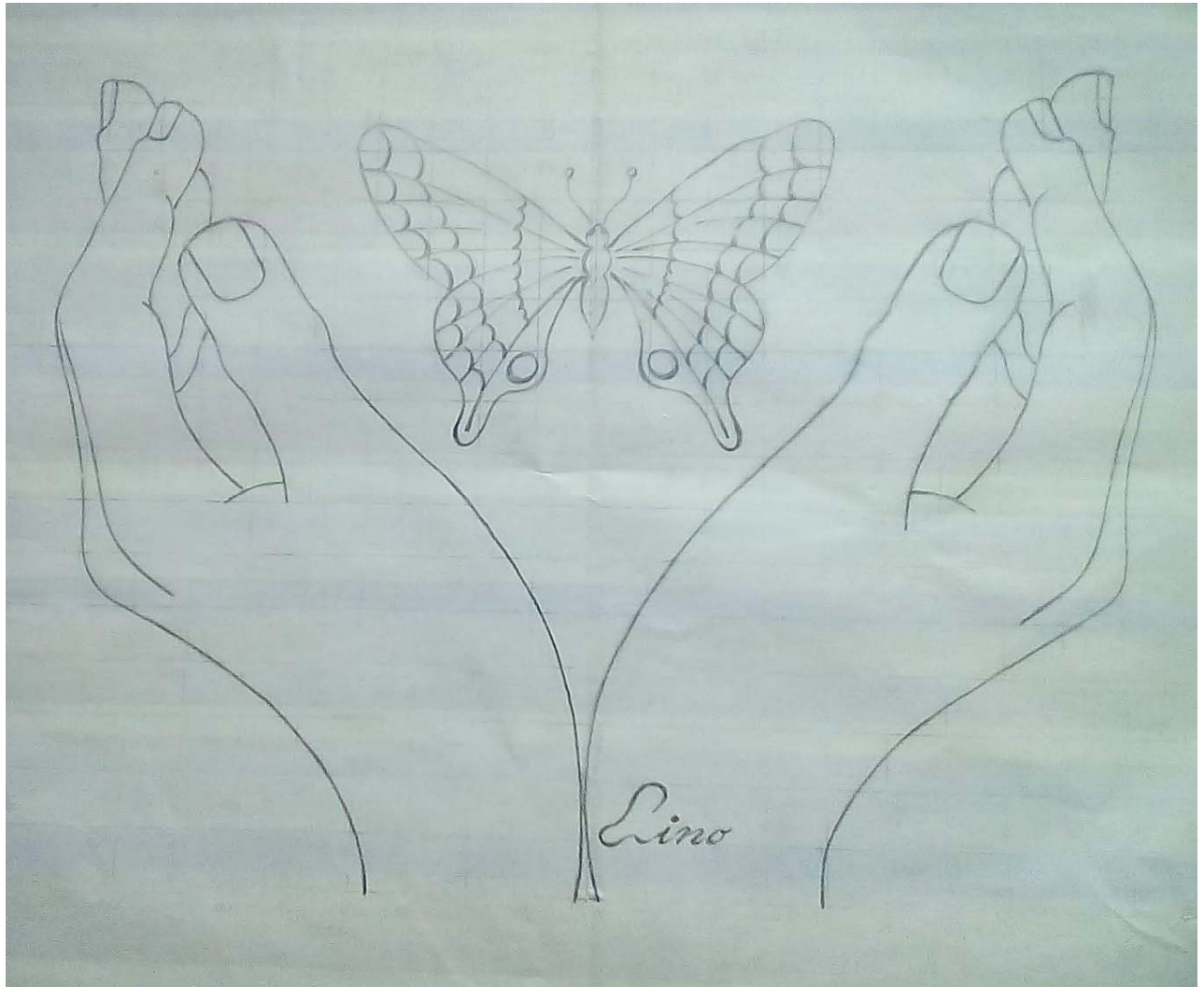


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EFFICACY OF PROTHER IN PATIENTS WITH SARCOPENIA AND DYSPHAGIA: MEDICAL AND NURSING ASPECTS.

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KEYWORDS: Sarcopenia, medical aspect, nursing aspect.

KEY-WORDS: SARCOPENIA, DYSPHAGIA, ORAL FOOD SUPPLEMENTATION.

ABSTRACT

Aim: the aim of our study is to evaluate the efficacy of Prother^(R) for the treatment of Sarcopenia associated with dysphagia. **Materials and Methods:** In our study, 12 subjects affected by sarcopenia associated with dysphagia were enrolled. All enrolled subjects, aged over 50 years, voluntarily agreed to undergo screening for sarcopenia and dysphagia and subsequent outpatient follow-up for oral food supplementation with Prother^(R). Sarcopenia was assessed by performing 4-electrode body bioimpedance to derive the four variables under examination (FM, FFM, ECM, BCM) while dysphagia was assessed by swallowing test. The 1-month follow-up was carried out at the Geriatrics Outpatient Clinic of Fondi Hospital. All patients consented to perform the screening procedure and to process the personal data. **Results:** Data analysis revealed a non-statistically significant change in the bioimpedance value after 1 month of therapy. The granular formulation of Prother^(R) made protein supplementation possible in dysphagic patients. Evaluations afhter 3 months are necessary to re-evaluate the changes in body mass induced by therapy. No statistically significant changes were observed in the parameters relating to the bioimpedance performed during the first month of the study (FM, FFM, ECM, BCM). **Discussion:** The data in the table show that Prother^(R) therapy allows for an increase in body weight in patients with sarcopenia and dysphagia. The changes found after only 1 month of therapy are not statistically significant. The data from skin bioimpedance also seem to confirm the changes, although not statistically significant, in the values of fat mass and free fat mass mass in the patients during the follow-up period. It

is necessary to expand the group of subjects enrolled in the study and wait data about the 3-month follow-up period to re-evaluate any changes in the variables under examination. **Conclusions:** The pilot study we conducted allowed us to demonstrate that Prother^(R) represents a possible alternative to the treatment of sarcopenia in dysphagic patients. The data collected in the pilot study are encouraging but not statistically significant. The follow-up of patients after 3 months of treatment are necessary to evaluate the changes in bioimpedance parameters. The concomitant presence of sarcopenia and other comorbidities makes the follow-up evaluation more difficult due to the poor compliance of patients to the follow-up for the repetition of bioimpedance analysis. Currently, the size of the sample under examination is not sufficient to make a conclusive evaluation that can be extended to the entire population.

TABLE

	BASE $\pm$ DS	CONTROL $\pm$ DS	Probability (P)
Weight (Kg)	46,424 $\pm$ 6,133	47,357 $\pm$ 5,539	0,231
Height (cm)	163,000 $\pm$ 10,119	163,000 $\pm$ 10,119	0,969
BMI	17,310 $\pm$ 2,379	17,690 $\pm$ 2,364	0,442
FM	12,500 $\pm$ 3,355	11,149 $\pm$ 3,687	0,382
FFM	34,560 $\pm$ 2,137	36,499 $\pm$ 1,918	0,243
ECM	21,814 $\pm$ 1,408	27,017 $\pm$ 1,151	0,470
BCM	12,633 $\pm$ 1,035	15,208 $\pm$ 1,517	0,314

Tab. 1: Descriptive analysis of data relating to bioimpedance parameters before and after treatment with Prother^(R). The probability is considered significant only if $P < 0.050$.

Reference:

Abstract created from the synthesis of the experimental section of the thesis. Authors: **Farruggio Sofia**

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