



RECOMMENDATIONS

Sarcopenia Guideline 2018-2019

BVGG - SBGG

ASSESSMENT



RISK FACTORS

- **Cigarette smoking** as an isolated factor may contribute to the development of sarcopenia and can be identified as a possible risk factor (odds ratios = 1.12(95 % CI 1.03-1.21)). Alcohol consumption and osteoarthritis are not considered as a possible risk factor.



MUSCLE MASS

- For estimating the muscle mass in the context of sarcopenia, we recommend to use **relative indices** (height, body weight); e.g. appendicular lean mass (ALM, assessed by DXA or BIA) corrected by height² or BMI. We recommend the use of **cut-off values for relative muscle mass** that are proposed by the **international working groups on sarcopenia** (EWGSOP, FNIH, IWGS).



MUSCLE STRENGTH

- We recommend **maximum handgrip strength** of the **dominant** hand to assess general muscle strength. We recommend categorising patients according to the **normative values for healthy young people**.



PHYSICAL PERFORMANCE

- At this moment, best evidence is available for using **gait speed** to appraise physical performance in a clinical setting. We recommend categorizing subjects according to the **normative values for healthy young people** as presented in the recommendation by using the **4m usual gait speed** protocol.

INTERVENTION



PHARMACOLOGY

- We recommend **vitamin D supplementation** to improve muscle strength and physical performance in older people, especially women, with low baseline serum levels. **Testosterone supplementation** may be considered in older men with serum levels < 200–300 ng/dl and clinical muscle weakness, to improve muscle mass and muscle strength.



EXERCISE

- We recommend **resistance training and multimodal exercise** to improve muscle strength, muscle mass and physical performance for healthy, pre-sarcopenic or sarcopenic older people since evidence shows a significant and positive effect. We recommend **occlusion training** at a low intensity under supervision of a trained exercise coach to improve muscle strength.



NUTRITION

- At this moment best evidence is available to recommend **leucine** supplementation since it has a significant effect on muscle mass in persons with sarcopenia. **Protein supplementation on top of resistance training** is recommended to increase muscle mass and muscle strength. This supplementation is particularly advised for persons with obesity and should be performed at least for 24 weeks to achieve optimal results.