

Paper Category:	Diagnosis and Aetiology
Paper Title: (Arial Font; 14 Pt Size)	Phenotype Validation of Korean Working Group on Sarcopenia Guideline
Abstract Body: (Arial Font; 12Pt Size)	<ul style="list-style-type: none"> • Background • Objectives • Method • Results • Discussions and Conclusions
<p>(Maximum word limit - 300 words)</p> <p>Background The Korean Working Group on Sarcopenia (KWGS) guideline, which introduced the concept of functional sarcopenia, has been proposed but has not yet been validated.</p> <p>Objectives This study aimed to validate the KWGS guideline in Korean older adults.</p> <p>Methods Data from the Aging Study of PyeongChang Rural Area, a longitudinal cohort of community-dwelling older adults, were utilized. Sarcopenia was evaluated based on the KWGS guideline, considering muscle mass, muscle strength, and physical performance. Severe sarcopenia was defined when all three components were low, while sarcopenia (not severe) was defined when low muscle mass was combined with either low muscle strength or low physical performance. Functional sarcopenia was defined as low muscle strength and low physical performance without low muscle mass. Frailty status (based on the Cardiovascular Health Study frailty phenotype and a 34-item frailty index) and institutionalization-free survival was compared.</p> <p>Results Among the 1,302 participants, 329 (25.3%) had severe sarcopenia, 147 (11.3%) had sarcopenia (not severe), and 277 (21.3%) had functional sarcopenia. Participants with functional sarcopenia, sarcopenia (not severe), and severe sarcopenia exhibited significantly higher frailty levels compared to those with no sarcopenia, irrespective of age and sex. Participants with functional sarcopenia were frailer than those with sarcopenia (not severe), regardless of age and sex. Furthermore, participants with functional sarcopenia, sarcopenia (not severe), and severe sarcopenia had a higher incidence rate of institutionalization and mortality, even after adjusting for age and sex. There was no statistically significant difference between sarcopenia (not severe) and functional sarcopenia.</p> <p>Discussion and conclusions Each phenotype according to the KWGS guideline exhibited significantly higher frailty levels and increased risk of institutionalization and mortality. Functional sarcopenia is associated with greater frailty and has a similar prognostic effect compared to sarcopenia (not severe).</p>	

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