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Prevalence of Sarcopenic Obesity and Fall Risk among Older Adults with Heart Failure- Subanalysis from OPaL-HF Study

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Introduction:

Sarcopenic obesity (SO), the coexistence of reduced skeletal muscle mass and strength with excess adipose tissue, is recognized as a major health concern. Beyond its known link to cardiovascular events and mortality, SO is emerging as a key factor in fall risk, a leading cause of mortality among older adults.

Objectives:

We aim to explore the prevalence of SO among Malaysian cohorts living with heart failure (HF) and its association with fall risk.

Methods:

This is a subanalysis of the OPaL-HF study, a single-centre, cross-sectional investigation conducted at a tertiary cardiac centre, including heart failure patients aged ≥ 60 years. Probable sarcopenia was identified using handgrip strength tests according to the Asian Working Group for Sarcopenia (AWGS) criteria. People with obesity and low handgrip strength were classified as having SO.

Results:

A total of 211 participants were included (mean age 68.7 ± 6.9 years; mean LVEF $44.8 \pm 13.1\%$). SO was present in 58 participants (27.5%). Among those with SO, 48.3% (28/58) reported at least one fall in the preceding year. SO was significantly associated with falls, with affected individuals demonstrating a two-fold increased odds of experiencing a fall (OR 2.17, 95% CI 1.17– 4.04, $p < 0.05$). Individuals with SO also demonstrated significantly longer Timed Up and Go (TUG) test times (14.17 ± 2.86 s vs. 13.08 ± 2.40 s), indicating poorer functional mobility ($p = 0.006$).

Conclusion:

SO is common among older persons living with heart failure and is significantly associated with an increased risk of falls. These findings highlight the importance of integrating routine muscle strength and obesity assessment into standard HF care to enable early identification of high-risk individuals and implementation of targeted fall-prevention strategies.