Clinical Frailty Scale®



I Very Fit — People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.



2 Well – People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally, e.g. seasonally.



3 Managing Well — People whose medical problems are well controlled, but are not regularly active beyond routine walking.



4 Vulnerable – While not dependent on others for daily help, often symptoms limit activities. A common complaint is being "slowed up", and/or being tired during the day.



5 Mildly Frail — These people often have more evident slowing, and need help in high order IADLs (finances, transportation, heavy housework, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework.



6 Moderately Frail — People need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing.

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7 Severely Frail – Completely dependent for personal care, from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~ 6 months).

8 Very Severely Frail – Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness.



9. Terminally III - Approaching the end of life. This category applies to people with a life expectancy <6 months, who are not otherwise evidently frail.

Scoring frailty in people with dementia

The degree of frailty corresponds to the degree of dementia. Common **symptoms in mild dementia** include forgetting the details of a recent event, though still remembering the event itself, repeating the same question/story and social withdrawal.

In **moderate dementia**, recent memory is very impaired, even though they seemingly can remember their past life events well. They can do personal care with prompting.

In severe dementia, they cannot do personal care without help.

- * 1. Canadian Study on Health & Aging, Revised 2008.
- 2. K. Rockwood et al. A global clinical measure of fitness and frailty in elderly people. CMAJ 2005;173:489-495.



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- **1. Very Fit** People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.
- **2.** Well People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally, *e.g.* seasonally. Well older adults share most attributes of the very fit, except for regular, vigorous exercise. Like them, some may complain of memory symptoms, but without objective deficits.
- **3. Managing Well** People whose medical problems are well controlled, but are not regularly active beyond routine walking. Those with treated medical problems who exercise are classed in categories 1 or 2.
- **4. Vulnerable** While not dependent on others for daily help, often symptoms limit activities. A common complaint is being "slowed up", and/or being tired during the day. Many rate their health as no better than "fair". Memory problems, if present, can begin to impact on function (e.g. having to look up familiar recipes, misplacing documents) but usually do not meet dementia criteria. Families often note some withdrawal -e.g. needing encouragement to go to social activities.
- **5. Mildly Frail** These people often have more evident slowing, and need help in high order IADLs (finances, transportation, heavy housework, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework. Often, these people have several illnesses, and take several medications. This category includes people with mild dementia. Their common symptoms include forgetting the details of a recent event, even though they remember the event itself, asking the same question, or telling the same story several times a day and social withdrawal.
- **6. Moderately Frail** People need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing. If a memory problem causes the dependency, often recent memory will be very impaired, even though they seemingly can remember their past life events well.
- **7. Severely Frail -** Completely dependent for personal care, from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~ 6 months).
- **8.** Very Severely Frail Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness.
- **9. Terminally Ill** Approaching the end of life. This category applies to people with a life expectancy of <6 months, who are not otherwise evidently frail.
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