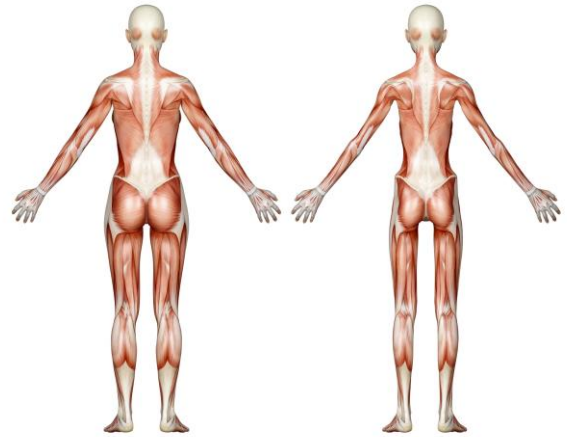


About Sarcopenia

Sarcopenia is the progressive decline in skeletal muscle and loss of physical function as a result of chronological aging. Sarcopenia is one of the most prevalent muscle diseases of the elderly and the onset of sarcopenia may begin as early as 30 years of age. This results in a loss of one per cent -or one third of a pound- of muscle each year, ultimately leading to a diminished quality of life with age.



Facts & Figures

Who is affected by sarcopenia

- Humans are susceptible to developing sarcopenia at the age of 30. There are currently over 23 million adults over the age of 29 in Canada (64 per cent of Canadians)¹
- Almost half of Canadians (46.3%) are physically inactive and do not get the amount of moderate-to-vigorous physical activity required to be considered physically active. Canadian adults are reported to spend about 70 per cent of their waking hours, or 9.5 hours, sedentary.
- Rising rates of obesity are evident among Canadians of all ages and seniors are no exception. Between 1978/1979 and 2004, the incidence of obesity among seniors aged 75 or older increased from 11% to 24%; among those aged 65 to 74, it increased from 20% to 25%.²

The aging population

- Sarcopenia is one of the major causes of disability in older persons and can prevent elderly people from performing the most basic tasks of daily living, and greatly increases their risk of suffering falls and other serious accidents.³
- The more muscle mass older people have, the less likely they are to die prematurely⁴

Early detection

- Many patients at an early stage of sarcopenia are undetected. This is a major problem, because there is strong evidence that sarcopenia is a reversible cause of disability and because older persons with early sarcopenia are probably those who are most likely to benefit from interventions.⁵

¹ Statistics Canada, CANSIM, table 051-0001.

² StatsCan. A portrait of seniors, 2006

³ Brink W (2007) Preventing Sarcopenia. LifeExtension Magazine

⁴ University of California - Los Angeles Health Sciences, March 14, 2014.

⁵ Journal of Applied Physiology Published 1 November 2003 Vol. 95 no. 5, 1851-1860 DOI: 10.1152/jappphysiol.00246.2003

The cost of sarcopenia

- The economic impact of physical inactivity on the Canadian health care system can be substantial and has been estimated at \$5.3 billion, or 2.6% of total health care costs in Canada in 2001.⁶ Even though sarcopenia contributes to numerous other health problems and accounts for a similar percentage of health care costs as osteoporosis, no public health campaigns are directly aimed at reducing this disease.⁷

Recommended treatment

- It's important to seek training from a professional trainer, for optimal benefits with a minimal risk of injury, correct intensity and frequency of exercise.
- Regular exercise, particularly high-intensity weight training, and nutritional supplementation is essential for preserving and increasing muscle mass. In addition to building muscle, strength training promotes mobility, enhances fitness, and improves bone health.⁸
- Two decades of age-associated strength loss can be regained in approximately two months of resistance exercise and can increase protein synthesis rates in older adults in as little as two weeks.⁹

⁶ Gilmour, Heather. 2007. "Physically active Canadians." *Health Reports*. Vol. 18, no. 3. August.

⁷ Morley JE, Anker SD, von Haehling S. Prevalence, incidence, and clinical impact of sarcopenia: facts, numbers, and epidemiology - update 2014. *J Cachexia, Sarcopenia and Muscle*, 2014;5(4):253-259.

⁸ Brink W (2007) Preventing Sarcopenia. *LifeExtension Magazine*

⁹ University of California - Los Angeles Health Sciences, [March 14, 2014](#).