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Performance-based and Self-reported Physical Functions and Associated Co-morbidities among Community-dwelling Older People in Embilipitiya MOH Area

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Background: Physical Functions (PF) in performance based and self-reported ways are essential parameters for health assessment in older people that can be further influenced by co-morbidity.

Objectives: To assess the level of self-reported PF (SRPF) and performance-based PF (PBPF) and associated co-morbidities among community-dwelling older people in Embilipitiya Medical Officer of Health (MOH) area.

Methods: A descriptive cross-sectional study was conducted with randomly selected community-dwelling older people (n=200) aged 65-80 years living in Embilipitiya MOH area. Short Physical Performance Battery (SPPB) was used to study PBPF while SRPF was studied using 10-items of PF in short-form 36 survey. Co-morbidities were assessed by using clinical diagnosis mentioned in the medical records. The cut-off values of SRPF were <33=poor function, 34-66=moderate function and >67=full function while cut-off values of SPPB were <10=worst performance and >10=best performance. The data were analysed using descriptive statistics and Chi-square test.

Results: Of the participants, 50.5% were females and a majority (70.0%) were in age category of 65-70 years. Based on the PBPF, 32.5% (n=65) had worst performance and 67.5% (n=135) had best performance. With regards to the SRPF, 28.5% (n=57) had poor function, 49.0% (n=98) had moderate level of function and 22.5% (n=45) reported the full function. Having diabetes mellitus ($p=0.004$) and malignancies ($p=0.006$) has shown significant associations with PBPF. Further, diabetes mellitus ($p=0.02$), asthma ($p=0.02$), anaemia ($p<0.001$) and osteoarthritis ($p=0.02$) have shown significant associations with SRPF.

Conclusions: Despites the way of measurement of PF, a reasonable percentage of older people living in the studied area had poor PF. Further, co-morbidities are influenced on SRPF and PBPF the tested population.

Keywords: Co-morbidities, Older people, Performance based, Physical function, Self-reported