

A COMPARISON OF FUNCTIONAL STATUS BETWEEN HEALTHY ELDERERS AND ELDERLY CARDIAC PATIENTS

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Purpose: Functional status is an important determinant of outcomes in cardiac patients. Few normative data exist for functional status measures and virtually none have controlled for the independent impact of aging on functional status.

Our purpose was to compare functional status in healthy elders and elderly patients with cardiac disease.

Method: We compared baseline functional status data from 63 patients (mean age 67 ± 8 years; 39% women) participating in a cardiac rehabilitation program after a recent cardiac event with that of 128 community-dwelling ethnically diverse (31% African American) healthy elders (mean age 74 ± 6 years; 75% women) without cardiac disease.

Functional status was measured using the Duke Activity Status Index (DASI), a reliable and valid self-administered instrument in which items are weighted based on the metabolic equivalents (METS) required to perform each activity. Higher scores on the DASI indicate a higher functional status.

Findings: The possible range of scores is 0 - 58.2. Cardiac patients reported a DASI score of 12.89 ± 14.52 while the DASI score for healthy elders was 58% higher at 30.45 ± 15.85 ($p < .001$). There were no gender differences in DASI scores in either healthy elders or cardiac patients.

Discussion: Lower functional status in elder cardiac patients is independent of the effects of aging and gender. These results provide normative data in healthy elders that can be used for comparison with cardiac populations.