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Sutton, Jennifer L., Gould, Rebecca L., Coulson, Mark, Ward, Emma V. ORCID: <https://orcid.org/0000-0002-2076-832X>, Butler, Aine M., Smith, Megan, Lavelle, Grace, Rosa, Amy, Langridge, Margret and Howard, Robert J. (2019) Multicomponent frailty assessment tools for older people with psychiatric disorders: a systematic review. *Journal of the American Geriatrics Society*, 67 (5) . pp. 1085-1095. ISSN 0002-8614 (doi:10.1111/jgs.15710)

Supplementary material

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Figure 2: Key findings in relation to the study aims

Aim 1 - To establish if any existing frailty assessment tools have been developed for or validated in older adult psychiatric populations

- Of the 48 multi-component frailty assessment tools identified, no tool has been developed for, or validated in, older adult psychiatric populations.

Aim 2 – To establish any construct overlap between the assessment domains of the existing multi-component frailty assessment tools and the DSM–5 diagnostic criteria for psychiatric disorders in older adults.

- Assessment domains of 41/48 multi-component frailty assessment tools significantly overlap with DSM-5 diagnostic criteria for psychiatric disorders.
- Indicators of frailty which significantly overlap with DSM-5 diagnostic criteria include: Weight loss/appetite changes (a diagnostic criterion in major depressive episode and bipolar affective disorder), fatigue (a diagnostic criterion in major depressive episode, bipolar affective disorder and generalised anxiety disorder), reduced concentration/processing skills (a diagnostic criterion in major depressive episode, bipolar affective disorder and generalised anxiety disorder), slowness (a diagnostic criterion in major depressive episode and bipolar affective disorder), reduced activity levels (a diagnostic criterion in schizophrenia) and sleep disturbances (a diagnostic criterion in major depressive episode, bipolar affective disorder and generalised anxiety disorder).
- Twenty-one frailty assessment tools contain a psychological assessment domain, explicitly measuring mental health symptoms.
- Eighteen frailty assessment tools include the presence of depressed mood and/or anxiety as a frailty indicator.
- Twelve frailty assessment tools include questions from existing psychiatric assessment tools to assess frailty indicators (e.g. questions from the CES-D to establish fatigue).
- A classification of frailty/pre-frailty can be made solely on the basis of mental health symptoms in 15/31 tools in which there is a clear cut-off point to establish frailty.
- Most construct overlap was observed in relation to major depressive episode (and hence the depressive criteria for bipolar affective disorder) and generalised anxiety disorder.