

下方浩史、安藤富士子	サルコペニアのスクリーニング指標	鈴木隆雄（監修）、島田裕之（編集）	サルコペニアの基礎と臨床	真興交易	東京	2011	72-80
原田敦、松井康素、下方浩史	認知症高齢者と骨粗鬆症との関連は	武藤芳照、鈴木みずえ（編集）	認知症高齢者の転倒予防とリスクマネジメント	日本医事新報社	東京	2011	51-54

雑誌

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若林弘樹、 <u>須藤啓広</u> 、西岡洋右、長谷川正裕、西岡久寿樹	関節リウマチ患者におけるアダリムマブの治療効果 生物学的製剤初回群と切り替え群の比較・検討.	整形外科	62	1371-1374	2011
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IV. 研究成果の刊行物・別刷

Reference values for hand grip strength, muscle mass, walking time, and one-leg standing time as indices for locomotive syndrome and associated disability: the second survey of the ROAD study

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Abstract

Background We established reference values for hand grip strength, muscle mass, walking time, and one-leg standing time as indices reflecting components of locomotive syndrome and associated disability using a large-scale population-based sample from the second survey of the Research on Osteoarthritis/Osteoporosis Against Disability (ROAD) cohort.

Methods We measured the above-mentioned indices in 2,468 individuals ≥ 40 years old (826 men, 1,642 women; mean age 71.8 years) during the second visit of the ROAD study. Disability was defined as certified disability according to the long-term care insurance system through public health centres of each municipality.

Results Mean values for hand grip strength (weaker side), muscle mass of the thighs, walking time for 6 m at the

usual pace, and the fastest pace for men were 32.7 kg, 7.0 kg, 5.6 s, and 3.7 s, respectively, and those for women were 20.8 kg, 5.2 kg, 5.9 s, and 4.1 s, respectively. The median values for one-leg standing time (weaker side) were 14 s for men and 12 s for women. The prevalence of disability in men aged 65–69, 70–74, 75–79, and ≥ 80 was 0.0, 1.0, 6.3, and 8.8%, respectively, and in women was 3.4, 3.5, 9.2, and 14.7%, respectively. There were significant associations between the presence of disability and walking time for 6 m at the usual pace and at the fastest pace, and between the presence of disability and walking speed.

Conclusions We established reference values for indices reflecting components of locomotive syndrome, and identified significant associations between walking ability and disability.

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