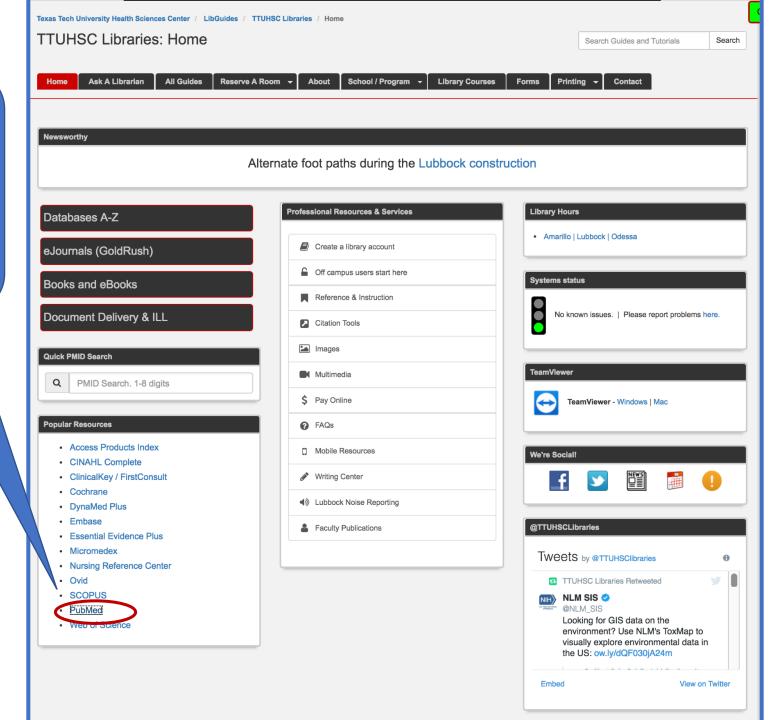
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Denfeld QE, Winters-Stone K, Mudd JO, Hiatt SO, Lee CS.

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PMID: 28353543

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## Identifying a Relationship Between Ph Symptoms.

Denfeld QE<sup>1</sup>, Winters-Stone K, Mudd JO, Hiatt SO, Lee CS.

Author information

#### **Abstract**

**BACKGROUND:** Heart failure (HF) is a complex clinical syndrome associated with significant symptom burden; however, our understanding of the relationship between symptoms and physical frailty in HF is limited.

**OBJECTIVE**: The aim of this study was to quantify associations between symptoms and physical frailty in adults with HF.

**METHODS:** A sample of adults with symptomatic HF were enrolled in a cross-sectional study. Physical symptoms were measured with the HF Somatic Perception Scale-Dyspnea subscale, the Epworth Sleepiness Scale, and the Brief Pain Inventory short form. Affective symptoms were measured with the Patient Health Questionnaire-9 and the Brief Symptom Inventory-Anxiety scale. Physical frailty was assessed according to the Frailty Phenotype Criteria: shrinking, weakness, slowness, physical exhaustion, and low physical activity. Comparative statistics and generalized linear modeling were used to quantify associations between symptoms and physical frailty, controlling for Seattle HF Model projected 1-year survival.

**RESULTS:** The mean age of the sample (n = 49) was  $57.4 \pm 9.7$  years, 67% were male, 92% had New York Heart Association class III/IV HF, and 67% had nonischemic HF. Physically frail participants had more than twice the level of dyspnea (P < .001), 75% worse wake disturbances (P < .001), and 76% worse depressive

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