iCAHE JC Critical Appraisal Summary

Journal Club Details

Journal Club location	Repat
JC Facilitator	Caroline Bartle
JC Discipline	Dietetics

Clinical Scenario

In practice, it may be appropriate to adjust BMI classifications for people aged \geq 65 years to:

· Underweight <23 kg/m2

- · Healthy weight 24-30 kg/m2
- · Overweight >30 kg/m2

Article/Paper

Winter JE et al. (2014) "BMI and all-cause mortality in older adults: a meta-analysis." Am J Clin Nutr, 99:875–90

Please note: due to copyright regulations CAHE is unable to supply a copy of the critically appraised paper/article. If you are an employee of the South Australian government you can obtain a copy of articles from the <u>DOHSA librarian</u>.

Article Methodology:

Systematic Review & Meta-analysis

Click here to access critical appraisal tool



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CONTACTS

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CRICOS Provider Number 00121B



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Ques No.	Yes	Can't Tell	No	Comments
1	✓			Did the review address a clearly focused question? The objective was to determine the association between BMI and all-cause mortality risk in adults >65 y of age.
2	✓			Did the authors look for the appropriate sort of papers? Studies identified were prospective cohort studies in community- living adults aged >65 years. Given the aim of this study these are the most appropriate type of studies to include.
				Is it worth continuing? Yes
				Do you think the important, relevant studies were included?
3		~		A very thorough methodology section is provided, which adds to the rigour of the study. However, only two databases appear to be searched. These two databases are unlikely to contain 'all' the research published in this area. I think they should have considered a broader search of the databases.
				Did the review's authors do enough to assess the qualit of the included studies?
4	✓			Publication biases was evaluated using funnel plots and Egger's regression.
5	~			If the results of the review have been combined, was it reasonable to do so?
				Yes, homogenous data between studies was combined
				What are the overall results of the reviews?
6				For older populations, being overweight was not found to be associated with an increased risk of mortality; however, there was an increased risk for those at the lower end of the recommended BMI range for adults. Because the risk of mortality increased in older people with a BMI <23.0, it would seem appropriate to monitor weight status in this group to address any modifiable causes of weight loss promptly with due consideration of individua comorbidities.
				How precise are the results?
7	~			Based on the statistical analysis the results of this study are likely to be precise. The only limitation is that they considered BMI and mortality, but not other factors such as waist circumference, diet etc.
				Can the results be applied to the local population?
	Journal Club to discuss and email answers to Olivia Thorpe			Consider whether
				- the patients covered by the review could be
8				sufficiently different to your population to
				cause concern
				- your local setting is likely to differ much from
			that of the review	

9	Were all important outcomes considered?
10	Are the benefits worth the harms and costs?
10	What do the study findings mean to practice (i.e. clinical practice, systems or processes)?
11	What are your next steps? (e.g. evaluate clinical practice against evidence-based recommendations; organise the next four journal club meetings around this topic to build the evidence base; organize training for staff, etc.)
12	What is required to implement these next steps?

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The International Centre for Allied Health Evidence (*i*CAHE) For more information on CAHE Journal Clubs email <u>iCAHEjournalclub@unisa.edu.au</u> To receive CAHE updates register online at <u>www.unisa.edu.au/cahe</u>