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Malnutrition, Acute Sarcopenia and Wasting Syndromes during Hospital Stay

Guest Editor:

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Message from the Guest Editor

Dear Colleagues,

It has recently become evident that the preservation of muscle health and functional status during hospital stay would be of paramount importance for older people. In this vulnerable population, hospitalizations represent major risks for adverse outcomes. Despite acute disease resolution, more than half of older people do not recover preadmission functional levels, even 1 year after hospital discharge. Moreover, their risk of novel disabilities, institutionalization and death increases after hospital discharge.

Poor patient mobility is one of the main causes of the development of nosocomial-related disability. Bedrest can induce skeletal muscle loss both in young and (to a greater extent) older individuals. In addition, inflammation, immune–endocrine dysregulations and reduced caloric intake further concur to acute muscle insufficiency during hospital stay. Few studies have evaluated acute sarcopenia thus far, mechanisms underpinning acute sarcopenia, its long-term consequences, screening and treatments have not yet been completely clarified, and further research on this topic is needed.







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