

Stronger than Sarcopenia



What is Sarcopenia?



Starting at age 30, the body naturally starts to lose 3–5% of muscle per decade. If muscle loss continues, it can advance to a condition called sarcopenia. Sarcopenia (saar-ko-pee-ni-uh) is the loss of muscle and strength that can happen when someone gets older and does less physical activity. This may cause trouble with daily activities like standing from a chair, walking, twisting the lid off a jar, or carrying groceries. Over time, loss of strength can lead to falls or other injuries.

Many different factors can contribute to sarcopenia, including physical inactivity, physical changes associated with aging, decreased levels of muscle-building hormones, and changes in the body's ability to absorb protein.

Despite being common among older adults, most adults and many health care providers are not aware of sarcopenia. As a result, it is underdiagnosed and undertreated. In 2016, sarcopenia was officially recognized as a condition and was assigned an International Classification of Diseases (ICD-10) code as a clinical disease for diagnosis. This allows health care providers to screen for, discuss, and treat sarcopenia as an insured condition.

Sarcopenia is quite common—especially due to inactivity after an injury or illness or because of preventive distancing and isolation during the COVID-19 pandemic. About 10–20% of older adults have sarcopenia. The prevalence of sarcopenia could be higher because diagnosing and treating sarcopenia is not yet common practice in health care settings. Older adults, people of lower socioeconomic status, and underweight or overweight individuals are at greater risk of developing sarcopenia.

Treatment and Management

Doing exercise that moves and uses your muscles, like lifting weights or doing push-ups, and eating a healthy diet can help you stay strong and reduce your risk of getting sarcopenia. There are some foods—especially those high in protein—that are the most important part of your diet to remain strong.

Currently, there are no prescription drugs to treat sarcopenia, but some supplements may help. While more research is needed, protein, amino acids, fish oil, vitamin D, selenium, magnesium, and omega-3

supplements have all shown promising effects to address muscle loss, especially in combination with diet and exercise.

Any exercise is beneficial for overall health, but for sarcopenia, exercise or activities that use and move muscles show the most promise to maintain or regain strength. The benefits of exercise, particularly



strength and resistance training, include a better chance to remain healthy, better balance, and fewer falls and fractures. Exercise that challenges your muscles will support independence, quality of life, mental health, and overall confidence and well-being.



A healthy diet is important in the treatment and management of sarcopenia. Eating a high-protein diet—above the recommended daily allowance— helps build and maintain muscle strength. For example, someone weighing 150 pounds should consume 90–120 grams of protein a day. The USDA offers some guidance on the [importance of protein](#) to help guide your nutrition decisions.

Staying active is important at all ages and helps decrease your risk of getting sarcopenia. It is never too late to rebuild your strength. You can begin or restart physical activity at any time to help increase your muscle strength.

Screening Patients for Sarcopenia

Currently, there is no unified standard for the early screening of sarcopenia. However, the most common early screening tool used for both research and clinical practice is the [SARC-F](#). The SARC-F screening test is a questionnaire developed to assess ability with strength, walking, standing when seated, climbing stairs, and risk of or experienced falls. Each of the five items has two points for a total of 10 points, and a total score of four points or more indicates a higher risk of sarcopenia.

Early recognition and intervention are key to improving outcomes for those with sarcopenia. Screening patients to assess their physical function and activities of daily living should be a routine part of health care visits for older adults. Nutritional screening and nutrition care plans should also be used to address or manage sarcopenia.

Tips to Get Started

Resources are available from [Move Your Way](#), [AARP](#), and the [National Council on Aging](#) to help find an exercise program that works best for older adults.

It can be hard for people to start a new exercise routine and change eating habits. Here are some recommendations to help you get started.

- Try a manageable strength training routine that you think you can do regularly, starting with 1–2 days per week. Be sure to include all the major muscle groups.
- Eat a high-protein diet—above the recommended daily allowance—to build and maintain muscle strength.
- Enlist a friend or partner to join you. By having a partner in this effort, you can help each other stay motivated.

To learn more, please visit [womenshealth.gov/sarcopenia](https://www.womenshealth.gov/sarcopenia).

