



Unplanned, unexplained or unintentional weight loss in older adults is associated with increased morbidity and mortality. Unintentional weight loss occurs in 15-20% of older adults, and 13-30% of aged care residents experience unplanned weight loss.

Unplanned weight loss should be considered a marker for serious illness as it can lead to loss of function, increased hip fracture in women, poor wound healing, increased in-hospital morbidity and increased overall mortality.

Unplanned weight loss is usually defined as loss of at least 5% of usual body weight over 6 to 12 months. Sudden weight loss requires immediate medical attention. From 1 July 2021, unplanned weight loss is a quality indicator, as part of the National Aged Care Mandatory Quality Indicator Program (QI Program). Significant unplanned weight loss is measured by the loss of 3kg or more over a 3-month period. Consecutive unplanned weight loss is the loss of any amount of weight every month over 3 consecutive months.

Weight loss is associated with many chronic conditions. Medication use and polypharmacy can contribute to unplanned weight loss.

Age-related weight loss

Body composition changes with age. Lean body mass begins to decrease around 30 years of age, with gains in fat mass that continue until 65 to 70 years of age. Total body weight usually peaks at 60 years of age with small decreases of around 0.1 to 0.2kg per year considered normal after 70 years of age.

Other physiological changes considered part of normal ageing include:

- Decreased bone mass
- Decrease in basal metabolic rate

Data (on f

