The Critical Importance of Functional Status in Critical Illness

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When patients are in an intensive care unit (ICU), considerable attention is placed on physiological variables of illness. This novel article by Ferrante and colleagues establishes that we also need to be attentive to patient-centered measures of function as a fundamental measure of illness that must be assessed in all older ICU patients. The need for assistance before admission with basic functional tasks such as bathing, taking medicines, and preparing meals was a powerful predictor of 30-day and 1-year survival. Those with severe premorbid disability were at more than 3 times the risk of dying by 1 year as those with minimal to mild disability (68% vs 19%). Functional status was as important a risk factor as shock or the need for mechanical ventilation.

Functional status is also a critical outcome of critical illness. Ferrante and colleagues demonstrate that most very old patients who survive their ICU stay will have significantly worse disability following their discharge from the ICU. When we care for the older patient in the ICU, we cannot just focus on survival. Many older patients who survive the ICU may not do very well at home if we do not help them address their worsening disability. When physicians, nurses, and other members of the health care team provide critical care in the older patient, they need to think beyond the critical illness and consider the critical needs of patients and their caregivers after discharge.

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