World Physiotherapy
Europe region

Factsheet –
Physiotherapy and Sarcopenia

Professional Practice Working Group (PPWG)

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FACTSHEET – PHYSIOTHERAPY AND SARCOPENIA

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WHAT IS SARCOPENIA?

Sarcopenia is defined as the progressive and generalised loss of skeletal muscle mass and strength, resulting in an increased risk of poor quality of life and death[1] as well as the increased risk of disabilities, infections, metabolic disorders, falls and fractures[2]. Sarcopenia has been traditionally defined as an ageing process but may be accelerated by chronic illness, malnutrition and low levels of physical activity[3].

The prevalence of sarcopenia in Europe varies widely based on age, diagnostic criteria, and population studied, but it generally falls between 10% and 27% among individuals aged over 60 years making it a major public health concern. Projections estimate that this number will significantly increase in the coming decades, with some estimates suggesting a 72.4% increase by 2045[4].

ROLE OF PHYSICAL ACTIVITY IN SARCOPENIA

Physical activity, particularly resistance and aerobic exercise, is a key factor in the prevention of sarcopenia by supporting the maintenance of muscle mass, strength, endurance, and overall physical function[5]. Structured exercise intervention is the essential component of sarcopenia management, and should be initiated early and maintained over time to mitigate functional[6] and overall health decline.

TYPES OF EXERCISE[7]

Resistance exercise is the most effective modality for improving muscle mass, strength and physical performance[8]. Common examples include weight training, bodyweight exercises and resistance-band training.

Aerobic exercise supports cardiovascular health and mitochondrial function and may help preserve muscle mass[9]. Examples include walking, cycling, and dancing.

Multicomponent exercise programmes are also widely used, combining resistance training with aerobic exercise and balance training to further enhance physical function and reduce fall risk[10]. These types of exercises can be adapted to individual preferences, functional status and clinical goals.

ROLE OF PHYSIOTHERAPY

While physiotherapists regularly assess muscle strength, balance and mobility to tailor exercise programmes for each individual, muscle mass must be assessed specifically to address the presence or the risk of sarcopenia[11].

Physiotherapists educate and enable patients and caregivers on the importance of improving and maintaining muscle mass, exercise and lifestyle modifications. Supervised exercise by physiotherapists ensures progression and safety for people with mobility or functional limitations or comorbidities.

Multidisciplinary care where physiotherapists collaborate closely with dietitians is essential, as combining exercise and nutrition is associated with optimal outcomes in muscle mass and function[12].

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