Age-related decline of resting energy expenditure in humans with similar body weight: First results of the indirect-calorimetry (IC-) BASAROT project

Ramminger S^a, Holzapfel C^b, Marra M^c, Lamers D^d, Poggiogalle E^e, Sealy M^f, Englert I^g, Boschmann M^h, Keil JPⁱ, Gärtner S^j, Vollmer M^k, Fischer DC¹, Valentini L^a

^a Neubrandenburg Institute of Evidence-based Dietetics (NIED), University of Applied Sciences Neubrandenburg, Neubrandenburg, Germany; ^b Institute of Nutritional Medicine, Technical University Hospital rechts der Isar, Munich, Germany; ^c University Neapel Federico II, Department of Clinical Medicine and Surgery, Naples, Italy; ^d Profil Institut for Metabolic Research, Neuss, Germany; ^e Sapienza University, Research Unit on Food Science and Human Nutrition, Italy; ^f Hanze University of Applied Sciences, Research Group Healthy Ageing, Allied Health Care and Nursing, Groningen, Netherlands; ^g Fulda University of Applied Sciences, Department Nutritional, Food and Consumer Sciences, Fulda, Germany; ^h Charité - Universitätsmedizin Berlin (Buch), Experimental & Clinical Research Center, Berlin, Germany; ⁱ Dietrich Bonhoeffer Klinikum Neubrandenburg, Neubrandenburg, Germany; ^j University Medicine Greifswald, Clinic and Polyclinic for Internal Medicine A, Greifswald, Germany; ^k University Medicine Greifswald, Germany; ^l University Medicine Rostock, Clinic for Paediatric and Adolescent, Rostock, Germany

Rationale

It is well established that resting energy expenditure (REE) decreases with age. Data derived from indirect calorimetry (IC) are still limited with respect to the number of high aged individuals, BMI groups and health conditions. Therefore, IC generated REE of the BASAROT sample and those calculated according to the Harris-Benedict (HB) equation were used to re-evaluate the proposed association between REE and age.

Methods

The IC-BASAROT sample combines the result of IC performed in 2622 individuals from 10 centers (7 Germany, 2 Italy, 1 Netherlands) done under strictly standardized conditions (e.g. at least 8h of fasting) in free-living, mostly healthy adults aged 18 to 100 years including all BMI ranges. IC was performed by canopy technique (Cosmed Quark RMR/Sensor Medics Vmax29) in 96.5% of cases and by face mask (Cosmed Fitmate) in 3.5%. Weight was measured by calibrated scales and height was determined to the nearest of 1mm.

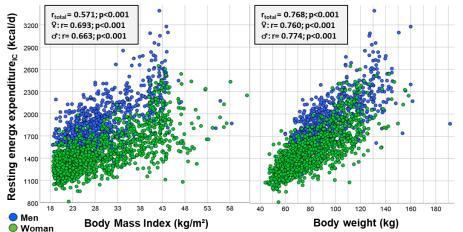


Figure 1: Correlations of REE_{IC} with BMI or body weight, n=2187

 REE_{IC} = resting energy expenditure measured by indirect calorimetry

Results

REE in the total sample (BMI: 26.9±9.1 kg/m², 43.7±17.6 y) correlated more positively with body weight than with BMI (Figure 1). Gender+body weight explained 75% of REE variance, gender+BMI 69% and gender+age only 28%. To reduce confounding by body weight we performed age-related analysis in the subgroup of women weighing 50-79 kg (n=780, BMI: 23.4±3.4 kg/m², 41.4±18.5 y) and men weighing 60-89 kg (n=500, BMI: 24.9±3.0 kg/m², 47.5±19.3 y) and compared results with REE_{HB} (tab. 1).

IC results from 18 to 100 y showed an approximately 50% lower decrease in REE than HB in women (-129 kcal/d vs. -257 kcal/d) and in men (-200 kcal/d vs. -406 kcal/d, tab. 1). REE_{IC} (n=1280) did not correlate with age (r=-0.042; p=0.132, fig 2). In line, we observed a significant overestimation of REE by HB up to 39 y in both sexes and an underestimation in men 60 y of age and older.



cal/d)

energy

Resting

🔵 Men

Woman

Hochschule Neubrandenburg University of Applied Sciences

r_{total}= -0.076; p<0.001

♀: r= -0.064; p=0.024

d:r=-0.240;p<0.001

Contact: ramminger@hs-nb.de

Conclusion

Age-related decline in REE appears to be lower than expected and might due to changes in body composition both in the younger and older generation. No indication of the often proposed systematic overestimation of HB in women was seen. Overall, findings should be considered in future models for estimating REE.

780 women (body weight: 50-79 kg)				500 men (body weight: 60-89 kg)				
REE _{iC} (kcal/d)	REE _{HB} (kcal/d)	р	BW (kg)	Age (y)	REE _{iC} (kcal/d)	REE _{HB} (kcal/d)	р	BW (kg)
1351±133	1450±72	<0.001	62.6±7.2	18-29 n=140	1754±187	1841±119	<0.001	75.5±7.7
1370±166	1424±79	<0.001	64.3±7.9	30-39 n=75	1674±190	1801±120	<0.001	77.6±7.7
1377±144	1384±82	0.0582	66.1±8.5	40-49 n=53	1713±193	1721±132	0.754	77.2±8.4
1302±154	1330±81	0.032	65.4±8.2	50-59 n=56	1705±170	1669±122	0.105	79.5±7.3
1322±174	1308±85	0.319	67.8±8.5	60-69 n=96	1700±186	1631±96	<0.001	81.4±6.2
1268±145	1231±83	0.042	64.9±8.0	70-79 n=52	1567±174	1512±110	0.010	78.4±6.8
1222±126	1193±90	0.119	66.6±8.8	80-100 n=28	1554±219	1435±131	<0.001	77.0±8.5
	REE _{IC} (kcal/d) 1351±133 1370±166 1377±144 1302±154 1322±174 1268±145	REE _{IC} (kcal/d) REE _{HB} (kcal/d) 1351±133 1450±72 1370±166 1424±79 1377±144 1384±82 1302±154 1330±81 1322±174 1308±85 1268±145 1231±83	REE _{lc} (kcal/d) REE _{HB} (kcal/d) p 1351±133 1450±72 <0.001	REE _{IC} (kcal/d) REE _{HB} (kcal/d) P BW (kg) 1351±133 1450±72 <0.001	REE _{IC} (kcal/d) REE _{HB} (kcal/d) P BW (kg) Age (y) 1351±133 1450±72 <0.001	REE _{IC} (kcal/d) REE _{HB} (kcal/d) P BW (kg) Age (y) REE _{IC} (kcal/d) 1351±133 1450±72 <0.001	REE _{lc} (kcal/d) REE _{HB} (kcal/d) p BW (kg) Age (y) REE _{lc} (kcal/d) REE _{HB} (kcal/d) 1351±133 1450±72 <0.001	REE _{IC} (kcal/d) REE _{HB} (kcal/d) p BW (kg) Age (y) REE _{IC} (kcal/d) REE _{HB} (kcal/d) p 1351±133 1450±72 <0.001

IC=indirect calorimetry, BW=body weight, mean±standard deviation, paired sample t-test

Table 1: Measured (REE_{IC}) versus calculated REE (REE_{HB}, Harris-Benedict equation)

Figure 2: Correlations of REE_{IC} with age, n=2187

Age (vears)