

Get Up & Go Test - Rationale for recommended Protocol:

- The Get Up & Go Test was developed by Mathias et al (1988) to test basic functional mobility in frail older persons. The initial study reported on a cohort of n= 40 inpatients, outpatient and day patients medical and geriatric. Subjects sat in a high seat office chair with arm rests placed 3 metres from a wall. They were asked to rise, stand still momentarily, walk toward the wall, to turn without touching the wall, to walk back to the chair, turn around and sit down. Observed performance was scored on a 5 point ordinal scale ranging from 1= normal to 5= severely abnormal.
- A modified timed version the above test called the Timed Up & Go (TUG) was devised by Podsiadlo & Richardson in 1991. They described the TUG as the time taken in seconds by an individual to stand up from a standard height arm chair (approx seat height of 46cm), walk a distance of 3 metres, turn, walk back to the chair, and sit down again, wearing his/ her regular footwear and using their customary walking aid (none, cane, or walker).

A similar methodology in terms of chair characteristics and subject instruction is reported in subsequent studies on TUG including Shumway-Cook et al (2000), Morris et al (2001), Nikolaus et al (1998), Freter et al (2000), Wall et al (2000), Schoppen et al (1999), Newton al (1997). Rockwood et al (2000) deviated from the protocol used by other studies in using a chair without arms. Overall the use of a chair with arms (commonest seat height reported 46cm), a starting position of arm resting on the arm rests and no reference to the use of arms or otherwise are common to both Get up & Go and TUG in reported studies.

- The National Strategy for Prevention of Falls and Fractures in Ireland's Ageing population recommends the Get Up & Go test as a test of balance and gait in older people who report a history of falls fear of falling and difficulties with gait or balance on opportunistic screening. However the protocol recommended differs from Mathias et al's protocol in 3 fundamental ways:
 1. The client is asked not to use their arms or any assistive device for the sit to stand and stand to sit phases of the test.
 2. The distance is unspecified "Take Several steps"
 3. The test is timed even though the distance is unspecified.

There is no specific reference given for the above protocol, however there is a general reference to the AGS/ BGS (2001) and subsequent NICE (2004) for that section of the national strategy document.

- The use of a simple Get up & go test (Mathias et al 1988) is recommended in the NICE (2004) and the more recently updated AGS/BGS guidelines (2010). Given the procedure outlined in the National Strategy differs considerably from the original protocol and those most frequently reported subsequently in the literature we would recommend use the following methodology for the Get Up and Go Test, if indicated, in the initial opportunistic PCCC screening tool:
 - Client is asked to sit in a standard height arm chair (approx seat height of 46cm), arms resting on the arms of the chair
 - Then he/she is asked to stand up, walk a distance of 3 metre approx at normal pace
 - Turn,
 - Walk back and sit down again
 - The subject wears their regular footwear and uses his customary walking aid (none, cane, or walker). No physical assistance is given.
 - The observed performance is scored as steady or unsteady.

References:

- AGS abstracted Guideline (2001) The Journal of American Geriatrics Society 49: 664-672
- American Geriatrics Society/British Geriatrics Society Clinical Practice Guideline for prevention of falls in older persons (2010) Journal of the American Geriatrics Society
- Freter N. & Fruchter N. (2000) Relationship between timed "up and go" and gait time in an elderly orthopaedic rehabilitation population. Clinical Rehabilitation 14: pp. 96- 101
- Mathias S., Nayak U.S.L. & Isaacs B. (1986) Balance in Elderly Patients: The "Get-up and Go" Test. Archives of Physical Medicine Rehabilitation 67, pp 387-389
- Morris S., Morris M.E. & Iansek R. (2001) Reliability of Measurements Obtained With the Timed "Up & Go" Test in People With Parkinson Disease. Physical Therapy 81 (2), pp 810-818
- Newton R.A. (1997) Balance Screening of an Inner City Older Adult Population. Archives of Physical Medicine Rehabilitation, 78: pp 587-591
- Nikolaus T., Bach M., Oster P. & Schlieff G. (1998) Prospective value of self-report and performance-based tests of functional status for 18 month outcomes in elderly patients. Aging Clin. Exp. Res 8: pp.271-276)
- Podsiadlo D., Richardson S. (1991) The "timed up and go test": A test of basic functional mobility for frail elderly persons. Journal of the American Geriatrics Society, 39: pp. 142-148
- Report of the National Steering Group on the Prevention of Falls in older people and the Prevention and Management of Osteoporosis throughout life. Strategy to prevent Falls and Fractures in Ireland's Ageing population (June 2008)
- National Institute for Health and Clinical Excellence. The assessment and prevention of falls in older people. Clinical Guideline 21. Nov 2004 www.nice.org.uk/CG021
- Rockwood K., Awalt E., Carver D. & MacKnight C. (2000) Feasibility and Measurement Properties of the Functional Reach and the Timed Up and Go Tests in the Canadian Study of Health and Aging. Journal of Gerontology: Medical Sciences 55 (2): pp M70-M73
- Schoppen T., Boonstra A., Groothoff J.W., DeVries J., Goeken L.N.H. & Eisma W.H. (1999) The Timed "Up and Go" Test: Reliability and Validity in Persons With Unilateral Lower Limb Amputation. Archives of Physical Medicine Rehabilitation, 80: pp. 825-828
- Shumway-Cook A., Brauer S. & Woollacott M. (2000) Predicting the Probability for Falls in Community-Dwelling Older Adults Using the Timed Up & Go Test. Physical Therapy, 80: pp 896-903.
- Tinetti M.E. (1986) Performance oriented assessment of mobility problems in elderly patients. Journal of the American Geriatric Society 34: pp.119-126
- Tinetti M.E., Speechley M., Ginte S.F. (1988) Risk factors for falls among elderly persons living in the community. New England Journal of Medicine 319: pp. 1701-1707.
- Wall J.C., Bell C., Campbell S. & Davis J. (2000) The timed get-up-and-go test revisited: Measurement of the component tasks. Journal of Rehabilitation Research and Development, 37(1): pp. 109-114