The Aging Process and Optimal Nutrition Care

Amey Herald, MS, RD CACFP Program Consultant Nutrition and Health Services

Objectives:

- Identify physical and cognitive signs of aging
- Identify factors for consideration when assessing nutrition status of ADC clients
- Discuss essential nutrients for adults

Three Areas of Physical Changes:

- BodyComposition
- Senses
- Organ Systems



Changes in Body Composition

- Muscle strength is lost
- Bones become fragile
- Reaction rates are slower
- Falls and injuries are more likely
- Fewer calories are needed to maintain body weight

Changes in Senses: Taste & Smell

- Sweet foods tasting bitter
- Sour foods tasting metallic
- Salty foods tasting bland

- Lacking sense of smell will decrease appetite
- All the more reason to aim for pleasant food aromas



Changes in Senses: vision & hearing

- Poor sight and poor hearing may lead to –
- A lack of interest in eating
- Problems following verbal directions



Changes in Senses: Touch

- Loss of touch impacts-
- Ability to pick up food or utensils
- Ability to sense food temperatures

Results - more spills more burns



Changes in Organ Systems: Mouth and Throat

- Missing Teeth
- Poor Fitting Dentures
- No teeth at all
- Difficulty swallowing due to disease or medicines

Changes in Organ Systems: GI Tract

- Changes in the stomach can lead to difficult digestion
- Poor muscle tone in the esophagus may allow food from the stomach to reflux, causing heartburn or indigestion
- Slow movement of food through the intestines can lead to constipation

All of these can lead to poor appetite

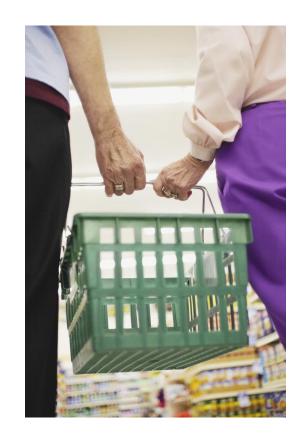
Changes in Cognition:

- Decline at varying rates slowly or dramatically
- May be caused by periods of illness or medications
- Confusion or Agitation at meal time



Nutrition Needs of ADC Clients

- Unique for each client
- Influenced by sensory losses, oral health problems, illness or disabilities, medications
- A nourished body can improve overall health and help maintain independence!!



Assess Nutrition Status

Why? For meeting individual needs

<u>Purpose?</u> To Identify and Treat nutritional problems

A problem of poor nutritional status can affect all other aspects of the client's life and vice versa.

Assess Nutrition Status

- Food likes
- Food dislikes
- Food allergies
- Cultural or religious dietary requirements
- Dental problems
- Chewing or swallowing problems
- Medical conditions and medications requiring special diets

Considering these factors can help prevent or treat problems of poor nutrition.

DETERMINE: Warning Signs

- Disease
- Eating Poorly
- Tooth Loss/Mouth Pain
- Economic Hardship
- Reduced Social Contact
- Multiple Medications
- nvoluntary Weight Loss/Gain
- Need of Assistance in Self Care
- Elder Years Above Age 80



DETERMINE Checklist

- Developed by the Nutrition Screening Initiative (NHI)
- NHI recommends: a client should be seen by a doctor, RD or other healthcare professional for interventions to improve eating habits and lifestyle when the score is 3 or higher.

- Carbohydrates, Protein and Fat= Energy
- Older adults are more likely to develop protein malnutrition than younger adults
- Bodies are more easily injured and require protein to repair the tissues



 Older adults tend to absorb and utilize some vitamins and minerals less efficiently due to normal aging and medications.

Requirements of vitamins and minerals may

be greater!

FIBER

- Naturally found in whole grains, fruits, vegetables and legumes
- Constipation can be caused by inactivity, poor diet, inadequate fluid intake or medications

FLUIDS

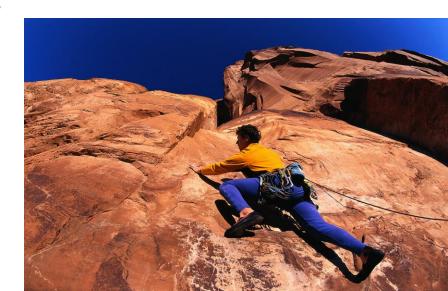
- Many older adults do not feel thirsty
- The caregiver must take responsibility

How?

- Encourage a cup between meals
- Offer frozen juice bars, fruit slush or smoothies as part of an activity
- Offer decaffeinated
- Monitor swallowing

Is nutrition status part of the Individualized Plan of Care?

- Identify goals and interventions to treat problems or maintain strengths
- Implement strategies
- Evaluate the outcomes



Kellog's Rice Krispy Treats

- Creditable towards the grain/bread requirement at <u>snack</u>, but <u>only</u> in the following amounts:
- .78 oz/22 gram bar = .25 grain/bread serving
- 1.3 oz/37 gram bar = .5 grain/bread serving
- 1.6 oz/45 gram bar = .75 grain/bread serving
- 1.7 oz/48 gram bar = .75 grain/bread serving

Kraft Velveeta Cheese <u>is not</u> <u>creditable</u>

- It is a "processed cheese product"
- Any item labeled with the wording "imitation" cheese or cheese "product" is not creditable towards meal pattern requirements.
- Review the Food Buying Guide, footnote #14 on page 1-23.

www.fns.usda.gov/tn/

Click on Resource Library on left hand side

Click on Food Buying Guide for Child Nutrition Programs