

THE NECESSITY OF GOOD NUTRITION

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The importance of good nutrition At any age it is important to maintain good nutrition, but as we age it becomes increasingly important to eat adequately and appropriately. Nutrition is an area that is often neglected as we age, but as our bodies age certain functions may not perform as effectively as they used to.

Our gastrointestinal tract goes through changes which impact on how we absorb certain nutrients. Changes in our bowel may affect absorption and motility of food and nutrients through our digestive tract. As we age our body is also less efficient at metabolising drugs and we can notice changes in our ability to smell and taste foods.

Deficits in certain nutrients like vitamins, such as Vitamin B12 can impair our immune response and can interfere with our memory and cognition. Depleted calcium and vitamin D levels can also increase the incidences of Osteoporosis. Many of our aged population would have been prescribed supplements for these reasons.

There are many reasons why we may become malnourished as we age It may be due to functional changes in our body, it can also be due to chronic diseases and social factors may also play a role.

Documented risk factors for malnourishment include:

People who live alone - may be less likely to cook meals for themselves.

People with an illness - may have a decreased appetite.

Chronic disease - may affect appetite e.g. Parkinson's Disease, Multiple Sclerosis and Dementia.

Medications - may affect how we absorb vital nutrients and some medications may affect the swallow.

Depression, loneliness, financial constraints - stretching an aged pension, people may not have the money to buy a healthy range of foods.

Poor dentition - may not have accessed a dentist or be limited financially to seek this assistance.

Functional decline - inability to cook for ourselves or get to the shops to purchase food. Limited dexterity in our hands may hinder our ability to feed ourselves or prepare simple meals.

Malnourishment

A medical review is indicated if you have lost weight unintentionally or for any other reason you cannot eat adequately. If food intake alone does not improve your nutritional status or you are diagnosed as malnourished or underweight it may be necessary to take nutrient supplements. Meals high in nutrients and calories may need to be incorporated into your diet. Nutrients and calories supply you with the energy required to fulfill your daily activities. Your GP and a dietician should be able to determine if this is indicated.

Studies carried out in Australia indicate alarming statistics of elderly people who are malnourished. A study attended by a large Sydney hospital identified that around 80% of elderly clients were malnourished either prior to hospital admission or during their hospitalisation. Another study identified similar rates.³

Malnourished older people are at greater risk of experiencing falls, extended hospitalisations, institutionalisation, post operative complications, infections, pressure ulcers and death.¹

Malnourished clients are at increased risk of pressure sores, infection and delayed wound healing. Increased lethargy from malnourishment can also render someone more physically dependent.

If you have a wound and your nutritional intake is poor, you risk delayed healing of your wound. Without adequate nutrition, healing may be impaired and prolonged. Improved nutritional status enables the body to heal wounds.²

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Dysphagia

It is documented that the risk of dysphagia (difficulty swallowing) increases with age.

It is important that this be diagnosed appropriately. As swallowing involves a complex series of voluntary and involuntary neuromuscular contractions this process may be less effective as we age and may put the older person at increased risk of developing dysphagia.

GPs, specialists and speech pathologists can identify dysphagia. If the oral pharyngeal phase of the swallow is impeded, a person may benefit from thickened fluids to reduce the risk of aspiration. If your swallow is ineffective you risk foods and fluid entering your trachea and lungs (aspiration) rather than your oesophagus and stomach.

If dysphagia is not identified this could lead to dehydration, starvation or aspiration pneumonia.

Nutrition is an important area to focus on as we age. It is necessary to eat a balanced diet and have a regular health check. You should also acknowledge any difficulties that you feel in your body such as eating problems or even a recent weight loss. Complications from malnourishment can have significant implications on our health. Make sure you see your health professional if you require advice or have any concerns.

References

¹Visanathan, R, Newbury, J.W. and Chapman, I. 2004. Malnutrition in Older people. Australian Family Physician. 33, 10, 799-805

²Williams, J.Z. and Barbul, A. (2003) Nutrition and Wound Healing. The Surgical Clinics of North America. June 83 (3) 571-596

³ Malnutrition in Elderly Australians. Available URL: www.femal.com.au/malnutrition-in-elderly-australians.htm. Accessed Jan 2012.

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