

# Healthy Lifestyle

Malnutrition is a serious senior health issue. Know the warning signs and how to help an older loved one avoid poor nutrition.

## By Mayo Clinic Staff

Good nutrition is critical to overall health and well-being — yet many older adults are at risk of inadequate nutrition. Know the causes and signs of nutrition problems in older adults, as well as steps you can take to ensure a nutrient-rich diet for an older loved one.

Malnutrition in older adults can lead to various health concerns, including:

- · A weak immune system, which increases the risk of infections
- · Poor wound healing
- · Muscle weakness and decreased bone mass, which can lead to falls and fractures
- A higher risk of hospitalization
- An increased risk of death

In addition, malnutrition can lead to further disinterest in eating or lack of appetite — which only makes the problem worse.

The causes of malnutrition might seem straightforward — too little food or a diet lacking in nutrients. In reality, though, malnutrition is often caused by a combination of physical, social and psychological issues. For example:

- Health concerns. Older adults often have health problems, such as dementia or dental issues, that can lead to decreased appetite or trouble eating. Other factors that might play a role include a chronic illness, use of certain medications, difficulty swallowing or absorbing nutrients, a recent hospitalization, a diminished sense of taste or smell, or abdominal issues, such as pain or bloating.
- **Restricted diets.** Dietary restrictions such as limits on salt, fat, protein or sugar can help manage certain medical conditions, but might also contribute to inadequate eating.
- Limited income. Some older adults might have trouble affording groceries, especially if they're taking expensive medications.

- Reduced social contact. Older adults who eat alone might not enjoy meals as before, causing them to lose interest in cooking and eating.
- Limited access to food. Many older adults do not drive and may not have access to food or the right types of food.
- **Depression.** Grief, loneliness, failing health, lack of mobility and other factors might contribute to depression causing loss of appetite.
- **Alcoholism.** Too much alcohol can interfere with the digestion and absorption of nutrients. Nutrients might also be lacking if alcohol is substituted for meals.

The signs of malnutrition in older adults can be tough to spot, especially in people who don't seem at risk — but uncovering problems at the earliest stage can help prevent complications. To detect malnutrition:

- **Observe your loved one's eating habits.** Spend time with your loved one during meals at home, not just on special occasions. If your loved one lives alone, find out who buys his or her food. If your loved one is in a hospital or long-term care facility, visit during mealtimes.
- Watch for weight loss. Help your loved one monitor his or her weight at home. You might also watch for other signs of weight loss, such as changes in how clothing fits.
- Be alert to other red flags. In addition to weight loss, malnutrition can cause poor wound healing and dental difficulties. It may also cause weakness, which can result in falls.
- Know your loved one's medications. Many drugs affect appetite, digestion and nutrient absorption.

Even small dietary changes can make a big difference in an older adult's health and well-being. For example:

• Engage doctors. If your loved one is losing weight, work with his or her doctors to identify — and address — any contributing factors. This might include changing medications that affect appetite, suspending any diet restrictions until your loved one is eating more effectively, and working with a dentist to treat oral pain or chewing problems.

Request screenings for nutrition problems during routine office visits, and ask about nutritional supplements. You might also ask for a referral to a registered dietitian.

- Encourage your loved one to eat foods packed with nutrients. Spread peanut or other nut butters on toast and crackers, ripe fruits, and cooked vegetables. Sprinkle finely chopped nuts or wheat germ on yogurt, fruit and cereal. Add extra egg whites to scrambled eggs and omelets and encourage use of whole milk. Add cheese to sandwiches, vegetables, soups, rice and noodles.
- **Restore life to bland food.** Make a restricted diet more appealing by using lemon juice, herbs and spices. If loss of taste and smell is a problem, experiment with seasonings and recipes.
- **Plan between-meal snacks.** A piece of fruit or cheese, a spoonful of peanut butter, or a fruit smoothie can provide nutrients and calories.

- **Consider a supplement.** A nutritional supplement can supply extra nutrients your loved one may not be getting from food. Discuss which type is best with your loved one's doctor or dietitian.
- **Make meals social events.** Drop by during mealtime or invite your loved one to your home for occasional meals. Encourage your loved one to join programs where he or she can eat with others.
- Encourage regular physical activity. Daily exercise even if it's light can stimulate appetite and strengthen bones and muscles.
- **Provide food-savings tips.** If your loved one shops for groceries, encourage him or her to bring a shopping list, check store flyers for sales and choose less expensive brands. Suggest splitting the cost of bulk goods or meals with a friend or neighbor, and frequenting restaurants that offer discounts for older adults.
- **Consider outside help.** If necessary, hire a home health aide to shop for groceries or prepare meals. Also consider Meals on Wheels and other community services, including home visits from nurses and registered dietitians. Your local Area Agency on Aging or a county social worker also might be helpful.

Remember, identifying and treating nutrition issues early can promote good health, independence and increased longevity. Take steps now to ensure your loved one's nutrition.

- 1. Fávaro-Moreira NC, et al. Risk factors for malnutrition in older adults: A systematic review of the literature based on longitudinal data. Advanced Nutrition. 2016;7:507.
- 2. Fillit HM, et al. Malnutrition in older adults. In: Brocklehurst's Textbook of Geriatric Medicine and Gerontology. 8th ed. Philadelphia, Pa.: Elsevier; 2017. https://www.clinicalkey.com. Accessed June 29, 2017.
- 3. Ritchie C. Geriatric nutrition: Nutritional issues in older adults. https://www.uptodate.com/home. Accessed July 29, 2017.
- 4. Fillit HM, et al. Health promotion for community-living older adults. In: Brocklehurst's Textbook of Geriatric Medicine and Gerontology. 8th ed. Philadelphia, Pa.: Elsevier; 2017. https://www.clinicalkey.com. Accessed June 29, 2017.
- 5. Nutrition after 50: Tips and recipes. American Institute for Cancer Research. http://www.aicr.org/. Accessed June 29, 2017.
- 6. Zeratsky KA (expert opinion). Mayo Clinic, Rochester, Minn. June 29, 2017.
- 7. Takahashi PY (expert opinion). Mayo Clinic, Rochester, Minn. June 30, 2017.

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