NUTRITION

WHAT QUESTIONS SHOULD I AND MY FAMILY BE ASKING?

- Am I eating a balanced diet of the three macronutrients?
- Am I having vegetables and some source of protein at each meal?
- Am I having enough protein at each meal to not lose weight?
- Am I having enough calcium and vitamin D?
- Am I losing weight unintentionally?
- Am I gaining weight unintentionally?
- Could I safely increase my exercise each day?
- Am I forgetting to eat and drink?
- Do I feel safe cooking in my kitchen for myself?
- Is my appetite good and am I eating three healthy meals a day?
- Could I reach out to other people or services to help with my meals?

WHAT ACTIONS CAN I TAKE FOR THIS AGENDA?

- Have your weight change assessed by your doctor. If possible, weigh yourself once a week and keep a diary of the numbers you're getting
- Have your family doctor calculate your BMI for you to see how your weight is doing
- Talk to your doctor if you have a loss of appetite, swallowing difficulty, or trouble accessing food
- Speak to a dietitian about your weight loss or gain. Refer to our "<u>unintentional weight</u> <u>loss</u>" agenda for more details
- If needed, take 1000 international units of vitamin D per day as a supplement. Refer to our "<u>bone health</u>" agenda for more details
- Do thirty minutes of exercise each day with resistance training if possible. Refer to our "<u>exercise</u>" agenda for more details
- Eat protein at each meal and drink protein-rich beverages such as milk or soy to help increase your protein intake
- Have family come to help assess your safety in the kitchen
- Make plans with friends and family to have meals together

• Learn what food and grocery delivery services are in your area

WHAT IS NUTRITION?

- Nutrition is what we need to fuel our bodies
- Nutrients are what we gain from food
- They can be split into "macro" meaning big or "micro" meaning small
- The macronutrients are easy to understand: carbohydrates, proteins, and fats. The micronutrients are mostly vitamins and minerals

WHERE CAN I FIND THESE "BIG" NUTRIENTS?

- Carbohydrates include things like grains, vegetables, pasta, and bread
- Sometimes fats can come alone in the forms of butter and oils
- Protein is very important to build and keep muscle
- Fats and proteins can come together in things like dairy products or meats
- Try to have something from each of these macronutrients at each meal

MACRONUTRIENTS ARE THE "BIG" NUTRIENTS IN CARBS, FATS, AND PROTEIN

MICRONUTRIENTS ARE THE "SMALL" NUTRIENTS IN VITAMINS AND MINERALS

WHAT ARE SOME GOOD SOURCES OF PROTEIN?

• Protein can be broken down into animal and plant proteins

- Animal protein can include meat, poultry, fish, eggs, milk, and cheese
- Plant proteins include things like beans, legumes, grains, nuts, and seeds
- Vegetables and fruit can sometimes also contain smaller protein amounts
- Older adults need to eat more protein
- There have been studies showing that protein helps general health and assists with recovery from illness
- A minimum of 1.0 to 1.2 grams of protein per kilogram of your body weight is recommended

HOW SHOULD I BE SETTING UP MY PLATE FOR GOOD NUTRITION?

- The new Canada's Food Guide suggests that people set up an "Eat Well Plate" for themselves
- This means that half of the plate should be vegetables and fruits and the other half proteins and whole grain
- Make nutritious choices for your drinks
- Choose milk, water, and tea and avoid very sugary beverages

OLDER ADULTS SHOULD EAT MORE PROTEIN TO MAINTAIN MUSCLE

YOUR MEAL PLATE SHOULD CONTAIN HALF VEGETABLES, QUARTER PROTEINS, AND A QUARTER OF GRAINS

WHAT PROBLEMS CAN WE HAVE WITH POOR NUTRITION?

- If we have poor nutrition we can either gain or lose weight. Doing so can cause problems for our health
- Being overweight can increase the risk of diabetes, high blood pressure, heart problems, and can put a lot of strain on your joints
- Being underweight can be related to increased risk of death, injury from falls, and a longer time to recover from an illness

- Weight loss can be a sign of depression or a medical condition
- Refer to the "<u>unintentional weight loss</u>" agenda for more details

WHAT KIND OF "SMALL" NUTRIENTS SHOULD I EAT?

- Most "small" nutrients like vitamins A, B12, calcium, and iron are gained from eating a healthy diet
- One of the most important vitamins for our body is Vitamin D
- Vitamin D often needs to be supplemented especially in older adults. It has been found that as we age, we can become deficient in vitamin D
- It is recommended that you have about 1000 international units of vitamin D per day
- Along with vitamin D, it is important to eat calcium
- It is recommended to have 1.2 grams of calcium per day between your diet and any supplements you take
- It is hard to figure out what 1.2 grams of calcium is but it is roughly 3 to 4 servings of dairy per day
- You can get calcium through supplements or even in some produce like broccoli which is high in calcium
- Having the proper amounts of vitamin D and calcium can reduce the risk of getting a broken bone
- Bones breaking (fracturing) easily in older adults can be from a disease called "osteoporosis"
- Refer to our "bone health" agenda for more details

POOR NUTRITION CAN LEAD TO WORSE LONG-TERM (CHRONIC) ILLNESSES AND INCREASE THE RISK OF DEATH, INJURY, AND LONGER HOSPITAL STAYS

WHAT ARE SOME TIPS I CAN USE TO LOSE WEIGHT?

- If you find you are overweight or you want to lose some weight you should talk to your doctor first
- They can provide you with resources on how to lose weight safely
- They may refer you to a dietitian to help go over your diet and come up with strategies
- Some good tips overall include:
- Exercising a little bit each day
- Cutting out sugary beverages like pop and alcohol
- Eating smaller portion sizes
- Eating a vegetable with every meal

IS IT ALWAYS IMPORTANT TO LOSE WEIGHT?

- The simple answer to this is no
- We may think we are overweight or need to be on a restrictive diet but this can be dangerous in older adults
- Studies have found that in older adults a bit more weight is protective in certain ways for our health
- Having a restrictive diet can cause under-nutrition
- Of course, being too overweight is bad as well

TALK TO YOUR DOCTOR FIRST BEFORE YOU WISH TO START LOSING WEIGHT. OLDER ADULTS BEING A LITTLE OVERWEIGHT CAN BE PROTECTIVE. BEING TOO OVERWEIGHT CAN BE BAD FOR YOUR HEALTH TOO

WHAT IS A GOOD WEIGHT FOR ME TO BE AT?

- A "good" weight for each person is specific to their height, health conditions, gender, among other points
- One way to monitor weight is by looking at the Body Mass Index (BMI)

- The BMI is a calculation involving your weight with your height
- In younger people, a normal BMI is 18 to 25
- For adults older than 65 a normal BMI is 22 to 30

WHAT ARE SOME OTHER RISK FACTORS FOR POOR NUTRITION?

- There are many reasons why older adults stop cooking and become poorly nourished. If you are eating only toast and tea during the day and having small meals you may be under-nourished
- Some older adults can develop problems with their thinking (cognition) and cooking can become difficult or even unsafe
- If you find yourself leaving your stove on, burning things, or see food go rotten in your fridge you should mention this to your family and doctor
- Others may have a loss of appetite, problems swallowing, or trouble accessing food

POOR NUTRITION CAN BE FROM MANY REASONS SUCH AS A DECLINE IN COOKING, ACCESSING FOOD, MOOD CHANGES, SWALLOWING, OR BOWEL SYMPTOMS

HOW CAN I IMPROVE MY NUTRITION?

- If you feel unsafe cooking, you can reach out to a support system to help with your meals. You can also look for meal delivery services from grocery stores and other places in your area
- Depending on where you live, your government or local health authorities may provide these services
- If you live in a senior home, you could speak to your meal planning team to ask for more protein or elements of nutrition you feel you are missing
- If you live alone, you could reach out to friends or family to start a meal group for social interaction around meals

LOOK FOR FOOD SERVICES IN YOUR AREA SUCH AS GROCERY OR FOOD DELIVERY SERVICES. TALK TO FAMILY AND FRIENDS TO JOIN THEM FOR MEALS

References

- 1. Robert L Kane et al. Essentials of Clinical Geriatrics 8th edition (2018) Jeffrey B. Halter et al.
- 2. Hazzard's Geriatric Medicine and Gerontology 7th edition (2016)
- 3. Jayna Holroyd-Leduc et al. Evidence Based Geriatric Medicine (2012)
- 4. Wallace JI, Schwartz RS, LaCroix AZ, et al. Involuntary weight loss in older outpatients: incidence and clinical significance. J Am Geriatr Soc 1995; 43:329.
- 5. Thompson MP, Morris LK. Unexplained weight loss in the ambulatory elderly. J Am Geriatr Soc 1991; 39:497.
- 6. Jackson RD, LaCroix AZ, Gass M, et al. Calcium plus vitamin D supplementation and the risk of fractures. N Engl J Med 2006; 354:669.
- 7. Sullivan DH. Impact of nutritional status on health outcomes of nursing home residents. J Am Geriatr Soc 1995; 43:195.
- Jensen MD, Ryan DH, Apovian CM, et al. 2013 AHA/ACC/TOS guideline for the management of overweight and obesity in adults: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines and The Obesity Society. Circulation 2014; 129:S102.
- 9. Schwingshackl L, Hoffmann G. Long-term effects of low-fat diets either low or high in protein on cardiovascular and metabolic risk factors: a systematic review and meta-analysis. Nutr J 2013; 12:48.
- 10. Health Canada. (2020). Eating well with Canada's food guide. Retrieved from https://food-guide.canada.ca/en/
- 11. Wolfe RR, Miller SL. The recommended dietary allowance of protein: A misunderstood concept. JAMA. 2008 Jun 25,; 299(24):2891-3.
- 12. Bauer J, Biolo G, Cederholm T, Cesari M, Cruz-Jentoft AJ, Morley JE, et al. Evidencebased recommendations for optimal dietary protein intake in older people: A position paper from the PROT-AGE study group. J Am Med Dir Assoc. 2013 Aug; 14(8):542-59.
- Health Canada. Canadian guidelines for body weight classification in adults. 2003; [Cited: Jul 23, 2018]. Available from: https://www.canada.ca/en/health-canada/services/foodnutrition/healthy-eating/healthy- weights/canadian-guidelines-body-weight-classificationadults/questions-answers-professionals.html#6.

- 14. Rajala SA, Kanto AJ, Haavisto MV, Kaarela RH, Koivunen MJ, Heikinheimo RJ. Body weight and the three-year prognosis in very old people. Int J Obes. 1990 /12; 14(12):997-1003.
- 15. White H, Pieper C, Schmader K, Fillenbaum G. Weight change in alzheimer's disease. J Am Geriatr Soc. 1996 Mar; 44(3):265-72.