# NUTRITIONAL NEEDS OF THE ELDERLY

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# NUTRIENTS OF CONCERN FOR THE ELDERLY

- Need fewer calories but must be Nutrient Dense
- Need more B vitamins
- Calcium
- Protein
- Other nutrients.

# HOW OUR BODY CHANGES AS WE AGE – PERCEPTUAL CHANGES

- Hearing: Diminished or loss of hearing also affects our nutrition and food experience. The inability to hold a conversation with our eating partner can limit one's food experience.
- Smell: The loss of smell can also have a huge impact on the types of food one chooses to eat as there is a loss of satisfaction that can lead to poor food choices.
- **Taste:** One of the most common complaints is in regards to the **diminished taste** in food. As taste buds decrease, so does our taste for salty and sweet often times making **food taste** more bitter or sour.

# HOW OUR BODY CHANGES AS WE AGE – PHYSIOLOGICAL CHANGES

- Energy: Expenditure generally decreases with advancing age because of a decrease in basal metabolic rate and physical activity, thus decreasing caloric needs.
- Function: Our bodies also begin to experience a decrease in kidney function, redistribution of body composition and changes in our nervous system.
- **Frailty** describes a condition in which multiple body systems gradually lose their in-built reserves.

# HOW OUR BODY CHANGES AS WE AGE – OTHER AGING-RELATED CHANGES

- Dentition: The makeup of a set of teeth (including how many, their arrangement and their condition). The loss of teeth and/or ill-fitting dentures can lead to avoidance of hard and sticky foods.
- o Gastrointestinal Changes: Chronic gastritis, constipation, delayed stomach emptying and gas, may lead to avoiding healthy foods, such a fruits and vegetables the food categories that should be more emphasized rather than eliminated.

#### LOSS OF APPETITE – EAT LESS AS WE AGE?

Margot Gosney, a professor of geriatric medicine, specialising in nutrition says:

- There's a shrinkage of the stomach. And the brain tells the older person they're full much more quickly.
- There's also a change in the mechanism in the brain telling us we need food or drink in the first place it's really easy for older people to get dehydrated.

# SENIORS, MALNUTRITION, VITAMIN DEFICIENCIES

- Malnutrition is seen in varying degrees in the elderly, along with varying vitamin deficiencies.
- Malnutrition is due to under nutrition, nutrient deficiencies or imbalances.
- Most physicians do not see frank malnutrition anymore, such as scurvy; but more milder malnutrition symptoms such as loss of appetite, general malaise or lack of overall interest and wellness.

### VITAMIN DEFICIENCIES

 Common nutrient deficiencies of dietary origin include inadequate intake of vitamin A, B, C, D, E, folic acid and niacin

### HUMAN NUTRITION RESEARCH CENTRE ON AGING, TUFTS UNIVERSITY

- Foods that score high in antioxidant analysis may protect cells from oxidative damage ( ORAC = oxygen radical absorbance capacity)
- \* Eating plenty of these "power" fruits and vegetables may help to slow the processes associated with aging on both body and brain
- ❖ ORAC value does not necessarily reflect their health benefit – depends on bioavailability

### TOP SCORING ORAC FOODS (PER 100G)

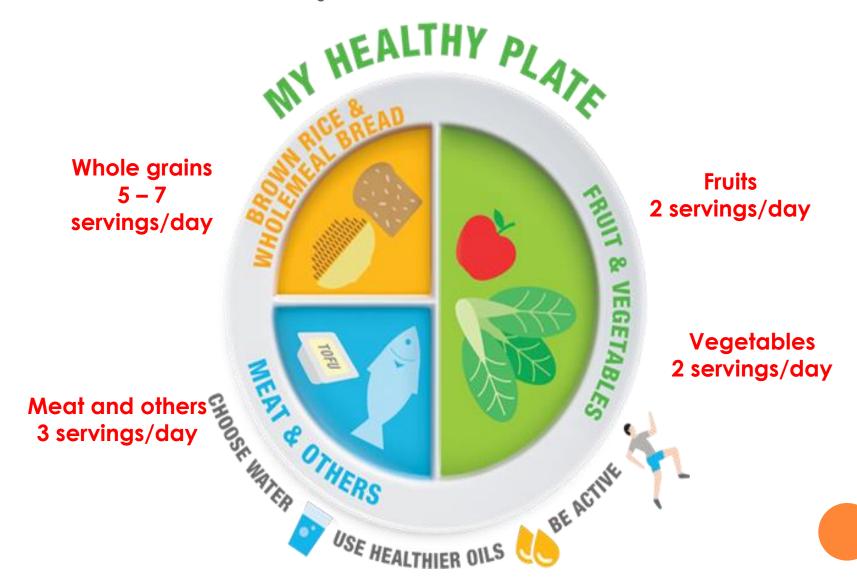
FRUITS	VEGETABLES
<ul> <li>Blueberries</li> <li>Blackberries</li> <li>Strawberries</li> <li>Raspberries</li> <li>Prunes</li> <li>Plums</li> <li>Red grapes</li> <li>Oranges</li> <li>Cherries</li> <li>Kiwi</li> <li>Pink grapefruit</li> </ul>	<ul> <li>Kale</li> <li>Spinach</li> <li>Brussel Sprouts</li> <li>Alfalfa sprouts</li> <li>Beets</li> <li>Red bell pepper</li> <li>Onion</li> </ul>







### ACHIEVING REQUIREMENTS FOR ELDERLY



# TUFTS UNIVERSITY NUTRITION SCIENTISTS PROVIDE UPDATED MYPLATE FOR OLDER ADULTS

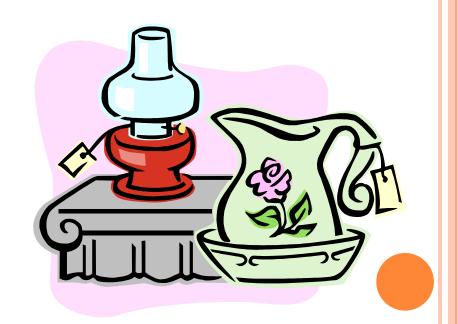


Remember to Stay Active!

-AARP Foundation

### NUTRIENTS OF CONCERN IN THE ELDERLY

- **Calories**: Nutrient Density
- Protein
- Calcium
- <sup>™</sup>Vitamin D
- □Supplements?
- Don't forget
  - > Fibre
  - > Fluids



### MENU PLANNING FOR OLDER ADULTS

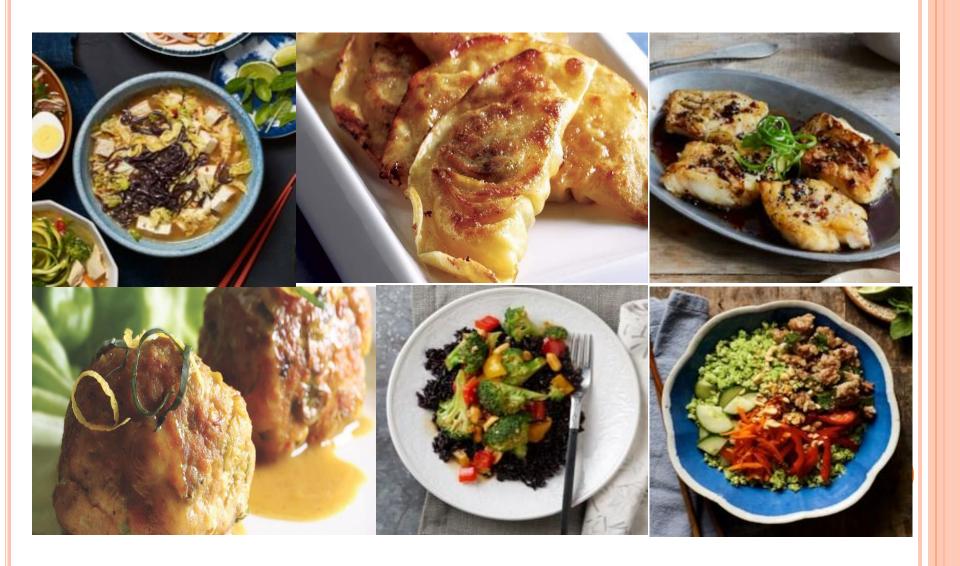
- Menu Design for Appeal
- Presentation of Food
- Nutrient Retention

### FOOD PRESENTATION - MENU DESIGN

It is important when planning menus to make sure that they are balanced correctly for

- Variety of foods
- Colour
- Texture and Shape
- Consistency
- Flavour
- Method of preparation

### VARIETY OF FOODS



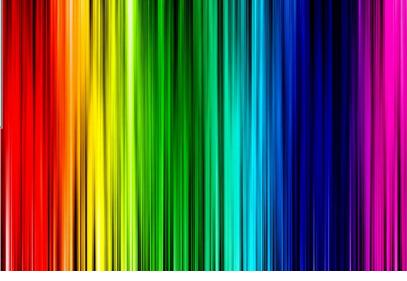
### **COLOUR**







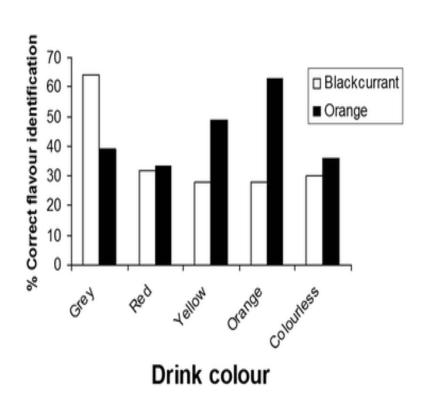








# COLOUR OF FOOD (ZAMPINI ET AL. 2007)



Influence of colour on people's ability to correctly identify food

→ People identify food according to the colour most closely associated to the natural food colour. People confused flavors when a drink did not have the appropriate color

### **TEXTURE AND SHAPE**

- Soft
- Hard
- Crispy
- Crunchy
- Chewy
- Smooth, brittle & grainy
- Puree





### **CONSISTENCY**

- Runny
- Gelatinous
- o Pasty
- Thin
- Thick
- Sticky
- Gummy



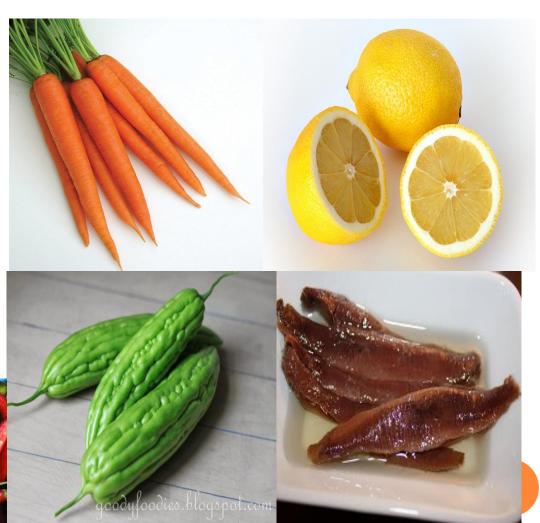
### FOOD TEXTURES

FLUID		
Mildly thick –level 150	Moderately thick – level 400	Extremely thick – level 900
FOOD		
Texture A – Soft Easy to Chew (0.6 cm pieces)	Texture B – Minced and Moist Minimal chewing (0.3 cm pieces)	Texture C – Smooth Pureed No chewing is required

### **FLAVOUR**

- Sweet
- Sour
- o Bitter
- Salty
- Umami





# TASTE-RELATED SENSATIONS IN OLD AGE

T. OGAWA ET AL 02 MARCH 2017

Sense of taste is important. It allows for

- (a) Assessment of nutritional value, safety and quality of foods
- (b) Food enjoyment and quality of life.



### **TASTE**

- Individuals do not all experience the same taste sensations.
- This variation comes from **genetic differences** as well as **taste pathologies**
- This affects ingestive behavior and, as such, nutrient intake.
- Hispanics and African Americans rated taste sensations higher than non-Hispanic Whites
- Individuals of different ethnicities may require **personalized interventions** that take into account the **different sensory experience** that these individuals may have when consuming foods.

### INVESTIGATING AGE-RELATED CHANGES IN TASTE AND AFFECTS ON SENSORY PERCEPTIONS OF ORAL NUTRITIONAL SUPPLEMENTS

ORLA KENNEDY ET AL

AGE AND AGEING, VOLUME 39, ISSUE 6, 1 NOVEMBER 2010, PAGES 733-738,

- Significant differences were found in both sweetness detection and recognition thresholds (P = 0.0001) between young and older adults, with *older adults more likely to incorrectly identify the taste* (P = 0.0001).
- o Both groups **sweetness intensity** was found to be **correlated with overall product dislike** across all flavour variants tested (R = 0.398, P = 0.0001).
- Sweetness appears to be one of many factors contributing to the dislike of ONSs.
- Manufacturers are encouraged to reconsider the formulations of these products in a more palatable and acceptable form

### METHOD OF PREPARATION

- Baking
- Boiling
- Frying
- Steaming
- o Grilling
- Roasting





### **PRESENTATION**

- Eye appeal
- Attractive presentations
- Texture modification

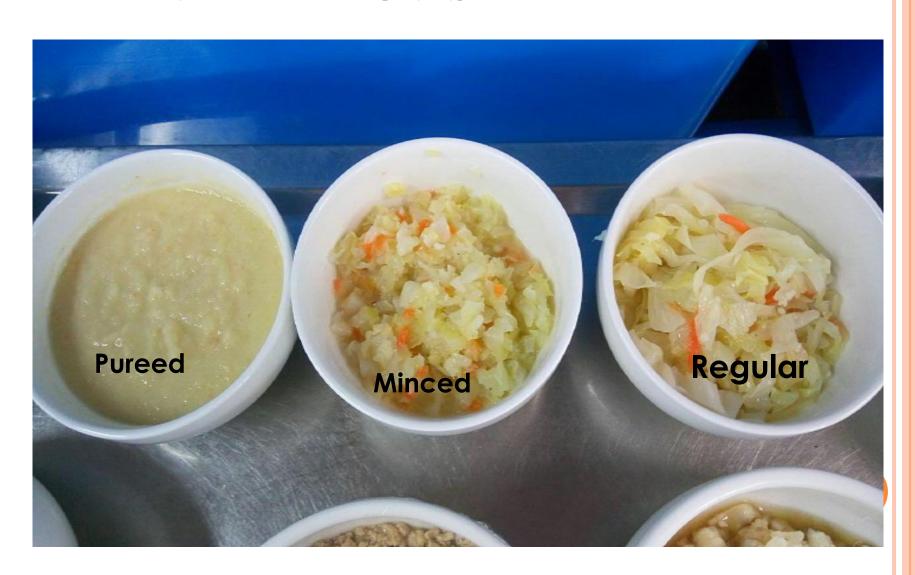
### **NUTRIENT RETENTION**

- Nutrients are lost during cooking
- Water soluble vitamins (B & C) are lost through heat and time
- Microwave or steam vegetables
- Use seasonable fruit and vegetables
- Frozen can have more nutrients then fresh
- Use canned foods to provide variety
- Use proper freezing techniques to preserve nutrients

### SOFT DIET OPTIONS

- Soft Rice
- Extra Gravy
- Porridge
- Blended Porridge
- Soup Noodles
- Mashed Potatoes/ Mashed Pumpkin
- Soft Fruit

### **DIFFERENT TEXTURES**



### AGEING-FRIENDLY FOOD

Important features of food production for the Elderly group include:

- Energy-dense food
- \* Functional food (fortified with protein, calcium, Vitamin D, B12)
- Chewable and swallowing adjusted food such as puree and mashable forms
- Smaller portions and ready-to-bite meals
- Practical simple packaging which is easy to open and reseal
- Larger print labels, simple to read, and clearly labelled with nutritional information

### FOOD PRODUCTS FOR THE ELDERLY

- High Protein
- High Protein and High Carbohydrates
- Functional Nutrition

### HIGH PROTEIN

Food items which aim to provide a source of protein.

- Beverages Soy based
- Soups Miso or Chicken based
- Mains Savoury, curry based
- Snacks Dim Sum/ Pau/ Red Bean/ Tau Suan
- o Desserts e.g. Peanut Butter Kueh

#### HIGH PROTEIN AND HIGH CARBOHYDRATES

The purpose of these reconstituted preparations is to provide the protein and calories needed to maintain muscle tone and shape.

- Cold and hot beverages Milo/ Malt/ Chocolate
- Smoothies
- Creams
- Soups
- Cereal preparations

### **FUNCTIONAL NUTRITION**

These products aim to achieve a **functional objective.** They make the link between nutrition and health while maintaining a taste appeal.

#### Some examples:

- Fibre
- o Calcium-rich
- Extra protein boost EAA (with ~2.5 g leucine) and HMB (β-hydroxy β-methylbutyric acid) may improve muscle outcomes.
- Texture modified meals
- Gelified water/ beverages

### LEUCINE RICH FOOD

- Cheese (Parmesan) 3452mg/100g
- Soybeans (Roasted) 3223mg/100g
- o Beef (Sirloin, grilled) 3165mg/100g
- o Chicken (Breast, cooked) 2652mg/100g
- o Pork (Sirloin, cooked) 2560mg/100g
- Seeds & Nuts (Pumpkin Seeds) 2419mg/100g
- Fish (Tuna, cooked) 2293mg/100g
- Seafood (Octopus, cooked) 2099mg/100g
- o **Peanuts** 1812mg/100g
- Beans (White, cooked) 776mg/100g









# HMB (B-HYDROXY B-METHYLBUTYRIC ACID RICH FOODS

- **HMB** is a metabolite of the branched-chain amino acid **leucine**.
- Our body can produce **0.3 to1g HMB/day** in muscle tissue.
- Found in both plants and animals and is particularly concentrated in alfalfa, corn silage, grapefruit and catfish.
- Although HMB is found in higher concentrations in these foods, the amounts are still far too small to get a beneficial amount.







"The doctor of the future will give no medicine, but will interest his or her patients in the care of the human frame, **proper diet**, and in the cause and prevention of disease."

- Thomas Edison

### THE BEST 6 DOCTORS

Sunshine

Water

Rest

Air

Exercise

**Diet** 



