Poor nutrition a threat to elderly adults

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Getting the proper nutrition is important for many older adults. In fact, their lives may depend on it.

“Research has shown that recent weight loss in this population of older adults, whether it is intended or not, predicts mortality,” said Research Assistant Professor Julie Locher (Gerontology & Geriatric Medicine). “While the whole nation has turned its eye on obesity, we’re still concerned about under-nutrition because it’s still a problem within this population of older adults.”

Locher is leading studies here to improve the nutrition of that generation of individuals.

For the past three years, Locher has been principal investigator on a five-year study funded by the National Institute on Aging (NIA) exploring the eating behaviors of homebound older adults.

The study examines the different factors that influence the nutritional intake of these older individuals.

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Research Assistant Professor Julie Locher (Gerontology & Geriatric Medicine) is leading studies here to improve the nutrition of homebound older adults.

“This is a comprehensive study that looks at all the factors,” she said, including social and psychological, medical, economic, dependency and disability, medication usage and oral health.

See ELDERLY on page 3
Elderly likely to consume too few calories

Continued from page 1

The study employs the efforts of scholars in multiple disciplines, but as a sociologist, Locher is most interested in the sociological and psychological factors.

Two hundred thirty individuals ages 65 and older, who either have experienced a recent acute illness or exacerbation of a chronic illness causing them to be homebound, are participating in the study. Those with cancer were excluded.

Locher said most older homebound adults consume about 1,300 calories per day. The average caloric intake for women is 1,900 to 2,200 calories per day, and the average intake for men is 2,300 to 2,900 per day. Locher said though older adults may require fewer calories, 1,300 is too few.

Locher said sociological factors may play an important role in their food consumption.

“Previous research shows that people who eat with someone consume more calories or eat better than those who eat alone. We found that those who eat in the presence of another person consume about 84 more calories per meal than those who eat alone,” Locher said. “So if you are living with someone and are concerned about their nutrition, sit down and eat with them.”

Locher’s findings inspired her to submit a grant June 1 to the NIA to develop a nutritional intervention for homebound older adults.

“It’s a social and behavioral intervention where we’ll encourage people to make use of their social support system and community resources,” she said.

The study will involve multiple solutions: encouraging participants to eat with others more often, if they are not already doing so; to eat calorie-dense comfort foods they like; to eat smaller, more frequent meals; and to take a multi-vitamin/mineral supplement.

In addition, Locher has applied for grant funding from the Lucille Stewart Beeson Trust Committee to compile a directory of churches and religious organizations that offer services for homebound older adults. The directory would be distributed by health-care providers, social-service providers and Locher through her projects.