

Malnutrition is a deficiency of nutrients (such as proteins, vitamins and minerals) and can occur when you don't eat an adequate balanced diet. Being malnourished can make you ill and being ill can make you malnourished.

An older person may eat poorly for many reasons including a loss of appetite, dental problems or depression - putting them at risk of malnutrition. They may be at greater risk if they:

- live alone
- are housebound or have reduced mobility and find it harder to shop/cook
- are in hospital or a care home
- take medications that affect appetite
- are worried about spending money
- suffer memory loss and forget to eat.

You can help prevent your older relative or friend from becoming malnourished by learning to recognise the early warning signs.



This brochure has been developed with the help of Dr Jackie Morris who has been a Consultant Geriatrician since 1979 and is Chair of the British Geriatrics Society Policy Committee.

Helpful Contacts:

Your local Age Concern:



AGE
Concern

Hungry to be Heard campaign
Age Concern England
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Registered Charity no 261794

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Is an older person you care about malnourished?



AGE
Concern

Spotting the signs of malnutrition

Changes in weight/diet

- Significant weight loss (over half a stone in the last three to six months)
- A recent loss of appetite (not eating properly)
- Loose fitting clothes or jewellery
- Ill-fitting dentures.

A sign of malnutrition is likely to be weight loss, but isn't always. The diet of an overweight person may also lack the vitamins and minerals they need.

Frequently ill / cold

- Recurrent infections
- Difficulty recovering from illness
- Unable to keep warm.

Physical problems

- Constipation or diarrhoea
- Dizziness (prone to falls)
- Pressure sores
- Swollen or bleeding gums
- Sore mouth or tongue
- Difficulties chewing or swallowing
- Tooth decay

Dental and mouth problems are more of a cause of malnutrition than a symptom, because they can make eating difficult and painful.

Signs in the home

Try and plan your visits around mealtimes to get a sense of what your relative's or friend's regular diet is like and if they have any difficulties eating.

If appropriate, have a look in the fridge and cupboards. A lack of food, too much of the same foods, or rotting/ expired foods may signal a problem.

Even people who get meals-on-wheels may not be eating enough and their diet could still need supplementing.



Malnutrition is not a symptom of ageing so don't let the signs be dismissed as simply "old age". There is much that can be done, and there are a range of treatments to help.

What to do if you are concerned

If appropriate, share your concerns with your relative or friend without worrying or alarming them.

At home

Try and encourage your relative or friend to visit the doctor's for a check-up, and ask if you can come with them.

In hospital

Speak to the nurse in charge of the ward or the consultant in charge of their care. They might involve other experts like a dietician (to offer dietary advice), speech and language therapist (to examine any swallowing difficulties) or an occupational therapist (to provide special eating utensils).

In a care home

Raise your concerns directly with the care home manager.

In each setting, you can play an important role in encouraging or helping your relative or friend to eat.