

Malnutrition a hidden epidemic among elders

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Health care systems and providers are not attuned to older adults' malnutrition risk, and ignoring malnutrition exacts a toll on hospitals, patients, and payers, according to the latest issue of the *What's Hot* newsletter from The Gerontological Society of America (GSA).

Under the title "[Aging Policy: Preventing and Treating Malnutrition to Improve Health and Reduce Costs](#)," the new installment points out that aging is a risk factor for [malnutrition](#) and highlights opportunities to improve [nutrition](#) awareness, interventions, and policy priorities.

Support for the publication was provided by Abbott. GSA member Connie Bales, PhD, RD, of the Duke University School of Medicine and Robert Blancato, MPA, of Matz, Blancato & Associates, Inc., served as faculty advisers.

"This issue of *What's Hot* points to a growing but still unaddressed epidemic of malnutrition—especially among [older adults](#)," said Blancato, who heads the National Association of Nutrition and Aging Services Programs. "It makes a strong case for modest but important changes in current laws which can address malnutrition and achieve the dual desirable goals of improving health and reducing health care costs."

Bales, a convener of GSA's Nutrition Interest Group, said the new publication aligns with GSA's mission by expanding scientific knowledge in aging and fostering application of research in the development of public policy.

"The newsletter raises awareness of the nutritional challenges faced by older adults and advocates for applying the existing science to current and future policies that will help improve their nutritional status," she said.

The What's Hot states that malnutrition cuts across all weight categories, from underweight to obese. An estimated one-third to one-half of U.S. adults are malnourished or at risk for malnourishment upon admission to the hospital—and longer hospital stays are associated with worsening nutritional status.

Additionally, about half of older adults in rehabilitation settings are malnourished. Yet only about one-quarter of U.S. medical schools provide at least 25 hours of nutrition instruction for medical students, as recommended by the National Academy of Sciences.

But as the issue points out, there are a range of possible policy interventions that can help mitigate the problem—enhancing the health and quality of life for older adults while simultaneously reducing healthcare costs. The upcoming reauthorization of the Older Americans Act, for example, could be a key opportunity to expand access to malnutrition services and support.

"Modest changes in current laws such as greater utilization of registered dietitians, nutrition screening, and counseling in the Older Americans Act; greater focus on nutrition in care transition grants under the Affordable Care Act; and coverage for oral nutrition supplements for at risk older adults should all be on the agenda for the new Congress," Blancato said. "GSA and its publication make the point that good nutrition throughout the lifespan is the personification of prevention."

Provided by Gerontological Society of America

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