

Eradicating B12 deficiency for the elderly is as simple as screening for it

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New research published in *Applied Physiology, Nutrition, and Metabolism* reveals that a high proportion of long-term care residents have a B12 deficiency. Researchers from the University of Waterloo and the Schlegel-University of Waterloo Research Institute for Aging found that the current state of B12 levels for elderly individuals in long-term care facilities in Ontario warrants considering B12 screening at admission in order to ensure effective treatment.

Currently, prospective long-term care residents are not systematically screened for a B12 deficiency at admission and in some situations not screened unless the individual has symptoms to suggest that they are anemic. However, B12 is linked with many [health issues](#) such as depression and dementia and even suboptimal levels of the vitamin can have negative side effects on cognition, function and quality of life. Screening for deficiency is an especially important practice for [older adults](#) who are commonly B12 deficient as a result of medications that interfere with the vitamin's absorption.

The research published today in *Applied Physiology, Nutrition, and Metabolism* looked at eight long-term care facilities in Ontario, finding that 14% of residents displayed a B12 deficiency at admission with another third of study participants having a lower than optimal B12 status. During the year after admission 4% of residents developed a deficiency, while those who received treatment had improved B12 levels. This study is the first step in providing an accurate estimate of the prevalence of B12 deficiency in individuals over the age of 65 being

admitted to long-term care. The good news: screening by a simple blood test on an annual basis will help to eradicate this deficiency.

"The negative effects of a B12 deficiency for an at-risk community such as elderly adults in long-term care should be a vital concern for policy makers, staff and leadership at long-term care homes, as well as provincial and federal health departments, and warrants consideration of mandatory B12 screening at admission" states Professor Heather Keller, Schlegel Research Chair Nutrition & Aging, University of Waterloo. "This is of particular importance in the context of our aging population with more Canadians requiring long-term care."

A B12 deficiency is a relatively common but highly preventable deficiency in older adults. To date, there is a minimal understanding of the prevalence of this vitamin deficiency among individuals admitted to long-term care facilities. This study addresses this knowledge gap and makes recommendations for further research including more data on the incidence of B12 deficiencies over the first year of residency at long-term [care facilities](#), and the need for additional studies to understand the benefits and costs of screening versus treatment of all residents.

The paper, "[Vitamin B12 status in older adults living in Ontario long-term care homes: prevalence and incidence of deficiency with supplementation as a protective factor](#)" by Kaylen Pfisterer (first author), Mike Sharratt, George Heckman and Heather Keller was published today in *Applied Physiology, Nutrition, and Metabolism*.

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