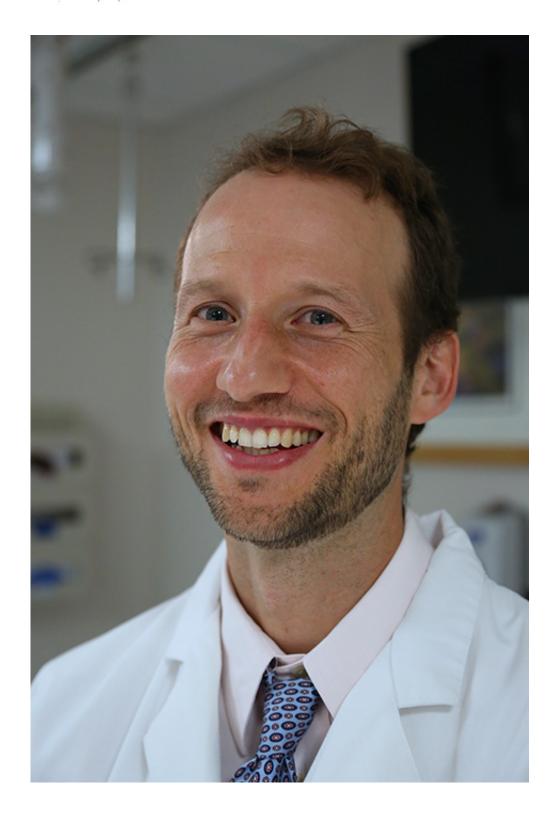


Poor oral health and food scarcity major contributors to malnutrition in older adults

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Tim Platts-Mills, MD, senior author of the study and co-director of the Division of Geriatric Emergency Medicine at the UNC School of Medicine. Credit: Photo by Max Englund/UNC Health Care



UNC School of Medicine researchers led a study to determine risk factors associated with malnutrition among older adults receiving care in the emergency department. The study, published in the *Journal of the American Geriatrics Society*, suggests that food scarcity and poor oral health are major risk factors for malnutrition that leads an older adult—already at high risk of functional decline, decreased quality of life, and increased mortality—to land in the emergency department.

Tim Platts-Mills, MD, senior author of the study, said, "For <u>patients</u> who don't have enough food at home, the solution is pretty obvious and likely much less expensive than paying for the medical care that results from malnutrition: there is an existing national system of food assistance programs, such as Meals on Wheels, and we believe we can use the <u>emergency department</u> to link patients in need to those programs."

"Even though such programs are relatively inexpensive—about \$6 per individual per day - many programs are underutilized and under-funded. We need to link patients to these programs and fund these programs," added Platts-Mills, who is also co-director of the Division of Geriatric Emergency Medicine at the UNC School of Medicine.

The study included 252 patients age 65 and older seeking treatment in emergency departments in North Carolina, Michigan, and New Jersey. Participants were screened for malnutrition and then asked about the presence of <u>risk factors</u>.

The overall prevalence of malnutrition in the study sample was 12 percent, which is consistent with previous estimates from U.S. emergency departments and about double the prevalence in community-dwelling adults (those who are not hospitalized and do not live in an assisted-living facility). Of the three sites, patients receiving care in the North Carolina emergency department had the highest rate of malnutrition, 15 percent. The researchers note that North Carolina also



has one of the highest rates of older adults living below the poverty line (ranked third out of 50 states).

Of the risk factors studied, poor oral health was found to have the largest impact on malnutrition. More than half of the patients in the study had some dental problems, and patients with dental problems were three times as likely to suffer from malnutrition as those without dental problems. Ten percent of patients experienced food insecurity - the definition of which was based on responses to questions regarding not having enough food, eating fewer meals, and going to bed hungry. Food insecurity was also strongly associated with malnutrition. Other factors associated with malnutrition that may contribute to the problem include social isolation, depression, medication side effects, and limited mobility.

Collin Burks, a UNC medical student and the study's lead author, said, "Improving oral health in older adults will be more challenging but also important. Medicare does not cover dental care. Fixing dental problems not only makes it easier for these individuals to eat but also can improve their self-esteem, quality of life, and overall health. We need affordable methods of providing dental care for <u>older adults</u>."

Platts-Mills's research group is now developing and testing interventions to link malnourished older patients identified in the <u>emergency</u> department to <u>food</u> assistance programs in the community.

More information: Collin E. Burks et al, Risk Factors for Malnutrition among Older Adults in the Emergency Department: A Multicenter Study, *Journal of the American Geriatrics Society* (2017). DOI: 10.1111/jgs.14862



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