



Healthy Aging Update

Iowa Department of Elder Affairs

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Our Mission:

To provide advocacy, educational, and prevention services to older Iowans so they can find Iowa a healthy, safe, productive, and enjoyable place to live and work.

Welcome

This issue of Healthy Aging Update continues to provide information on the Dietary Guidelines with a focus on fruits and vegetables. Additional information is provided to serve as a resource in providing nutrition services to older Iowans.

Dietary Guidelines for Americans: Focus on Fruits and Vegetables

Fruits, vegetables, whole grains, and milk products are all important to a healthful diet and can be good sources of the nutrients. When increasing intake of fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products, it is important to decrease one's intake of less-nutrient-dense foods to control calorie intake. The 2,000-calorie level is used as a reference level only; it is not a recommended calorie intake because many Americans should be consuming fewer calories to maintain a healthy weight.

Four and one-half cups (nine servings) of fruits and vegetables are recommended daily for the reference 2,000-calorie level, with higher or lower amounts depending on the caloric level. Fruits and vegetables provide a variety of micronutrients and fiber. Refer to table for a list of fruits and vegetables that are good sources of vitamins A (as carotenoids) and C. In the fruit group, consumption of whole fruits (fresh, frozen, canned, dried) rather than fruit juice for the majority of the total daily amount is suggested to ensure adequate fiber intake. Different vegetables are rich in different nutrients. In the vegetable group, weekly intake of specific amounts from each of five vegetable subgroups (dark green, orange, legumes [dry beans], starchy, and other vegetables) is recommended for adequate nutrient intake. Each subgroup provides a somewhat different array of nutrients. In the USDA Food Guide at the reference 2,000-calorie level, the following weekly amounts are recommended:

Dark green vegetables	3 cups/week
Orange vegetables	2 cups/week
Legumes (dry beans)	3 cups/week
Starchy vegetables	3 cups/week
Other vegetables	6 ½ cups/week



Most current consumption patterns do not achieve the recommended intakes of many of these vegetables. The USDA Food Guide suggests increasing intakes of dark green vegetables, orange vegetables, and legumes (dry beans) as part of the overall recommendation to have an adequate intake of fruits and vegetables.

KEY RECOMMENDATIONS

- Consume a sufficient amount of fruits and vegetables while staying within energy needs. Two cups of fruit and 2½ cups of vegetables per day are recommended for a reference 2,000-calorie intake, with higher or lower amounts depending on the calorie level.
- Choose a variety of fruits and vegetables each day. In particular, select from all five vegetable subgroups (dark green, orange, legumes, starchy vegetables, and other vegetables) several times a week.

Set a goal for yourself to eat more fruits and vegetables.

Plan your evening meal to always include:

2 vegetables

1 fruit

Sources of vitamin A (carotenoids)

- Bright orange vegetables like carrots, sweetpotatoes, and pumpkin
- Tomatoes and tomato products, red sweet pepper
- Leafy greens such as spinach, collards, turnip greens, kale, beet and mustard greens, green leaf lettuce, and romaine
- Orange fruits like mango, cantaloupe, apricots, and red or pink grapefruit

Sources of vitamin C

- Citrus fruits and juices, kiwi fruit, strawberries, guava, papaya, and cantaloupe
- Broccoli, peppers, tomatoes, cabbage (especially Chinese cabbage), brussel sprouts, and potatoes
- Leafy greens such as romaine, turnip greens, and spinach



Antioxidant Power: Rev-Up with Dried Fruits and Vegetables

Kari Freyberger, ISU Dietetic Intern

Tired of the same old routine when it comes to consuming fruits and vegetables daily? Well here is a way to spice up that routine! Try dried fruits and vegetables. They are an easy way to incorporate the servings of fruits and vegetables needed daily for optimal health. Try raisins, dried cherries or cranberries in oatmeal, a salad, or cold cereals. Make a trail mix with dried fruit for easy snacks. Try adding sun-dried tomatoes, dried carrots or spinach to your favorite pasta dishes. They also add color and excitement to enhance the meal. Just experiment, but remember a serving of dried fruit is only ¼ cup because they are more concentrated than their fresh predecessors.

Dried fruits and vegetables are also a good source of antioxidants. Vitamins C, E and beta-carotene are a few of the antioxidants found in fruits and vegetables. Beta-carotene is a carotenoid, which gives the fruits and vegetables their vibrant colors like orange and dark green. Antioxidants play a housekeeping role in the body by “mopping up” unstable free radicals, which are natural by-products of many cell processes, before they can get a chance to do harm to your body. They can be helpful in preventing stroke, some cancers, heart disease, and age-related macular degeneration (the most prevalent cause of irreversible blindness). So, remember to get your servings of fruits and vegetables daily and an easy way to start is by incorporating dried fruits and vegetables into the foods or dishes you already consume.

Nutrition counseling can be funded under Older American Act Title III-B, III-C, III-D, Elderly Services General, Senior Living Program and Medicaid Elderly Waiver.

Nutrition Screening and Counseling

Nutrition screening is the process of identifying characteristics known to be associated with dietary or nutrition problems. Without identification and intervention, older adults often begin a downward spiral of declining health which includes weakness, more illnesses, compromised immunity, increased dependency, pressure ulcers, hip fractures, increased health care costs, which all have a negative impact on quality of life.

The nutrition questions in the NAPIS serves as a nutrition screening tool by identifying 10 key areas that impact the nutritional health of older adults. A nutritional score of six or higher indicates high nutrition risk and intervention is needed. Intervention may include providing educational materials and programs addressing problem areas. In addition to nutrition education, the benefit of individualized nutrition counseling by a registered/licensed dietitian should not be overlooked.

Nutrition counseling in its basic form is a process of guiding a person toward a healthy, nutritionally sound lifestyle. Dietitians have skills to translate the science of nutrition into practical interventions while using counseling techniques to help change nutrition and health behaviors. Nutrition counseling provides individualized guidance on appropriate food and nutrient intakes taking into consideration health, cultural, socioeconomic, functional and psychological factors. Through this individualized guidance, the dietitian will negotiate a nutrition plan with the older adult that is acceptable and practicable which contributes to improved nutritional status and ultimately better health and independent living.

Iowa Department of Elder Affairs Program Instruction IAPI 2005-20

Participants of congregate and home delivered meal programs, nutrition counseling and case management must all have the NAPIS Nutrition Screening completed. This IAPI provides procedures for nutrition screening.

IAC 321-7.12(4) The AAA shall ensure that nutrition funds are used to:

- b.* Provide other nutrition services to ensure that the maximum number of eligible elders, with emphasis on the frail, those with greatest social and economic need, and the isolated, shall have the opportunity to participate.
- c.* Provide nutrition screening and counseling as appropriate and nutrition education services to address assessed needs.

National Health Interview Survey Center for Disease Control (CDC) 2005

- The prevalence of diabetes is highest among older adults with 16.2% of individuals over the age of 65 having diabetes.
- The percentage of adults 65yrs+ who fail to obtain needed medical care due to cost at some time during the past 12 months was 2.4% for males and 2.7% for females compared to 5.5% for all ages.
- The prevalence of obesity in the 60yrs+ group is 25.1% compared to 25.6% for all ages. This highest rate of obesity is in the 40-59 yr age group with 28.9%.
- The percentage of older adults who assess their health as excellent or very good is 40.1% for males and 37.4 % for females compared to 66.4% for all age groups.
- The percentage of adults aged 65+ years who need help with personal care from other persons was 6.6% (up from 6.3% in 2004).
- For more information visit this link
www.cdc.gov/nchs/about/major/nhis/released200512.htm

Resources

Food Safety

- USDA provides food safety recommendations for preparing meals with slow cookers. www.fsis.usda.gov/Consumers_&_Educators/index.asp
- Consumers with food safety questions can call the toll-free USDA Meat and Poultry Hotline at 1-(888) 674-6854. The hotline is available in English and Spanish and can be reached from 10 a.m. to 4 p.m. (Eastern Time) Monday through Friday. Recorded food safety messages are available 24 hours a day. "Ask Karen" is the FSIS virtual representative available 24 hours a day to answer your questions at www.fsis.usda.gov/Food_Safety_Education/Ask_Karen/index.asp#Question

Health Promotion.

- It is estimated that 1,780 Iowans will develop colorectal cancer in 2006. Screening and early intervention is effective in preventing death from this cancer. The Iowa Colorectal Cancer Task Force has developed an easy to understand presentation on screening for this disease on a CD with a script. This would be an excellent program to partner with county public health nurses in presenting programs at meal sites. The material can be obtained free of charge from Caryl.Range@cancer.org
- Osteoporosis affects millions of older Americans. This disease thins and weakens bones to the point that they become fragile and break easily. It is known as a "silent" disease because it often develops without symptoms. One out of every two women and one in four men over age 50 will have an osteoporosis-related fracture in their lifetime, most often breaking bones in the hip, spine, and wrist. To help people learn more about this serious bone disease, information about the prevention and treatment of osteoporosis has just been added to NIHSeniorHealth (www.nihseniorhealth.gov).
- Chronic Obstructive Pulmonary Disease(COPD) information has just been added to NIHSeniorHealth www.nihseniorhealth.gov, the National Institutes of Health (NIH) Web site designed especially for seniors. Consumers can log onto to learn more about this slowly progressing lung disease, which is the fourth leading cause of death in the United States. COPD, which includes chronic bronchitis and emphysema, damages the lungs, making it difficult to breathe. Early detection and appropriate treatment of COPD can slow the progression of the disease.
- The [State of 50+ America 2006](#) report is available from AARP. Compared with a decade ago, the state of 50+ America seems to have improved, but the quality of life of midlife and older Americans finds that the picture has become less favorable and the outlook more bleak during the most recent year. www.aarp.org/research/economy/trends/fifty_plus_2006.html
- Risk factors for Alzheimer's disease include education, cardiovascular health, psychosocial, depression, physical activity, chronic illness and genetics. "NIH seeks strategies to preserve brain health" (Eurekalert [American Association for the Advancement of Science], Feb. 21, 2006). www.eurekalert.org/pub_releases/2006-02/nioa-nss021606.php
- Find Out How to Prevent Falls (From NCOA Senior Focus Jan/Feb 06) Did you know that one out of every three older people falls every year? In fact, you are five times more likely to end up in the hospital because of a fall, than for any other type of injury. Fortunately, there are many steps you can take to prevent falls.

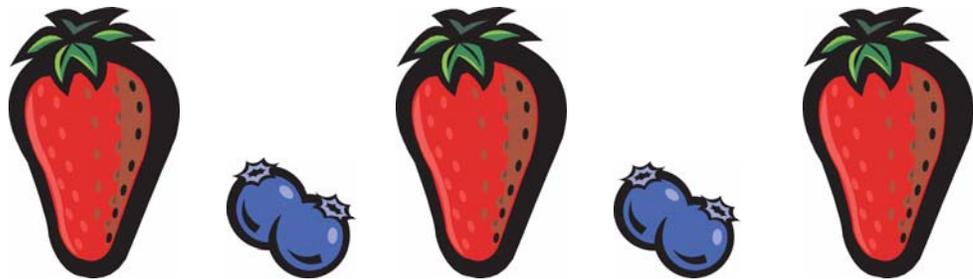
- The Minnesota Safety Council has a checklist you can use to make sure different rooms in your house are safe. It will ask you questions about how your house is set up and what is in it. You can print out the checklist from its Website: www.mnsafetycouncil.org/seniorsafe/falls/.
- Act in Time to Heart Attack Signs (From NCOA Senior Focus Jan/Feb 06)
Many people think a heart attack is sudden, like in a movie when someone clutches his or her chest and falls over. The truth is that many heart attacks start slowly, as a mild pain or discomfort. If you feel such a symptom, you may not be sure what is wrong.

Here are some signs of a heart attack:

- Chest Discomfort (uncomfortable pressure, squeezing, fullness, or pain in the center of the chest that lasts more than a few minutes, or goes away and comes back)
- Discomfort in Other Areas of the Upper Body (one or both arms, the back, neck, jaw, or stomach)
- Shortness of Breath (often before or with chest discomfort)
- Other Signs (a cold sweat, nausea, light-headedness)

If you or someone you are with begins to have chest discomfort, especially with one of the other signs, call 9-1-1 right away. Don't wait for more than a few minutes! If you are having symptoms and cannot call 9-1-1, have someone else drive you to the hospital right away. Never drive yourself, unless you have absolutely no other choice. For more information, click [here](#).

- A New Vision of Aging: Helping Older Adults Make Healthier Choices
www.cfah.org/programs/aging.cfm It is clear that if older adults increase physical activity, improve eating habits and take some relatively simple steps to minimize the risk of falling, they could live longer and healthier lives. This report from the Center for the Advancement of Health discusses prevention and adoption of healthy habits supported by resources in each local community.



- "Tool to reduce elderly driving deaths nationwide" [American Association for the Advancement of Science], Mar. 7, 2006).
www.eurekalert.org/pub_releases/2006-03/evms-ttr030606.php
- You can find national or state data on health conditions in the National Center for Health Statistics' (NCHS) "Tables on Trends in Aging and Health," which you can now link to from the Live Well, Live Long website at www.asaging.org/cdc. The NCHS, the nation's principal health statistics agency, maintains an online Data Warehouse (you can access it directly at www.cdc.gov/nchs/datawh.htm). NCHS recently added a new section to the Data Warehouse. "Trends in Health and Aging" presents the most requested data on health and older Americans.

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*If you are interested in
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- Assessment tools for older adult care are available in the “Try This” series and includes 30 tools -- including 10 related to dementia -- geared toward applying the highest standards of practice in older-adult care. The tools are free and easy to understand and can be administered in 20 minutes or less. To view the entire series, visit www.hartfordign.org/resources/education/tryThis.html. A few of the highlights:
 - * Fulmer SPICES: An overall assessment tool for older adults www.hartfordign.org/publications/trythis/issue01.pdf The tool assesses sleep disorders, problems with eating or feeding, incontinence, confusion, evidence of falls, and skin breakdown.
 - * Mini nutritional assessment for older adults www.hartfordign.org/publications/trythis/issue_9.pdf
 - * Alcohol Use Screening and Assessment using a 10-question “yes” or “no” survey. www.hartfordign.org/publications/trythis/issue17.pdf
- Growing Stronger - Strength Training for Older Adults
No matter what your age or physical condition, appropriate physical activity can be good for your health. Like young adults, adults over 50 can also benefit from including strength training as part of regular physical activities. The CDC web site has resources on strength training programs. www.cdc.gov/nccdphp/dnpa/physical/growing_stronger/spotlight.htm

Older Americans Act

- A US Senate Committee held a hearing on the Older Americans Act on February 14, 2006. Testimony can be accessed at http://help.senate.gov/Hearings/2006_02_14_b/2006_02_14_b.html
- The Administration on Aging (AoA) proposes *Choices for Independence* (Choices) for the reauthorization of the Older Americans Act (Act). Choices is a \$28 million demonstration project promoting consumer choice, control, and independence in long-term care. To view the Choices for Independence Proposal, visit the AoA website at www.aoa.gov/about/legbudg/oaa/Choices_for_Independence_White_Paper_3_9_2006.doc.
- The AoA technical clarifying proposals on single statewide plan and service area, program evaluation, NSIP, self-directed care and consumer contributions can be found at www.aoa.gov/about/legbudg/oaa/eNews_Technical_Amendments.doc
- Check out the National Resource Center on Nutrition, Physical Activity & Aging web site sponsored by the AoA at <http://nutritionandaging.fiu.edu/>. The Toolkit on Older American Act Nutrition Programs is a great resource for all aspects of the nutrition program from nutrient requirements and menu planning to health promotion. The web site also has a section on Creative Solutions containing the following topics.
 - Emergency Preparedness
 - Wellness Activities
 - Increasing Participation in Congregate Meal Sites
 - Improving Dining Experiences