

Healthy Aging Update

Iowa Department of Elder Affairs

June 1, 2006 Volume 1, Issue 4

In this Issue:

- DASH Diet
- Emergency Preparedness
- Causes of Death
- Opportunities to Improve Health and Quality of Life
- CDC
 Promoting
 Healthy Aging
- Low Vitamin D
 Common in
 Elderly
- Resources

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.

DASH Diet

The following information on the DASH Diet is from the U.S. Department of Health and Human Services (http://www.nhlbi.nih.gov/health/public/heart/hbp/dash/). The DASH eating pattern is designed to integrate dietary recommendations into a healthy way to eat for most individuals (http://www.usda.gov/cnpp/pyramid.html).

Diet affects the blood pressure. Studies have shown that blood pressure can be lowered by following a particular eating plan—called the Dietary Approaches to Stop Hypertension (DASH) eating plan—and reducing the amount of sodium consumed. This plan is healthy for all adults as it may help prevent the development of high blood pressure.



What is high blood pressure?

Blood pressure is the force of blood against artery walls. Blood pressure rises and falls during the day. When it stays elevated overtime, it's called high blood pressure. High blood pressure is dangerous because it makes the heart work too hard, and the force of the blood flow can harm arteries. High blood pressure often has no warning signs or symptoms. Once it occurs, it usually lasts a lifetime. Uncontrolled, it can lead to heart and kidney disease and stroke.

High blood pressure can be controlled if you take steps: maintain a healthy weight; be physically active; follow a health eating plan, which includes food lower in salt and sodium; if you drink alcoholic beverages, do so in moderation; and if you have high blood pressure and are prescribed medication, take it as directed.

Blood Pressure Levels for Adults					
Category	Systolic (MMHg) Diastolic (MMH				
Normal	Less than 120	Less than 80			
Pre-hypertension	120-139	80-89			
Hypertension	140 or higher	90 or higher			

Calorie saving tips

Increase fruits—
Eat a medium apple instead of four short bread cookies to save 80 calories
Eat ¼ cup of dried apricots instead of a 2-ounce bag of pork rinds to save 230 calories.

Increase vegetables— Instead of 5 ounces of chicken, have a stir-fry with 2 ounces of chicken and 1 ½ cups of vegetables to save 50 calories.

Have a 3 ounce piece of meat for supper instead of 6 ounces. Add ½ cup of carrots and ½ cup of spinach to save 200 calories.

Increase lowfat or fat free daily products—
Drink 8 ounces of skim milk in place of whole milk to save 90 calories.

Other tips
Eat smaller portions.
Use lowfat or fat free condiments.
Use half as much vegetable oil, soft or liquid margarine, or salad dressing, or choose fat free versions.

What is the DASH Eating Plan?

The DASH provides a diet low in saturated fat, cholesterol, and total fat, and that emphasizes fruits, vegetables, and low fat dairy foods. It also includes whole grain products, fish, poultry, and nuts. It is reduced in red meat, sweets, and sugar containing beverages. It is rich in magnesium, potassium and calcium, as well as protein and fiber.

The DASH eating plan used in studies resulted in significant improvements in blood pressure calls for a certain number of servings from various food groups. The numbers of servings you require depend on your individual calorie needs.

DASH Eating Plan			
Food Group	Daily Servings 1600 Calories	Daily Servings 2000 Calories	Serving Size
Grains	6	7-8	1 slice bread 1oz dry cereal ½ cup cooked rice, pasta or cereal
Vegetables	3-4	4-5	1 cup raw leafy vegetable 1/2 cup cooked vegetable 6 oz vegetable juice
Fruits	4	4-5	6 oz fruit juice 1 medium fruit 1/4 cup dried fruit 1/2 cup fresh, frozen, or canned fruit
Lowfat or fat free dairy foods	2-3	2-3	8 oz milk 1 cup yogurt 1 ½ oz cheese
Meats, poultry, and fish	1-2	2 or less	3 oz cooked meats, poultry, and fish
Nuts, seeds, and dry beans	3 per week	4-5 per week	½ cup or 1 ½ oz nuts 2 Tbsp or ½ oz seeds ½ cup cooked dry beans, peas
Fats and oils	2	2-3	1 tsp soft margarine 1 Tbsp lowfat mayonnaise 2 Tbsp light salad dressing 1 tsp vegetable oil
Sweets	0	5 per week	1 Tbsp sugar 1 Tbsp jelly or jam 1/2 oz jelly beans 8 oz lemonade

Fruits and vegetables are important sources of potassium, magnesium and fiber.



Tips to Reduce Sodium

Buy fresh, plain frozen, or canned with "no salt added" vegetables.

Use fresh poultry, fish or lean meats, rather than canned, smoked, or processed.

Choose ready-to-eat cereals that are lower in sodium.

Use spices instead of salt. In cooking and at the table, flavor foods with herbs, spices, lemon, lime, vinegar, or salt-free seasoning blends.

Additional information on the DASH Diet can be obtained the National Health, Lung, and Blood Institute web site at http://www.nhlbi.nih.gov/

Where's the Sodium				
Food Groups	Sodium (mg)			
Grains				
Cooked cereal, rice, pasta, unsalted, ½ cup	0-5			
Ready-to-eat cereal, 1 cup	100-360			
Bread, 1 slice	110-175			
Vegetables				
Fresh or frozen, cooked without salt, ½ cup	1-70			
Canned or frozen with sauce, ½ cup	140-460			
Tomato juice, canned ¾ cup	820			
Fruit				
Fresh, frozen, canned, ½ cup	0-5			
Lowfat or fat free daily foods				
Milk, 1 cup	120			
Yogurt, 8 ounces	160			
Natural cheese, 1 ½ ounces	110-450			
Processed cheese, 1 ½ ounces	600			
Nuts, seeds, and dry beans				
Peanuts, salted, 1/3 cup	120			
Peanuts, unsalted, 1/3 cup	0-5			
Beans cooked from dried, or frozen, without salt, 1/2 cup	0-5			
Beans, canned, ½ cup	400			
Meat, fish and poultry				
Fresh meat, fish, poultry, 3 ounces	30-90			
Tuna canned, water packed, no salt added, 3 ounces	35-45			
Tuna canned, water packed, 3 ounces	250-350			
Ham, lean, roasted, 3 ounces	1,020			



DASH Sample menu

Breakfast

- 1 low fat granola bar
- 1 medium banana
- $\frac{1}{2}$ cup fruit low-fat yogurt, no sugar added
- 1 cup orange juice
- 1 cup low-fat milk

Lunch

- Turkey breast sandwich
- 3 oz turkey breast
- 2 slices whole wheat bread
- 1 large leaf romaine lettuce
- 2 slices tomato
- 2 tsp mayonnaise, low-fat
- 1 Tbsp regular mustard
- 1 cup broccoli steamed
- 1 medium orange

Snack

- 2 Tbsp peanuts, unsalted 1 cup low-fat milk
- 1/4 cup dried apricots

Dinner

- 3 oz spicy baked fish
- 1 cup scallion rice
- $\frac{1}{2}$ cup spinach, sauted with 2 tsp canola oil
- 1 Tbsp almonds, slivered
- 1 cup carrots
- 1 small whole wheat roll
- 1 tsp soft margarine
- 1 small cookie

This menu provides 1939 calories, 27% calories from fat, cholesterol 171 mg, sodium 1500 mg, calcium 1214 mg, magnesium 545 mg, potassium 4710 mg, fiber 36 g.

Iowa Administrative Code (IAC) and Older Americans Act (OAA) Addresses Disaster Planning

OAA

45 CFR 1321.65(e) Where feasible and appropriate, make arrangements for the availability of services to older persons in weather-related emergencies.

IAC

321-7.9 (231)
Information and
assistance services (1)
The AAA shall provide for
information and
assistance services
sufficient to ensure that
all elders within the PSA
have convenient access to
the services.

321-7.19 (231)
Congregate nutrition
services (4) Coordinate
with other community
providers to arrange
meals for elders on
holidays that occur on
regularly scheduled
serving days and also to
the general public in
weather and disaster
related emergencies,
where feasible.

Emergency Preparedness

Annually, disasters occur in Iowa through floods, tornadoes, etc. Recent events have taught us that the Aging Network can assume a more proactive role in attending to special needs for older adults to ensure they receive the type of attention needed in a disaster event. There is a need for Area Agencies on Aging to have a strong and active presence in emergency preparedness planning and response efforts. The growth of the aging population, with more frail elders remaining in their own homes, creates special challenges to assure their safety. The Administration on Aging provides technical assistance materials to assist in preparing and coping with disasters.

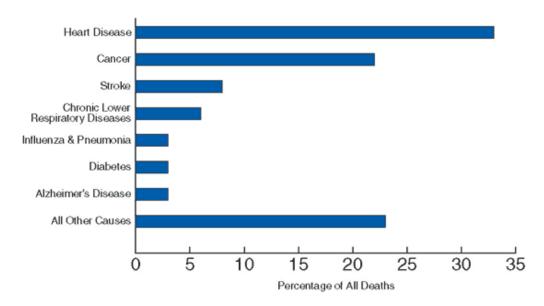
The AoA Emergency Assistance Materials and Guide can be accessed at http://www.aoa.gov/press/preparedness/preparedness.asp. This web site also has information on the AoA Pandemic Flu Plan.

Additional resources:

- http://nutritionandaging.fiu.edu/creative_solutions/emergency_preparedness.asp
- www.Pandemicflu.gov (click on Individual Planning)
- US SENATE SPECIAL COMMITTEE ON AGING HEARING TESTIMONY, HEARINGPUBLICATION:

"Caring for Seniors in a National Emergency: Can We Do Better?" a hearing held May 18, 2006. Hearing Testimony (.pdf format): http://aging.senate.gov/public/index.cfm?Fuseaction=Hearings.Detail&HearingID=17

Causes of Death Among U.S. Adults Aged 65 or Older, 2001



Source: CDC, National Center for Health Statistics. *National Vital Statistics Report*; 2002.

Opportunities To Improve Older Americans' Health and Quality of Life

Poor health and loss of independence are not inevitable consequences of aging. The following strategies have proven effective in improving the health of older adults:

- Healthy lifestyles. Research has shown that healthy lifestyle behaviors, such
 as being physically active, eating a healthy diet, and not smoking, are more
 influential than genetic factors in helping older people avoid the
 deterioration traditionally associated with aging.
- Early detection of diseases. Screening to detect chronic diseases early in their course, when they are most treatable, can save lives; however, many older adults have not had all of the recommended screenings covered by Medicare.
- Immunizations. About 36,000 people aged 65 or older die each year of influenza and invasive pnemoccocal disease. Immunizations can reduce a person's risk for hospitalization and death from these diseases.
- Injury prevention. Falls are the most common cause of injuries to older adults. More than one-third of adults aged 65 or older fall each year, and of those who fall, 20%–30% suffer moderate to severe injuries that decrease mobility and independence.
- Self-management techniques. Programs to teach older adults self-management techniques can reduce both the pain and costs of chronic disease. For example, people with arthritis can learn practical skills such as how to manage their pain, how to deal with fatigue and stress, and how to develop a personal exercise program.

The Center for Disease Control Roles in **Promoting Healthy Aging**

The Center for Disease Control (CDC) is committed to ensuring that all people, especially those at greater risk for health disparities, will achieve their optimal lifespan with the best possible quality of health in every stage of life. With new health protection goals that support healthy people in healthy places across all life stages, CDC is setting the agenda to enable people to enjoy a healthy life by delaying death and the onset of illness and disability by accelerating improvements in public health.

Within CDC's National Center for Chronic Disease Prevention and Health Promotion, the Healthy Aging Program serves as the focal point for older adult health. The Healthy Aging Program is engaged in many activities designed to provide a comprehensive approach to health promotion and disease prevention for older adults. It also has developed five ways to implement this approach, often in collaboration with other CDC programs, such as injury prevention and adult immunization.

1. Providing high-quality health information. CDC provides reliable, science-based, high-quality information on the health of seniors for policy makers, public health and aging professionals, the media, and consumers through publications, conferences, training sessions, and Web sites/listserves. The Healthy Aging Web site (http://www.cdc.gov/aging) also provides valuable information and is regularly updated. Working with the American Society on Aging, the Healthy Aging Program engages journalists across the country on issues such as arthritis, immunizations, and fall prevention.

Myth: Health inevitably declines as we get older.

Reality: People of any age can improve their health by adopting healthy behaviors.

- 2. Facilitating the prevention efforts of health care providers and others who serve older adults. Medicare pays for many critical preventive services, yet fewer than 1 in 10 adults aged 65 years or older receive all recommended screenings and immunizations. CDC's Healthy Aging Program supports a model program called SPARC (Sickness Prevention Achieved through Regional Collaboration), which has shown significant success in broadening the use of preventive services. SPARC works to promote public access to services, help medical practices provide preventive services, and strengthen local accountability for service delivery. SPARC currently operates in counties in Connecticut, Massachusetts, and New York, where it serves as a local bridge between public health, aging services, and the health care system. Among its successes is doubling the use of mammography screening among targeted populations in these states.
- 3. CDC web site http://www.cdc.gov/nccdphp/publications/aag/aging.htm accessed 5-9-06

Low Vitamin D Common in Elderly and Associated with Physical Function Loss

Vitamin D insufficiency has been found to be universally common in older adults and associated with more physical function loss over time. Daphne E. Schneider, MD, Cornell University, New York, New York, reported "the prevalence of vitamin D deficiency in our population was so high that variables such as age, gender, cognitive status, vitamin supplementation, and even outdoor exposure and winters spent in sunny climates do not predict vitamin D adequacy." She observed 60% of patients 65 and older having low blood levels of vitamin D and 43% of those taking vitamin D supplements also had low levels of vitamin D. The results support the need to routinely screen older adults for vitamin D levels.

In another study of older adults, low vitamin D levels were associated with impaired physical function. "Vitamin D predicts muscle decline 2 and a half years later," reports Thuy-Tien Dam, MD, associate professor of medicine, University of California, San Diego, California. Of 769 relatively healthy, ambulatory men and women, timed up and go test (TUG) and timed chair stands (TCS) were significantly lower compared to baseline for women with vitamin D insufficiency, defined as less than 70 nmol/L. No vitamin D associations were seen to physical function loss in men. Vitamin D levels of at least 101 nmol/L appear to minimize functional decline in women.

These two studies were reported at the American Geriatrics Society May 2006.

Resources

Food Safety

 Under Secretary for Food Safety Addresses Nation on Summertime Food Safety Mistakes

Under Secretary for Food Safety, Dr. Richard Raymond, informed consumers about the most common food safety mistakes people make during warm weather and how to avoid them in interviews on TV and radio.

"The risk of foodborne illness increases during the summer months because disease-causing bacteria grow faster on raw meat and poultry products in warmer weather," said Under Secretary Raymond. "It is critical to make sure raw meat and poultry are cooked to the proper temperatures. When food is properly cooked, pathogens, even *Salmonella* and highly pathogenic avian influenza will be killed."

You can view the recently recorded video news release on safe summer grilling at http://www.usda.gov/agency/oc/bmtc/vidnews.htm. For more information about this, or other food safety issues, call USDA's Meat and Poultry Hotline toll free at 1-888-MPHotline

The U.S. Department of Agriculture's Food Safety and Inspection Service (FSIS) is issuing a public health alert to remind consumers to ensure that meat products are fully cooked and properly handled before they are consumed.

FSIS has received reports of 14 illnesses caused by E. coli O157:H7 with matching microbiological profiles. There is no link to a specific product but illnesses from this pathogen can be associated with consumption of raw or undercooked ground beef. Illnesses have been found in California, Iowa, New York, Ohio, Michigan, Rhode Island and Wisconsin. These illnesses occurred over a six-month period, beginning in September 2005 through March 2006, and FSIS is working closely with State and local health officials to determine the exposure that led to illness.

Therefore, FSIS wants to remind all consumers of the proper handling and cooking of meat products. Safe steps in food handling, cooking, and storage are essential to prevent foodborne illness. Consumers should follow the four Fight BAC!™ guidelines to keep food safe:

CLEAN: Wash hands and surfaces often. Wash your hands with warm, soapy water for 20 seconds before and after handling food. Wash your cutting boards, dishes, etc., with hot, soapy water after preparing each food item. Wash fruits and vegetables with cold water before using. There is no need to wash or rinse meat or poultry.

SEPARATE: Don't cross-contaminate separate raw, cooked, and ready-to-eat foods while shopping, preparing, or storing. Never place cooked food on a plate which previously held raw meat, poultry, or seafood.

COOK: Cook food to proper temperatures. To be sure bacteria and pathogens are destroyed, cook ground beef products to 160 °F. Use a food thermometer to be sure!

CHILL: Refrigerate promptly. Refrigerate or freeze perishables, prepared foods, and leftovers within 2 hours or sooner.

Health Promotion

Materials for Healthy Home Environment

Certain populations, including children, pregnant women, and the elderly are often more vulnerable to environmental health threats, especially those hazards found within the home. Older Americans especially spend a large percentage of their time in their homes, and issues such as indoor air quality are of critical importance to the health of our nation's aging population.

Until now, older Americans have not been provided the skills and information they need to ensure that their homes are as healthy as possible. Recognizing this information gap, Environmental Health Watch, Cleveland Tenants Organization, and the Alliance for Healthy Homes undertook a project in 2005 to provide information and peer-to-peer training to improve seniors' indoor environments. The result of the project is a curriculum intended to help healthy homes advocates, practitioners, and others educate older Americans about indoor environmental health, especially as it impacts respiratory health. This curriculum is designed for ease of use and to allow older Americans to in turn educate their peers about indoor environmental health issues like mold

and moisture, pests and pesticides, and maintaining lead-safe homes for those seniors with young grandchildren.

The curriculum includes a PowerPoint presentation, an easy-to-read fact sheet on cockroach control, pre- and post-training surveys to assess the effectiveness of the curriculum, prompt cards for older Americans to use in their homes and with their peers, and an evaluation form. All curriculum materials are available for free download at www.afhh.org/res/res hh curric 4 older Americans.htm. More detailed information on the development of the healthy homes prompt cards is available at www.ehw.org/Healthy House/HH Prompts.htm.

Funding for this project was provided by the U.S. Environmental Protection Agency's Aging Initiative and the Cleveland Foundation.

• Men Making Meals Program

Michigan provides a cooking program for men as an approach to increase congregate meal participation. The "Men Making Meals Program" was designed for men over the age of 60 to gain hands-on cooking experience. Class topics included: food preparation, selection, safe handling and nutrition tips. Healthy food selections are planned, prepared and eaten in the final class.

Tools You Can Use

2006 Healthcare and aging awards from the American Society of on Aging give examples for innovative health promotion programs. For more information visit webpage at http://www.asaging.org/awards/HAN.cfm.

WORK OUT LOW FAT (Milwaukee, Wisc.)

Organizers: Milwaukee County Department on Aging, Indian Council of the Elderly, and Gerald L. Ignace Indian Health Center. The WOLF program provides activities aimed at preventing and controlling type 2 diabetes as well as maintaining heart health among a population of urban Native American Indian elders.

A MATTER OF BALANCE: MANAGING CONCERNS ABOUT FALLS (Portland, Maine)

Organizers: MaineHealth's Partnership for Healthy Aging; Southern Maine Agency on Aging; Maine Medical Center, Division of Geriatrics; University of Southern Maine A Matter of Balance recruits and trains lay leaders to present an evidence-based program designed to reduce elders fear of falling and improve their activity levels.

MICHIGAN'S COORDINATED ACCESS TO FOOD FOR THE ELDERLY (Lansing, Mich.)

Organizer: Elder Law of Michigan MiCAFE enables older adults to apply for food stamps and access nutritional information at participating senior or community centers where older adults already go for assistance.

I owa Department of Elder Affairs

Jessie Parker Building 510 East 12th St, Ste 2 Des Moines, IA 50319

PHONE: 515-725-3333 800-532-3213

FAX: 515-725-3300

Carlene Russell, RD, LD DEA Nutritionist carlene.russell@ iowa.gov

Articles of interest

- "Sustained blood pressure treatment lowers dementia risk in elderly"
 (Eurekalert [American Association for the Advancement of Science], Apr. 6, 2006). http://www.eurekalert.org/pub_releases/2006-04/aha-sbp040606.php
- "Obesity Plus Arthritis Disabling for Older Women," (_Forbes_, April 10, 2006).
 http://tinyurl.com/ger4l Older Drivers
- "Elderly get help staying on the road," by Pam Kelley (_Charlotte [North Carolina] Observer_, May 2, 2006).
 http://www.charlotte.com/mld/charlotte/living/health/14477783.htm
- "Senior center's turning into 'wellness' havens for aging boomers," by Jane Glenn Haas. http://www.fortwayne.com/mld/newssentinel/living/14590485.htm
- Isolation is seniors' enemy," by Thomas Goldsmith (_Raleigh News & Observer_, May 18, 2006).
 http://www.newsobserver.com/707/story/440808.html

"Program helps disabled elderly stay independent," by Anne Harding (Reuters Health, May 18, 2006).

http://www.reutershealth.com/archive/2006/05/18/eline/links/20060518elin026.html



If you are interested in receiving or discontinuing the healthy aging updates, contact Erin Haafke by email at erin.haafke@iowa.gov.