

Nutritional Considerations for Geriatric Patients: An Integrative Approach

A webinar with Functional and Integrative Dietitian Nutritionist and Certified Personal Trainer Julie Chudak, RDN, CPT, CLT

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Julie Chudak's passion has always been about helping people live a healthy, vital life, on their terms and, as a result, has turned to integrative nutrition with a private practice focused on digestive health where she helps her clients develop customized solutions to rebuilding their health by identifying and addressing the root causes behind their symptoms.

Julie is a registered dietitian nutritionist, certified personal trainer and certified LEAP therapist. Julie has over 20 years of experience working in a variety of settings including corporate wellness, the inpatient setting, dialysis and long-term care.

You can visit Julie at www.lifelongnutritionandfitness.com.



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Disclosure to Participants

Notice of Requirements For Successful Completion

Please refer to learning goals and objectives

Learners must attend the full activity and complete the evaluation in order to claim continuing education credit/hours

Conflict of Interest (COI) and Financial Relationship Disclosures

No conflicts to disclose



Learning Objectives

At the conclusion of this webinar, the learner will be able to:

1. State two anti-inflammatory herbs and supplements for longevity promotion
2. State three common changes that occur in the GI tract with age
3. State two lifestyle functional medicine prevention approaches to address gastroesophageal reflux in a geriatric patient
4. State three medications and supplements appropriate for constipation management
5. Describe the three steps to an integrative approach aimed at resolving atopic dermatitis/eczema in older adults
6. State three potential therapeutic diets to promote skin, lung, eyes, and hair health in older adults
7. State four dietary approaches to addressing osteopenia/osteoporosis in older adults.





Part 1:

Longevity

Longevity Programs

- Valter Longo, Ph.D., director of the Longevity Institute at the University of Southern California, author of *The Longevity Diet*
- Dan Buettner, author of *The Blue Zones*
 - Researched centenarians around the globe and their diets and lifestyles



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Longevity Diet

- Plant-based diet with occasional fish
- 3 meals daily plus snack for the elderly
- Time-restricted eating: limiting food intake to 11-12 hours each day
- Twice or more per year a 5-day fasting-mimicking diet (FMD) (Dr. Longo's Prolon)
 - Triggers a 'metabolic switch'
 - Promotes cellular autophagy (self-destruction) to remove damaged cells and activate stem cell regeneration



(Longo V., 2018; Lang & Rupprecht, 2019; de Cabo & Mattson, 2019; Long VD., 1999; Guevara-Aguirre J. et al., 2011; Longo VD et al., 2005; Fabrizio P. et al., 2001; de Groot S et al., 2020)

Blue Zone Diet

- Emphasizes food quality
- Stop eating when 80% full
- Be mindful of circumstantial eating
- Monitor portion control
- Invest in smaller eating/drinking utensils
- Make healthy food accessible
- Eat slowly and avoid eating 3-4 hours before bed

(Buettner D., 2012)



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Anti-inflammatory Herbs and Supplements

- Curcumin
- Quercetin
- *Boswellia*
- Omega-3s
- Green tea (EGCG)
- Saffron
- Glucosamine
- Chondroitin
- MSM
- Vitamin D





Part 2:

Condition-Specific Approaches

Age and Gastrointestinal Health

Mouth: dentition, gingivitis, ↓ saliva, change in taste

Esophagus: ineffective LES, poor motility

Pancreas: ↓ enzyme secretion

Stomach: hypochlorhydria

Small intestine: slowing of migrating motor complex (MMC), ↓ vit D receptors

Large intestine: ↓ muscle wall strength and compliance

Brain: ↑ BBB permeability

(Dumic I. et al., 2019)



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Poll Question

Which type of medication may cause dementia?

- a) Antacids
- b) NSAIDs
- c) Proton pump inhibitors
- d) Antidiabetics

Medication and the Digestive Tract

- Antacids
 - Associated with B12 deficiency (Jung SB et al., 2015)
 - May cause constipation, diarrhea, milk-alkali syndrome (Vakil N., 2020; Erckenbrecht J et al., 1982)
- NSAIDs
 - Associated with folic acid, glutathione, vit B12 deficiencies (TRC. Ibuprofen, 2021)
 - May cause diverticular disease, pill esophagitis, anorexia, dyspepsia, peptic ulcer disease, bleeding, acute renal failure, liver injury (Feldman M., 2019; Solomon D., 2020)



Medication and the Digestive Tract

- Proton Pump Inhibitors
 - Associated with B12 def
 - May cause *C. difficile* diarrhea and malabsorption, acute and chronic kidney disease and acute interstitial nephritis, hypomagnesemia, pneumonia, bone fracture, dementia (Wolf MM., 2021; Schoenfeld & Grady, 2016; Gomm W. et al., 2016)
- Antidiabetics
 - Associated with folic acid, vitamin B12, and dibenzoyl def (TRC. Metformin, 2021)
 - May cause headache, sore throat, upper respiratory tract infections, HF, MI, hypoglycemia, bone fractures, anorexia, diarrhea, nausea, constipation, indigestion, vomiting, weight changes, flatulence (McCulloch D., 2019; Exenatide, 2020; Dungan K., 2020; Diabetes treatment, Mayo Clinic, 2021)

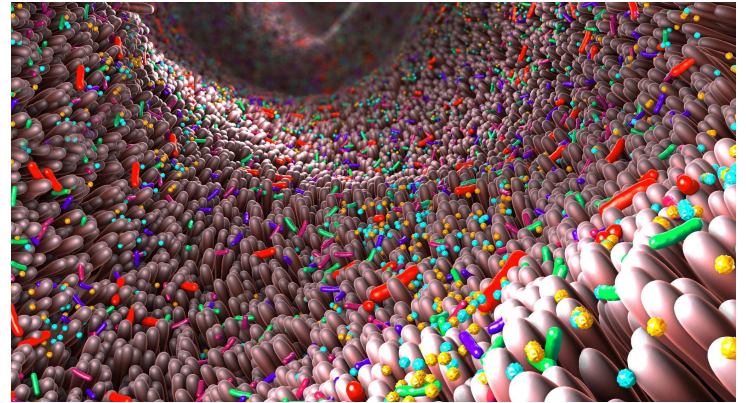


Gut Repair

Institute for Functional Medicine (IFM) framework for repairing the gut

The Five Rs

1. **Remove:** eliminate sources of inflammation (pathogens, inflammatory foods, dysbiosis, meds)
2. **Replace:** supplemental use as needed to replace digestive enzymes, HCL, bile acids
3. **Reinoculate:** probiotics, fermented foods
4. **Repair and regenerate:** healing regimen
5. **Rebalance and retain:** lifestyle factors that impact gut health



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Gastroesophageal Reflux

- Loss of esophageal sensitivity in older adults
- Hallmark complaint of heartburn is often lacking (Devault KR, 2007)
- PPIs ↓ gastric acidity and
 - shift how pancreatic enzymes work (Ketwaroo & Graham, 2019)
 - Alters the gut microbiome
 - ↑ risk of infections and nutritional deficiencies
 - May cause chronic inflammation (Fossmark R. et al., 2019)



Lifestyle Changes for Gastroesophageal Reflux

- Smaller meals
- Avoid eating 2-3 hours before bed
- Elevate head
- Aim for a healthy weight
- Quit smoking
- Drink 8-10 glasses of water daily
- Assess for hypochlorhydria



Other Considerations for Gastroesophageal Reflux

- Elimination diet to identify food triggers
- Assess for hypochlorhydria
- Add 1-2 tbsp raw apple cider vinegar in 3 oz of water 20 min before meal to help trigger LES closure (Gunnars K., 2021)



Supplements to Support GI Health

Supplements for GI Health and Gastroesophageal Reflux

- Demulcent like aloe vera juice to help restore mucosal barrier and soothe inflammation (Sarris & Wardle, 2010)
- DGL 2-4 tablets 380 mg before meals (Myers A., 2021)
- Rice bran oil, 150 mg TID
- Slippery elm, 2 tbsp in water after meals and bedtime (Myers A., 2021)
- Betaine HCL if hypochlorhydria 20 min before meal
- Digestive enzymes with meals



Poll Question

Which condition should be ruled out when assessing a geriatric client with constipation?

- a) Hypochlorhydria
- b) Small intestinal bacterial overgrowth (SIBO)
- c) H. Pylori
- d) Anemia

Constipation Management

Laxatives:

- Docusate and milk of magnesia 1-2 tbsp daily
- Magnesium citrate: 350-500 mg daily in chelated form (*Magnesium Citrate*, 2020)
- Polyethylene glycol, sorbitol, lactulose, and bisacodyl
- Senna, tea with ½ tsp of senna in cup of water 1-2x daily
- Saline or mineral oil enema



Lifestyle Changes for Constipation

- Adequate hydration
- 30g fiber daily
- Regular exercise
- Tea or coffee in moderation
- Bowel-habit diary review
- Medication review
- Rule out small intestinal bacterial overgrowth (SIBO)



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Supplements for Constipation

- Short-term use of Aloe vera (less than 1 week): $\frac{1}{2}$ C TID, 40-170 mg dehydrated juice in capsule form
- Short-term use of cascara (less than 1 week): 250 mg BID or TID
- Vitamin C: 500-2,000 mg daily (Traber MG. et al., 2019)
- Wheat or corn bran: 1 tbsp daily
- Probiotic bifidobacteria: at least 4 billion units BID or TID



Poll Question

Which type of diet is helpful in exploring the root cause of atopic dermatitis/eczema?

- a) Mediterranean diet
- b) Low-FODMAP diet
- c) High-protein diet
- d) Elimination diet

Atopic Dermatitis/Eczema

- Often surfaces in older adults with a history of environmental allergies
- Assess for the most likely contributors to eczema and the accompanying environmental allergies by exploring possible:
 - Food sensitivities: delayed response in body systems
 - Candida overgrowth (symptomatic of dysbiosis)
 - Histamine reactivity: a result of gut dysbiosis and imbalance between internal histamine production, intake of histamine-rich foods, and enzymatic breakdown of histamine



An Elimination Diet for Eczema

- 6-week elimination diet that includes common food sensitivity triggers and systematic reintroduction of each food type
 - Gluten, dairy, corn, eggs, peanuts, soy
 - Consider food sensitivity testing to personalize the elimination diet



Nutritional and Botanical Support for Eczema

- Vitamin A: plays a regulatory role in immune functions and skin integrity (Xiang J. et al., 2019)
 - 50,000 IU
 - Food sources: beef liver, sweet potato, spinach, carrots (NIH, 2020)
- Vitamin E: antioxidant and reduces IgE antibodies
 - 400 IU (Jaffary F. et al., 2015)
 - Food sources: vegetable oils, almonds, peanuts, sunflower seeds, spinach, broccoli (NIH, 2020)
- Zinc: anti-inflammatory and antioxidant and ↑ reepithelialization
 - 2.5% zinc sulfate topical formulation (Gupta M. et al., 2014)
 - Food sources: oysters, beef, chuck roast, crab, beef patty, lobster (NIH, 2020)



Nutritional and Botanical Support for Eczema

- Quercetin : immune-modulating and anti-inflammatory (Choopani R. et al., 2017)
 - 5-40 mg (Jafarinia M. et al., 2020)
 - Food sources: apples, berries, brassica vegetables, capers, grapes, onions, shallots (Li Y. et al., 2016)
- GLA: corrects def in skin lipids
 - 220 mg (Kawamura A. et al., 2011)
 - Food sources: human milk, organ meats, primrose black, borage, fungal oil
- Topical cannabinoids: anti-inflammatory, antimicrobial, anti-pruritus (Mounessa JS. et al., 2017)
 - 1:1 THC/CBD or triple topical THC/CBD/CBDa
 - CBDa is a potent anti-inflammatory and analgesic



Skin, Lung, Eyes and Hair Health

Therapeutic Diets that promote skin, lung, eyes, and hair health in older adults:

- Elimination Diet
 - Inflammation in the gut impacts epithelial tissue
 - When food sensitivities are resolved, reduction in SIgG levels measured in the gut correlates with eczema reduction (Nosrati A. et al., 2017)
- Mediterranean Diet
- Anti-candida Diet
 - *Candida albicans* may take advantage of a dysbiotic gut environment and a high intake of refined carbs creates a toxic gut environment



Osteopenia/Osteoporosis

Risk factors:

- Age
- Inadequate calcium intake
- Inactivity
- Caffeine intake
- Hormonal imbalance (Body JJ. et al., 2011)
- Dysfunction in vitamin D metabolism (Bischoff-Ferrari HA. et al., 2009)
- CRF (Ersoy FF., 2007)
- Medication (corticosteroids, PPIs) (Munson JC et al., 2012)
- Blood sugar imbalance (Clarke & Khosla, 2010)
- Oxidative stress and systemic inflammation (Epsley S. et al., 2020)



Dietary Approaches to Osteopenia/Osteoporosis

- Adequate calcium intake from food and supplements combined
- Physical movement: signals the body to use nutrients to build bone mass
- High protein diets are associated with bone mineral density
- Vitamin K2 supplementation when necessary
- Mediterranean diet: associated with ↓ in hip fractures (Haring B. et al., 2016)
- Anti-inflammatory diet
 - Colorful fruits, veggies, healthy fats, whole grains, nuts, seeds, fatty fish, etc. associated with ↑ bone density
 - Avoidance of oxidants from the diet from fried foods, processed foods with chemical additives, foods high in refined carbs



Nutritional and Botanical Support for Bone Health

- Calcium
 - 600-1200 mg/day, divided into 300-400 mg TID to minimize cardiac risks (Kogan & Weil, 2018; Bolland MJ et al., 2013)
 - Food sources: dairy, leafy greens, fish with bones, red pepper, fortified OJ, grapefruit juice, kiwi
- Vitamin D
 - 2,000 IU/day (Kogan & Weil, 2018)
 - Food sources: cod liver oil, trout, sockeye salmon, mushrooms, milk (NIH, 2020)
- Vitamin K2 Menaquinones (4 or 7): involved in Calcium transport, preventing calcium deposition in blood vessel wall lining, improves bone density (Shen C-L et al., 2009)
 - 45 mg MK4, 100-500 µg MK7
 - Food sources: fermented *natto* soy foods (MK7), egg yolk (MK4)
 - Human intestinal flora is a major producer of MK7



Questions?

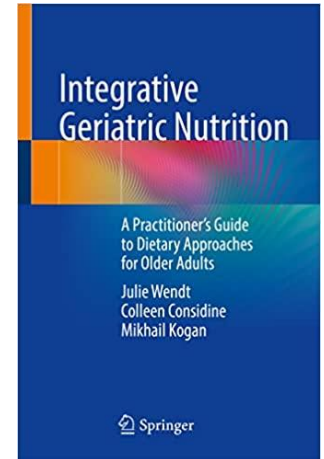


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More On This Topic

Thank you for attending!

- Learn more with *Integrative Geriatric Nutrition: A Practitioner's Guide to Dietary Approaches for Older Adults* [\(25 CPEUs\)](#), at [SkellySkills.com](https://www.skellyskills.com). Get 30% off with code through 5/30/22
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