Concurrent Session 12: Nutrition for the elderly

Energy and nutrient intake within residential aged-care facilities: results from a selection of Melbourne facilities

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Background – The elderly living in residential aged-care facilities are particularly at risk of nutritional inadequacies due to their overall health status, state of dependency and general lack of control over food provision.

Objective – To measure energy and nutrient intakes in aged-care facilities and evaluate against dietary recommendations.

Design – A three-day weighed food record, incorporating all main meals and snacks, was performed on 83 participants ranging in age from 65 to 94 years in five Melbourne residential aged-care facilities. Dietary intake data were analysed using FoodWorks 3.01. Mean energy and nutrient intakes were compared to nutrient reference values (NRV).

Outcomes – Estimated energy requirements (EER) were met (M126% EER ± 41% {all data is ± SD}); F122% EER ± 27%). Estimated average requirements (EAR) for protein were also met (M109% ± 56%; F140% ± 36%). Carbohydrate intake for males was 50% of energy ± 7% and 48% for females ± 5%. Sugars made up a larger proportion of carbohydrate intake (M28% ± 9%; F25% ± 6%). Intake of fat for males was 34% of energy ± 7% and 36% for females ± 5%. Saturated fat intake was high (M17% ± 5%; F16% ± 2%). Fibre intake was low (M56% adequate intake (AI) ± 28%; F66% AI ± 24%). Participants failed to meet the EAR for calcium (M94% ± 50%; F88% ± 41%) and magnesium (M77% ± 26%; F94% ± 27%). Intake of potassium was below the AI (M79% ± 29%; F96% ± 24%). Males failed to meet the EAR for zinc (77% ± 27%). Sodium intake for males and females was exceptionally high (M308% AI ± 92%; F247% AI ± 77%).

Conclusion – Results of this study can be used to guide education programs for food service staff to ensure the nutritional requirements of residents are met in the future.