

Elderly But Not Frail

Growing older does not have to include being “frail.” The definition of “frail elderly” requires being above 65 years, and having least three of these: loss of strength, weight loss, low levels of activity, poor endurance or fatigue, and slowed performance.

So what can be done to prevent “frailty?” The interventions researcher have studied include: ● Physical activity

- Physical activity combined with nutrition
- Physical activity plus nutrition plus memory training
- Home modifications ● Comprehensive geriatric assessment *and*
- “prehabilitation” (Physical therapy + exercise + home modifications)

How much exercise might be individually prescribed? In research, exercise sessions ranged from one to five times per week. Most included strength, balance, coordination, flexibility, and aerobic exercises supervised by exercise professionals and were progressively increased based on the individuals' competency and performance.

Nutritional changes that have been studied and show benefits include:

- Education and cooking classes
- Milk fat supplementation
- Supplementation with multifiber formula enriched with iron, folate, vitamins B6, B12, D, and calcium
- a diet focused on protein and vitamin D–rich ingredients
- supplementation of vitamin D.

How about weight? Once you have achieved a healthy weight keep it. Try climbing on the scale at the same time every day and make changes so weight does not go either up or down significantly.

The author of the article referenced below states he plans use a fitness center 3 days per week, 1 hour each time, with resistance training, balance and coordination (including hand-eye) exercises, flexibility stretching, and aerobics (aiming at an average of 7000 steps per day).

If you are interested in making any of these changes; talk to your health care professional; consult the dietician at a grocery store chain and consider going to a fitness center with friends. Small steps to a healthier you can pay off.

Reference: Lundberg, G. D., *How to be elderly and not frail*, Medscape Nurses, retrieved August 2019 at <https://www.medscape.com/viewarticle/912106>

Vision Changes to Report

If you notice any of these three signs, see your eye doctor right away.

A small blurred area near the center of your vision or straight lines seem bent. This can be age-related macular degeneration damaging the retina. Early identification widens treatment options.

Decreased peripheral vision could indicate glaucoma, a disease that damages your optic nerve. Glaucoma can be slowed down significantly with prescription eye drops.

Floaters. Occasionally seeing small spots or thread -like substances which disappear after a few minutes should not cause concern. If a large number suddenly appear and/or they’re accompanied by flashes of light or vision loss, seek help immediately as it could be a sight-threatening retinal detachment.

Common age-related conditions

Presbyopia is the gradual loss of your eyes' ability to focus on nearby objects. A pair of reading glasses, bifocals or progressive lenses help.

Decreased Contrast Sensitivity: If you notice it’s harder to drive at night or in fog, or to adjust from going from dark to bright areas this occurs because the eye’s rod cells degrade with age. Cataracts or dry eyes can make the problem worse so see an eye doctor.

Dry eye As aging occurs tear production slows; eyes may sting, feel gritty or sometimes even tear excessively. Try taking a tech break, blinking more, using artificial tears, wearing contacts less, treating skin conditions and cleansing eye areas with diluted baby shampoo.

Cataracts are a clouding of the eye lens. Risk factors include smoking or drinking alcohol, UV exposure, and diabetes. If symptoms are mild, you may just need to get a new eyeglass prescription. But if this troubles day-to-day activities, then surgery is needed where the cloudy lens is removed and replaced with an artificial one.

People between the ages of 55 and 64 should have a comprehensive eye exam every 1-3 years, and then every 1-2 years after age 65, even without symptoms.

Reference: Levine, H. *Eye changes with age*, 2019 AARP, retrieved on January 7, 2019 at <https://www.aarp.org/health/conditions-treatments/info-2019/eye-changes-with-age.html>

5 Ways Moving Can Improve Your Relationships

Exercise Boosts Confidence. When your self-esteem improves others notice. Scientists have found a significant connection between how we perceive ourselves and the strength and health of our relationships.

II Timothy 1:7 For the Spirit that God has given us does not make us timid; instead, his Spirit fills us with power, love, and self-control. (GNTD)

Walk for Fun. Exercise releases endorphins, which create feelings of happiness and euphoria. Those endorphins are so powerful they can even alleviate symptoms of depression.

Psalms 28:7 . . . He helps me, and my heart is filled with joy. (ESV)

You'll Communicate Better. Exercise has been shown to improve our thinking. Aerobic exercise, in particular, greatly benefits cognitive ability. It improves creativity, dusts away the cobwebs and even allows us to remember words.

Colossians 4:6 Let your speech always be gracious, seasoned with salt, so that you may know how you ought to answer each person. (ESV)

You'll Communicate More. Walking with someone or bike riding with a friend will help you improve your fitness *and* strengthen your relationship. Many heart-to-heart topics can come up with a brisk walk and it's heart-healthy too!

Proverbs 13:20 Whoever walks with the wise becomes wise. (ESV)

You Might Live Here Longer. Take the time (make the time) to enjoy loving relationships! Canadian researchers found that people who exercise even moderately live years longer (an average 2-6 more years) than those who are inactive. Also, regular exercise increases longevity at any weight.

1 Timothy 4:8 For while bodily training is of some value, godliness is of value in every way, as it holds promise for the present life and also for the life to come. (ESV)

Healthier Halloween, October 2019

Halloween usually means candy. Instead of banning the treats or making them off-limits, start the holiday season mindfully by balancing candy with healthful foods and limiting how much candy makes it into the home. **See the following tips.**

Have a nutritious meal or snack before eating candy. That way candy won't end up displacing essential nutrients in your diet.

A pre-trick-or-treat meal can be Halloween themed; Use orange and black foods like **carrots, canned pumpkin, baked sweet potato fries, blood oranges, refried black beans, and blue corn tortilla chips** and green **guacamole** "slime" as a dipping sauce for veggies.

Try air-popped popcorn (a whole grain) drizzled with a small amount of dark chocolate and orange-colored white chocolate.

Buy less candy than you think you'll hand out.

If going door to door, opt for a small bag to collect treats. When it is full the kids should return home.

After the candy is collected, help your child get rid of anything unwanted. Ask your child to keep only a certain amount of candy: enough for them to have one piece per day for about two weeks.

Serve one-to-two pieces of candy only after healthy meals or with a fruit, vegetable, or whole-grain snack.

Store over-flow candy in the freezer or an opaque container toward the back of a cabinet. Making it harder to access is one way to take control of your food environment.

"Fun-sized" candies: Realize that only 2-3 packages of many equal one regular-sized package. For example, two-and-a-half fun-sized Butterfingers are equal to one regular Butterfinger. Three fun-sized bags of M&Ms are equal to one regular bag of M&Ms.