FACTORS ASSOCIATED WITH SUBOPTIMAL MEAL INTAKE IN OLDER ADULTS RESIDING IN NURSING HOMES – A NUTRITIONDAY STUDY

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Rationale: Suboptimal food intake is a risk factor of malnutrition in older adults. Malnutrition is associated with complications, prolonged hospital stay and higher health care costs. The aim of this study was to determine meal intake in older adults residing in nursing homes in Europe, and to identify factors associated with a suboptimal meal intake.

Methods: The intake of the main meal of 20,253 older adults (≥65 y) in 366 European nursing homes was assessed yearly on one day (nutritionDay) between 2007 and 2012. The association of 32 demographic, disease and nutrition related factors with meal intake (<50% or >=50% of the main meal consumed) was examined by logistic regression (backward stepwise elimination with P<0.05 as final selection criterion).

Results: In total 38.5% of the older adults consumed <50% of their main meal. Factors independently associated with suboptimal meal intake included a higher number of comorbidities (OR=1.1), tooth problems (vs. no)(OR=1.3), unable to walk without assistance (vs. able)(OR=1.1), higher age category (OR=1.3), female (vs. male)(OR=1.3), mentioning “meals are not adequately prepared for elderly” (B=1.6), swallowing/chewing problems (OR=2.1), nausea (OR=2.2), loss of appetite (OR=2.5), or other reasons for not eating well in the past week (vs. none)(OR=3.6). Patients who had eaten normal in the past week (OR=0.4), had intoxication/injury (OR=0.7), who were on a normal (OR=0.8) or blenderized diet (OR=0.8), subcutaneous nutrition (OR=0.8) or who had diabetes (OR=0.7) or diseases of the brain/nerve (OR=0.9), were less likely to have a suboptimal meal intake.

Conclusion: More than one-third of older adults in nursing homes consumes less than half of their meal, which could predispose them to malnutrition. The understanding of the factors associated with reduced meal intake provides valuable information for preventive interventions.

Disclosure of Interest: None Declared

Keywords: None