

Malnutrition as a Tool to Help the Elderly

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BRIEF REPORT

Malnutrition is not a normal part of ageing; however, it is a concern for the elderly due to physiological, social, psychological, nutritional, and environmental variables. Malnutrition progresses quickly and sometimes goes unnoticed in this age range. Malnutrition is linked to a variety of complications in the aged population, including morbidity and mortality. We focused on this age group and their nutritional status screening and assessment for the reasons stated above. Malnutrition is detected using a variety of methods in this age range. Among these, we discovered MNA, which has been utilised and confirmed in several parts of the world but not yet in Ethiopia.

Valid tool for measuring what it claims to measure. To guarantee that a screening tool is appropriate for purpose, it must be evaluated in the population for whom it is intended. Valid tools guarantee that persons at risk of malnutrition are accurately identified and that nutritional intervention is made easier. Many research studies with aged persons in various settings have validated the MNA. Despite the fact that this instrument has been tested and utilised in several countries, it is not easily transferable to other countries. This is due to the fact that population characteristics differ across country, particularly in terms of anthropometric measurement and dietary parameters. It has not, however, been verified for Ethiopian elders. As a result, this study was conducted in Ethiopia to validate MNA short form using MNA long-form as a gold standard.

It's the only nutritional screening and assessment technique that takes into account mobility, depression, and functionality. Furthermore, it is dependable, affordable, does not require laboratory testing, and may be used in a variety of settings. It also detects malnutrition hazards before a significant change in a person's body weight or serum albumin occurs. Its lowest score also predicts mortality and a lengthy stay in the hospital. The accuracy of measuring height and weight to calculate BMI in bedridden individuals is a limitation of this technique. There is also a dearth of knowledge among health professionals in measuring calf circumference. In the twenty-first century, the old population is progressively expanding at a doubling pace of 11.1% to 22%. As a result, using time-saving, low-cost, quick, and simple nutritional screening and assessment techniques at every level of nutritional screening and assessment is critical.

As a result, while MNA is a valuable and valid screening tool, the peculiarities of the population must be taken into account when

screening and assessing nutritional status using this instrument. This tool saves lives, time, and money in the healthcare industry. It saves lives by detecting people who are at risk of malnutrition early and preventing malnutrition and its repercussions. As a result, the elderly population's quality of life will increase. Furthermore, because it does not require laboratory testing, it is recommended for usage in resource-scarce areas and for research purposes.

Screening cancer patients for malnutrition is a significant topic for study, guideline development, and clinical practise, according to the majority of oncology dietitians in Canada. Many people consider screening to be an important part of clinical practise and a way to identify patients who require nutrition intervention the most. However, there is a lot of variation in the dietary screening techniques and how they are used across Canadian cancer centres. For these reasons, the Canadian Oncology Nutrition Clinical Practice Guideline (con - cpg) Initiative was established to consolidate available information and produce clinical practise recommendations. It is critical to validate this tool in our situation. This study's findings point governments, programme managers, and policymakers in the right direction in terms of raising awareness about the importance of screening and assessing the nutritional condition of the elderly population, which can be done quickly, easily, and at a low cost. In addition, this study is a useful scientific researcher since it uses a study outcome as a baseline [1-5].

References

- 1. Guyonnet S, Rolland Y. Screening for malnutrition in older people. Clin Geriatr Med. 2015;31:429-437.
- 2. Chen SH, Cheng HY, Chuang YH, Shao JH. Nutritional status and its health-related factors among older adults in rural and urban areas. J Adv Nurs. 2015;71:42-53.
- 3. Buzby GP, Knox LS, Crosby LO, Eisenberg JM, Haakenson CM, McNeal GE, et al. Study protocol: A randomized clinical trial of total parenteral nutrition in malnourished surgical patients. Am J Clin Nutr. 1988;47:366-381.
- 4. Van WJ, van Stijn MF, Doodeman HJ, Houdijk AP. Mini nutritional assessment and mortality after hip fracture surgery in the elderly. J Nutr Health Aging. 2016;20:964-968.
- 5. Goost H, Vidakovic E, Deborre C, Randau T, Wirtz DC, Burger C, et al. Malnutrition in geriatric trauma patients: Screening methods in comparison. Technol Health Care Off J Eur Soc Eng Med. 2016;24:225-239.

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Received: 1 January, 2022, Manuscript No. jggr -22-15641; Editor assigned: 03 January, 2022, PreQC No. P-15641; Reviewed: 17 January, 2022, QC No. Q-15641; Revised: 21 January, 2022, Manuscript No. R-15641; Published: 29 January, 2022, DOI: 10.35248/2167-7182.22.11.591

Citation: Suresh K (2022) Malnutrition as a Tool to Help the Elderly. J Gerontol Geriatr Res. 11: 591.

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