

ASSESSMENT OF NUTRITIONAL STATUS OF ELDERLY AND SENILE AGE PEOPLE

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Introduction: A healthy nutrition is a predictor of active longevity, contributing to improve the life span and quality of life.

Objective: To evaluate the nutritional status of elderly people living in Astana, depending on the sex and age of the respondents.

Methods: The study involved 354 people between ages 60-89 years. For studying the actual nutrition a 24 hours method of food reproduction was used. All data were processed using a computer program developed by Kazakh academy of nutrition in 2008, based on the WHO program.

Results: During assessing of nutritional status a disbalance in the qualitative and quantitative composition in 76.4% of cases in women, 68.1% - in men was revealed. Malnutrition is identified in 1.1% of women, the excess (pre-obese, obesity) - in 75.3%, the absence of disturbance of nutrition status - in 23.6% of women. In men, these volumes were respectively 1.8%, 66.2%, 32%. At calculations of the chemical composition of rations calorie content was at 1603.9 ± 642.3 kcal for women, 1839.0 ± 727.2 kcal for men. On caloric value of food affects the age factor of the surveyed individuals, which determines their decline in basic metabolism and decreasing of physical activity level.

In the analysis of protein and fat supply were not observed deviations from the recommended volumes of consumption sharp. Food disbalances were found in the carbohydrate part of the nutrition rations of the surveyed population: increase of simple carbohydrates consumption, where their daily calorificity was 17.2 - 20.5%, twice exceeding WHO standards equal to 10% of daily energy intake, low level of fiber intake 15.5-17 g/day for this recommended groups 20-25 g/day; on food density at desired level of 14 g/1000 kcal consumption was equal to 9.7 g/1000 kcal in women, 9.2 g/1000 kcal in men.

Conclusions: Thus, for elderly and senile people characteristic were the poly-micronutrient failure, high intake of simple carbohydrates with refined food, such as sugar, refined cereals, fine-grinding flour and low intake of dietary fiber from fruits, vegetables. Identified disbalances of macro-micronutrients contribute to the development of hypertension, atherosclerosis, diabetes, osteoporosis, obesity and other.