MANAGING LOW APPETITE

It’s challenging to help an older adult change lifetime eating habits and choose a healthy, balanced diet. It’s also challenging when an older adult who has always enjoyed different kinds of food becomes uninterested in eating and refuses food. This video in the Home Alone AllianceSM series shows some ways that family caregivers can address this frustrating and potentially serious problem.

While much of health care professionals’ concern about nutrition is based on unhealthy diets that lead to illness and obesity, malnutrition and anorexia (lack of appetite or desire to eat) leading to unintentional weight loss among older adults is of equal concern. While food insecurity—the inability to get or pay for adequate food—can be an important factor, many people become malnourished for other reasons, including illness, depression, and swallowing or chewing problems. Some people who live alone, even those who used to cook, can’t do it anymore because they find it too tiring or can’t lift pans and chop vegetables. Caregivers can help by doing some of the prep work while letting the person do the final steps and maintain some independence.

It is important to recognize that the person is not refusing food because of anger or resentment toward the caregiver. A first step is to ask a health care provider about the problem to find out whether it may be related to the person’s illness or medications. For example, cancer, chronic liver or kidney disease, dementia, or heart failure may causing the person’s reduced appetite. Medications to treat these diseases may have the unwanted side effect of creating nausea or otherwise affecting appetite.

If there is no medical reason why the person’s appetite is decreased, emotional reasons such as sadness, grief, or depression may be the cause. These can be addressed with counseling.

In the video, the dietitian stresses that food is about more than nourishment. Sharing a meal, especially with someone who is a close friend or relative, is one of the most basic ways people interact. Eating alone is sometimes necessary, but take every opportunity to make a meal a shared experience. Small portions are best because they don’t overwhelm the person with a low appetite. It’s also helpful to make everything visually appealing. Keeping foods visible may also help. For example, keep out a bowl of fruit (such as apples, bananas, or grapes) that can be easily picked up and eaten when passing by. Episodes 1 and 2 in this series, as well as the resources cited in the accompanying guides, will help make managing a low appetite easier.

To enhance the caloric and nutritional value of each meal, try these tips:

> Use milk instead of water to cook oatmeal. Adding butter or a dry milk powder are also good options.
> Make smoothies and add some extra ice cream or fruit.
> Add gravy to potatoes or meats.
> Add a chopped egg on a small salad.
> Look for small proportioned foods for nutritious snacks.
> Pudding, fruit cups, or yogurt are good late-night snacks that add calories but don’t take away appetite.

Be patient and encouraging, even though you may be frustrated and worried. Small bites can lead to bigger bites and healthier eating habits.

Additional Resources

The US Department of Agriculture offers 10 tips for choosing healthy meals for an older adult. While the advice is good for all older adults, some points are particularly relevant for people with low appetites. For example, the tip sheet recommends, “Make eating a social event. . . . Invite a friend to join you or take part in a potluck at least twice a week.” The sheet also notes, “Eat for your teeth and gums. Eat softer foods if you have dental problems that make it hard to chew fruits, vegetables, or meats. Try cooked or canned food like unsweetened fruit, low-sodium soups, or canned tuna.”
Another important point: “Keep food safe.” People who eat small amounts of food may consider it wasteful to discard the uneaten portion, but some foods spoil more rapidly than others. “Avoid foods that are always risky for an older person, such as unpasteurized dairy foods, and raw or undercooked eggs, fish, meat, or poultry.”


AARP Public Policy Institute
Prepared by Carol Levine, United Hospital Fund