

# KEY TIPS ON HYDRATION

HYDRATION FOR ELDERLY PEOPLE

FOR HEALTHCARE PROFESSIONAL  
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## Are you aware of their increased risk of dehydration?

The EFSA adequate intake (AI) of water is the same for the elderly as it is for the general adult population. These recommendations are for the daily intake of water from all sources<sup>1</sup> (water, beverages and food) under conditions of moderate environmental temperature and physical activity levels. Even though the elderly typically have a lower energy intake than younger adults, their water requirements are the same. But there is evidence that older adults are susceptible to dehydration due to age-related pathophysiological changes including comorbidities, an increased likelihood of taking medicines with diuretic actions and an increased incidence of physical and mental impairment.

**EFSA Adequate Intakes:** 2.5 L per day for men | 2 L per day for women

## Special Considerations for the Elderly

- Drinking usually occurs in response to thirst, but by the age of about 60, if people only drink when they are thirsty, they may not get as much water as they need.
- Renal concentrating capacity generally declines with age, leading to an increased loss of water via urine.
- Diminished appetite may lead to a reduction of fluid intake from food.
- Some older adults may suffer from poor memory, immobility or illness, which may affect fluid intake. In addition, certain medications can block the thirst mechanism or may increase renal water loss.
- Dehydration can cause serious problems in older adults. Recent research<sup>2</sup> has shown that people aged 65 years and older, who were hypohydrated when admitted acutely to hospital were 5½ times more likely to die in hospital than those who were euhydrated when admitted.
- Research into the effects of chronic dehydration continues, but it may be a serious problem and has been associated with an increased risk of falls, urinary tract infections, dental disease, bronchopulmonary disorders, kidney stones, constipation and impaired cognitive function<sup>3</sup>.



## These are practical tips to help keep elderly people well hydrated

- A hydration programme should include advice on drinking, offering fluids at mealtime and in between meals. Fluids should be readily available and physically accessible both day and night.
- Individuals themselves, or when relevant their carers, should be familiar with dietary changes so that appropriate hydration recommendations can be made. It is common for the amount of food consumed (and energy intake) to decrease in the elderly. This will likely reduce the water intake from food meaning that more will need to be consumed as drinks to keep the water intake the same.
- Environmental temperatures indoors should be moderate. In hot environments, it is recommended that intake of liquids be increased by 250 mL for each degree centigrade over 37°C.
- Strong (distilled) alcoholic beverages may provoke dehydration and are not recommended.
- Many types of foods contain a substantial amount of water. If an older person finds it difficult to increase the amount of fluid drunk, increasing the intake of foods, such as soups or fruit and vegetables, which typically contain 80-90 per cent water, can help to maintain an adequate water intake as well as being good sources of essential nutrients.
- Varying flavours and even colours can improve palatability and acceptance of beverages offered and can help facilitate adequate hydration.

The Panel on Dietetic Products, Nutrition and Allergies from the European Food Safety Authority (EFSA)<sup>1</sup> issued reference intakes for water in 2010. These are defined as total water intake, which is water from beverages (including drinking water) and from food moisture. It is normally assumed that the contribution of food to total dietary water intake is 20 to 30%, while 70 to 80% is provided by beverages. This relationship is not fixed and depends on the type of beverage and on the choice of foods.

To know more about the sources of water, please visit us at:  
[http://www.europeanhydrationinstitute.org/nutrition\\_and\\_beverages.html](http://www.europeanhydrationinstitute.org/nutrition_and_beverages.html)

<sup>1</sup> Source: EFSA Panel on Dietetic Products, Nutrition, and Allergies (NDA); Scientific Opinion on Dietary reference values for water. EFSA Journal 2010; 8(3):1459. Available online: <http://www.efsa.europa.eu/en/efsajournal/pub/1459.htm>

<sup>2</sup> Source: Hydration and outcome in older patients admitted to hospital (The HOOP prospective cohort study). Ahmed M. El-Sharkawy; Phillip Watson; Keith R. Neal; Olle Ljungqvist; Ron J. Maughan; Opinder Sahota; Dileep N. Lobo; Age and Ageing 2015; doi: 10.1093/ageing/afv119

<sup>3</sup> Source: Acute and chronic effects of hydration status on health. Ahmed M. El-Sharkawy, Opinder Sahota, and Dileep N. Lobo; Nutrition Reviews 2015; Vol. 73(S2):97-109; doi: 10.1093/nutrit/nuv038

