

# Alzheimer's Disease

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## Overview

Alzheimer's Disease (AD) is a complex disorder that affects the brain, causing a gradual loss of brain cells. AD is a form of dementia that causes issues with memory, thinking, and behavior. Although the greatest risk factor is age, early onset Alzheimer's is becoming more prevalent in those under the age of 65. AD is the leading cause of dementia, accounting for approximately 60 to 80% of dementia cases. As it is a progressive disease, symptoms of dementia gradually worsen over time. Initially, memory loss is only mild, however as the disease progresses individuals lose the ability to respond to their surrounding environment, begin to exhibit personality and behavior changes, and may express delusional thoughts. There is no known cure for AD, however, treatments are available to temporarily slow the rate of disease progression and alleviate associated symptoms.

## Nutrition and AD

One of the biggest concerns for people with Alzheimer's is the tendency to forget to eat or drink enough in order to meet nutritional needs. The focus of nutritional therapy in AD is to provide well balanced meals and snacks that are individualized to the patient's level of disease progression, food preferences, and co-existing medical conditions. Although there is no specialized nutrition therapy for people with AD, eating a well balanced diet is extremely beneficial to enhancing quality of life, maintaining energy levels, and preventing the occurrence of malnutrition, dehydration, or infection.

There are various reasons an individual with AD may not be able to meet their nutrition requirements. Depending on the persons stage of AD they may no longer be able to recognize foods that are served or might forget to eat all together. Because thirst cues often diminish with age, common complications that occur in the elderly population are dehydration and constipation. Without adequate hydration it can become difficult to chew or swallow, also known as dysphagia. Dysphagia can be a life threatening condition if food is aspirated into the lungs so it is important to look for signs such as excessive drooling, a wet or gurgling voice while eating, or coughing during or after meals. Modifying the consistency of food to soft, minced, or pureed textures, is an effect method to decrease the risk of choking and make the eating experience more enjoyable for both the patient and caregiver. If you are concerned that an individual may be struggling with dysphagia, consult a Speech and Language Pathologist to determine the appropriate food and liquid consistency.

## Examples of Texture Modified Foods

- **Bread and Cereal:** Bread pudding; Cooked cereals; Pancakes; Moist pastas; Casseroles
- **Dairy Products:** Butter; Margarine; Creamy or blended cottage cheese; Soft cheeses; Yogurt; Thickened milk; Poached or scrambled eggs, an omelet
- **Meats:** Moist ground meat; Meatloaf; Meatballs; Tender fish without bones
- **Vegetables:** Soft canned vegetables; Baked or mashed potatoes; Creamed or thick pureed vegetables; thick or blended soups
- **Fruits:** Soft ripe bananas; canned fruits without seeds, pits, or skin; Pureed fruits; Soft fruits
- **Desserts:** Fruit whip; Gelatin; Apple or peach crisp; Moist cookies without fruit or nuts; Pudding; Sherbet; Sorbet; Ice cream

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## Tips to Enhance Mealtimes and Encourage Eating

Adapt feeding techniques only as needed in order to maximize independence. Some general recommendations include:

- Provide a calm, quiet environment for meals. Turn off the TV and radio.
- Make mealtime “person centered”. Eat together and use a “watch me” technique to remind the individual how to use certain utensils.
- Remove utensils only when a person is confused, or they present a danger.
- Give verbal and physical eating cues; for example, place spoon in person’s hand and say, “this is your spoon.” Guide hand to plate and say, “these are your potatoes.”
- Offer small portions of each food one at a time. This can reduce confusion.
- Use solid pattern tableware in contrasting colors for less distraction. For example, use a white plate against a blue placemat.
- Use non-skid bowls and plates to encourage independent eating.
- Remove all non-food items from the area. These may include wrappers, pits, or packets.
- Make foods easier to eat by grinding, blending, or cutting it into bite sized pieces. Try adding gravies or sauces to foods to make them softer and moister.
- Make sure the person is sitting upright to prevent choking.
- Keep in mind the time of day. Appetite and functioning may be best early in the day.
- Honor food preferences as much as possible.
- Provide water to sip throughout the day in a clear glass or mug. This way you can easily watch how much the person is drinking.
- If the person is having difficulty using utensils, serve finger foods such as fish sticks, tuna sandwiches, steamed broccoli or cauliflower. Check the temperature of the food to make sure it is not too hot.

## Tips to Increase the Calorie and Protein Content of Food

Individuals with AD experience disorientation, agitation, and personality changes which can make mealtimes tedious and unenjoyable and result in reduced food intake and malnutrition. If you are experiencing unintentional weight loss try to increase calorie and protein content of meals. Some general recommendations include:

- Drink high calorie, high protein drinks such as milkshakes and commercial liquid supplements like Ensure or Boost.
- Add dry milk or protein powder to juices and smoothies.
- Prioritize energy dense, high protein foods and save soups and salads for the end of the meal. Energy dense, high protein foods include: beans, eggs, milk, cheese, and yogurt.
- “Fortify” foods to maximize nutrient density by adding canola or olive oil, cheese, cream, silken tofu, yogurt, avocado, or nut butters (e.g. peanut butter, almond butter).
- Add cream based sauces to vegetables and other dishes. Use whole milk in place of water when possible.
- Add nuts, seeds, or wheat germ to casseroles, fruit, ice cream, yogurt, cookies, pancakes, and muffins, or eat separately as a snack.

## Nutrition and Lifestyle Guidelines for AD

- Use MyPlate for Older Adults as a guideline in planning nutritious meals and snacks. [www.choosemyplate.gov/older-adults](http://www.choosemyplate.gov/older-adults)
- Eat foods high in fiber to prevent constipation. High fiber foods include fruits, vegetables,

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and whole grains.

- Limit foods that are high in saturated fat and cholesterol such as fatty cuts of meat, fried foods, butter, lard, or solid shortening.
- Limit sugary foods and avoid eating processed foods.
- Moderate the use of salt to help maintain a healthy blood pressure.
- Ensure adequate hydration. Aim to drink eight 8-ounce glasses of water per day.
- Maintain a healthy weight through a proper balance of exercise and food intake.



Revised February 2019.