

INTRODUCTION:

Malnutrition in elderly people is associated with impaired activity and general physical conditions, the development of malnutrition is described as continuum, starting with inadequate food intake followed by decrease anthropometric measurement, The anthropometric measures have commonly used to assess nutritional status in the elderly, the nutritional assessment has been specifically developed to evaluate the risk of malnutrition in elderly people and identify those that could benefit from early intervention (1).The elderly people are particularly prone to inadequate nutritional status because of factor related-age such as physiological change, chronic disease, use medication and decrease mobility, the under nutrition may not be easy to recognize or to distinguish from change resulting from the ageing process, if undetected could result in more rapid deterioration of health and early death(2).Nutrition needs change through elderly. These changes may be related to normal aging process, medical condition or life style. Assessment of nutrition status is essential for preventing of health problem in older adult and identifies the causes of nutrition disorder and understands person nutritional status (3).Nutritional assessment as clinical study used to determine the nutritional status, risk factor and food related to older adult. The assessment can be useful to evaluate the status of individual elder and identify the prevalence of certain health and nutrition risk among old adult (4).

AIM OF THE STUDY:

To assess the nutritional status of nursing home resident through the use of anthropometric measurements that includes Body Mass Index, and Mid-Upper-Arm Circumference, clinical objectives of the study and the data

appearance, food frequency and dietary pattern.

METHODOLOGY

Design of the Study: A Descriptive Study.The study was carried out in Nursing Home Residents in Baghdad City This study started from March 22th, 2010 through July 29th, 2010.The Sample selection Probability" random sample of (50) older adults in nursing home residents. The sample was assigned to the study according to the following inclusive criteria older adult age was (60-86) years old, who are on unhealthy Status in Nursing Home Residence.

Instruments: An assessment tool was constructed in a form of a questionnaires through an intensive review of relevant literature and studies for the purpose of assessing the nutritional status of older adult also the interview. Demographic Characteristics of elderly population consisted of (3) items which included age, gender and level of education. Medical History This section included (5) items focusing on the medical history of older adult. Dentures Items Section included answer (yes, no and duration). Operation items section included answer (yes, no). Smoking this section included answer (yes, no, duration and quantity), Medication Items section included answer (yes, no, duration and quantity), Dietary patterns was composed of (7) items; scored at (3) level type Likert scale; always, some times and never (WHO, 2001), Anthropometric Measures (BMI, MUAC), 24 hours diet recall which was composed of (5) items and Clinical observation was composed of (5) items, scored at (2 ;) level types scale; (1) for yes, (2) for no.

Data collection: Private interviews were conducted with the directors of the nursing home residents to explain the importance, collection process. The use of the

questionnaires, and the interview of elderly person with clinical observation on individual basis. Each interview took approximately (25) minutes. The data collection started on April 11th, 2010 and to May 11th, 2010.

Data Analysis: The data were analyzed through the use of statistical package for social sciences (SPSS) version 16 through descriptive and inferential statistical analyses

RESULTS:

Table 1: Distribution of the Observed frequency, percent and Cumulative percent of demographical characteristics variables with comparison significant.

Variables	Groups	Freq.'s	Percentage	Cum. Percent	C.S.\P-value
Age Groups	60-64	9	18	18	$\chi^2 = 3.6$ P=0.463 NS
	65-69	10	20	38	
	70-74	15	30	68	
	75-79	7	14	82	
	80 >	9	18	100	
Gender	Male	31	62	62	Binomial P=0.120 NS
	Female	19	38	100	
Education	illiterate	15	30	30	$\chi^2 = 14.68$ P=0.023 S
	read write	5	10	40	
	primary	9	18	58	
	secondary	3	6	64	
	intermediate	3	6	70	
	institute	7	14	84	
	university	8	16	100	

Finding of table indicated that the majority of the study samples was males were of (62%). at age (70-74) years old (30%) Large number of them was illiterate(30%)

Table 2: Distribution of the Observed frequency, percent and Cumulative percent of clinical appearance.

Variables	Groups	Freq.'s	Percent	Cum. Percent	C.S.\P-value
Clinical Appearance	Gingivitis and Easy Hair Loss	3	6	6	$\chi^2 = 24.4$ P=0.004 HS
	Gingivitis and Bleaching Nails	2	4	10	
	Gingivitis and Pallor	3	6	16	
	Gingivitis and Conjunctiva Pallor	8	16	32	
	Easy Hair Loss and Bleaching Nails	12	24	56	
	Easy Hair Loss and Pallor	1	2	58	
	Easy Hair Loss and Conjunctiva Pallor	3	6	64	
	Bleaching Nails and Pallor	4	8	72	
	Bleaching Nails and Conjunctiva Pallor	10	20	92	
	Pallor and Conjunctiva Pallor	4	8	100	
Body mass index - groups	Under weight	8	16	16	$\chi^2 = 2.32$ P=0.509 NS
	Normal weight	13	26	42	
	Over weight	15	30	72	
	Obesity	14	28	100	
Mid upper arm circumference	very thin	2	4	4	$\chi^2 = 54.4$ P=0.000 HS
	thin	7	14	18	
	Normal	41	82	100	

$\chi^2 = \text{qi square}$, P = p- value, S= significant, NS = non-significant, HS = high- significant

The clinical appearance majority result for easy hair loose and bleaching nails(24%),BMI most of elderly over weight(30%),MUAC most of elderly individual normal(82%).

Table 3. Summary Statistics for the items of the Dietary Habits

Items	Likert Scale	Freq.'s	Percent	M.S.	S.D.	R.S. %	Ass.
I don't take enough food every day	never	16	32	1.7	0.51	56.67	Pass
	Some times	33	66				
	always	1	2				
Usually don't eat anything during one day or two days a month	never	32	64	1.38	0.53	46.00	Pass
	some times	17	34				
	always	1	2				
Address the vegetables twice or many times a day	never	23	46	1.66	0.69	55.33	Failure
	Some times	21	42				
	always	6	12				
Touch milk or milk products once per day	never	3	6	2.3	0.58	76.67	Pass
	Some times	29	58				
	always	18	36				
I eat fruits or fruit juice once per day	never	1	2	2.36	0.53	78.67	Pass
	Some times	30	60				
	always	19	38				
Take the bread and rice or other grains	never	3	6	2.48	0.61	82.67	Pass
	Some times	20	40				
	always	27	54				
Touch tea , coffee and soft drinks immediately after a meal	never	5	10	2.32	0.65	77.33	Failure
	Some times	24	48				
	always	21	42				

Table3revealed that most of the respondents sometimes do not take enough food every day (66%). They usually never eat anything during a day or two days a month (64%).they never address the vegetables twice or many time a day (46%). They sometimes touch milk or milk products once per day (58%).They sometimes eat fruits or fruit juice once per day (60%).They always take the bread and rice or other grains (54%).and sometimes touch tea, coffee and soft drinks immediately after meal some (48%).

Table 4. Frequencies, Percentages and Cumulative Percent of Food Intake at different daily periods

periods	Foods Intake During each periods	Freq.'s	Percent	Cum. Percent
Breakfast	Protein	1	2	2
	Another's	1	2	4
	Protein and Carbohydrates	3	6	10
	Carbohydrates and Another's	1	2	12
	Protein and Mineral	1	2	14
	Protein and Another's and Carbohydrates	43	86	100
Duha (Morning)	Abstain	41	82	82
	Minerals	5	10	92
	Carbohydrates and Mineral and Another's	1	2	96
	Protein and Carbohydrates	1	2	98
	Protein and Carbohydrates and Mineral	1	2	100
Launch	Abstain	3	6	6
	Protein	1	2	8
	Carbohydrates and Mineral	2	4	12
	Protein and Carbohydrates	26	52	64
	Protein and Carbohydrates and Mineral	15	30	94
	Protein and Mineral	1	2	96
	Protein and Another's and Carbohydrates	2	4	100
Afternoon	Abstain	39	78	78
	Minerals	1	2	80
	Carbohydrates and Mineral	1	2	84
	Protein and Carbohydrates	1	2	86
	Protein and Another's	1	2	88
	Carbohydrates and Another's	3	6	94
	Protein and Another's and Carbohydrates	3	6	100
Dinner	Abstain	6	12	12
	Protein	2	4	16
	Carbohydrates and Mineral and Another's	1	2	20
	Carbohydrates and Mineral	1	2	22
	Protein and Carbohydrates	16	32	54
	Protein and Another's	2	4	58
	Carbohydrates and Another's	3	6	64
	Protein and Carbohydrates and Mineral	11	22	86
	Protein and Mineral	1	2	88
Protein and Another's and Carbohydrates	6	12	100	

Table4 presented the 24 hours daily diet for elderly residents in nursing home they have eat en food types of Breakfast that contain protein, carbohydrates and others for the most (86%).Doha morning the contain abstain (82%).Launch contain protein and carbohydrates (52%).Afternoon result for abstain (78%) and Dinner which contains protein and carbohydrates (32%) of the whole sample.

DISCUSSION

The study presented that 30% of the study samples between (70-79) year, while just (14%) is between (75-79) year. That results indicate that there's no specific age group in elderly people in the nursing home residents. The study shows that more than two third of elderly people are male which make an indicator for long life of male than female (5). The study conducted by (6) founded that the women percentage was (44.2%) and men (55.8%) compared with the original sample, which strongly agree with the results. Concerning educational level the great percentage of elderly people are illiterate, which leads us to conclude that educational level and nursing home residency has a reversible relationship. Most the sample was illiterate, which agrees with results of the study(7). Most of residents have a previous surgical operation problem (44%), but high percentage of them has no medical history (36%) and those who have disease. The majority have hypertension and diabetics mellitus and respiratory disease, and those diseases have the highly incidence among elderly people. The clinical features study shows that the hair loss and bleaching nails have the high rate of incidence among the population of study.(8.9.10) agree the result of the study by showing in their result that the common clinical sign of poor nutritional disorder is skin dry, pallor, hair loss, teeth decay, conjunctiva pallor, skin pigmentation and dry skin. Body mass index appears that the most of nursing home resident's calculation is overweight and obese, which may occur due to lack of exercise and mobility. Many studies which discussed the nutritional status for nursing home residents (11) and (12), show high agreement with current study when estimating the body mass index by finding that the overweight is the majority. (82%) of elderly people by mid upper arm circumference measurement have normal body built comparing with their age . The prevalence of malnutrition

according mid upper arm circumference the majority result for normal (68.4%), thin (28%), and very thin or risk of mal nutrition (3.6%) (13). Distribution of the elderly group studies, according to the nutritional diagnosis and evaluation method by using of mid upper arm circumference no malnutrition (70%), and the malnutrition (40%) (14). The prevalence of malnutrition for elderly Taiwanese men and women according mid upper arm circumference the risk of malnutrition (1.6%), and the result of normal (8.9%) (15). Regarding to their dietary habit records that there is insufficiency intakes in vegetables which are very required for elderly people health and that insufficient intake is bad indicator for nutritional status, also they don't take coffee, tea and soft drink immediately after meal which is a good indicator for nutritional status. The result of this study indicates the limited variation of dietary intake among elderly people who participate with sandwiches and fast food completing the dietary intake outside the congregate meal center (16). Dietary pattern, food habits and nutrient intake of elderly in nursing home were observed to be similar to those in non-institutionalized home 90% of the elderly at twice daily and source of these foods was often from the institution cafeteria (17). From those results we can conclude that the ingested foods always have to be high protein and carbohydrate diet which may be responsible for the overweight and obesity in elderly people in nursing home. According to the study result of 24 hours food recall intake for elderly population, the carbohydrate(72%),and protein(14%),and vitamins and mineral(14%), The intake of the subjects through day period for all macronutrients had an average percentage of only 64.8%,for energy intake and 47.9%,82.3%,and 84.1% for intake protein and carbohydrates(18).

CONCLUSION:

their current medical problems, are overweight and taking medication. Most of the old age residents are not a customer for vitamins and minerals intake. Most of the old age residents are losing hair easily and bleaching nails.

RECOMMENDATIONS:

Work on the coordination between the role of the state and civil society institutions and the Ministry of Social Affairs and the Ministry of Health for the purpose of direct supervision on the needs and problems of residents in the role of the state, the researchers recommend conduct a comparative study on the situation nutrition among the elderly living in nursing homes and the elderly living in the community.

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