



Ageing Well

Your Guide to Age-related Health & Wellbeing

Introduction

Embracing healthy habits is the key to maintaining your independence and quality of life as you age.

It's important to be proactive with your health to prevent chronic conditions such as heart disease, and to manage any existing conditions.

This educational booklet has been created to provide useful guidance and resources to help you age well. It includes information about:

- Living independently at home and how to recognise the signs someone may need more support.
- How to get help with everyday activities and tips to ensure a safe home environment
- Maintaining a healthy body and healthy mind through nutrition, hydration and exercise.
- Preventing hospitalisation and supporting recovery after a hospital stay.
- Age-related conditions such as heart disease, dementia, Parkinson's and diabetes.
- Recognising scams, being aware of elder abuse and planning for the future through Wills, EPOA and Advance Care Plans.



Dovida recognises that your uniqueness is key to providing the highest quality of care. With you at the centre of everything we do, we help you live the life you want in the comfort of your own home for as long as possible.

We provide a range of services including companionship, domestic assistance, personal care, meal preparation, medication reminders, and transport to appointments, shopping, and social outings. Care is available from two hours to 24 hours a day and includes dementia care and palliative care.

For more information, visit dovida.com.au in Australia or dovida.co.nz in New Zealand.

Ageing Well

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^{*} www.abs.com.au

Living Well at Home

Activities of Daily Living

As we get older, sometimes a little extra support is needed with everyday tasks to maintain independence at home.

Consider the following in-home services:

- Companionship. Combat loneliness and isolation with visits and outings.
 Regular visits from a familiar face can help to build connections, feel engaged, and maintain quality of life.
- Transport. Carers can provide transport to social outings, for shopping, to medical appointments, collect prescriptions or to get home after a hospital stay.
- Home help. Making everyday household tasks feel a little easier. Services
 include; light household duties including laundry and linen changes, ironing,
 dusting, vacuuming, dishwashing and cleaning areas such as bathrooms
 and kitchen.
- Medication support. Helping someone remain organised with their medication to avoid missed doses, overdosing or running out of medication.
- Meal preparation. Maintain a nutritious, balanced diet with home-cooked or prepared meals.
- Personal care. A helping hand for everyday tasks such as grooming, dressing, personal hygiene, continence care and showering to ensure someone feels refreshed and ready for the day.
- Respite services. Enabling family carers to rest, recharge and maintain their
 wellbeing. The role of a family carer can be demanding: a well-planned respite
 program can help. Respite can be provided on a regular, scheduled basis, for
 planned events such as going away or ad-hoc when additional help is needed.
- Dementia care. Dedicated care delivered by dementia-trained carers, including respite services for family members. Carers can help with a variety of tasks, including reminiscence activities.
- 24-hour care. Round-the-clock care for those living with more complex needs
 or conditions, ensuring safety at home. Carers can help support daily routines
 including; personal care, home help, meal preparation, medication support and
 transportation.
- Palliative care. Enabling those with a terminal or life-limiting illness to live at home, comfortably. Working alongside a health team, palliative care provides practical and emotional support to individuals and their loved ones.

In addition, services such as gardening, home maintenance, deep-cleaning, nursing care and support from allied health teams (Physiotherapists, Occupational Therapists, Nutritionists, etc) may be required.

In Australia, you may be able to access government-subsidised funding for these services if you are assessed as needing them.



during those later years in life.

However, being proud or embarrassed, or not wanting to admit there is anything wrong, can stop us from asking for support. That's why it's important to recognise any changes as soon as possible.

While everyone has the right to have choice and control over their affairs, here are some signs that may indicate you or a loved one needs some support:

Activities of daily living:

- An untidy house. Changes in housekeeping habits, like missed chores, could indicate difficulty or exhaustion. This can be concerning as it can pose health and safety risks.
- **Declining driving skills or confidence.** Speeding fines, dents and scratches on the car, reduced ability to read signs or see in a poor light, inability to merge in traffic, driving way under the speed limit and slow reaction times may be cause for concern. Declining confidence behind the wheel can also lead to increased isolation and missed appointments.

Physical Wellbeing:

- Missed medications or doses can lead to very serious medical complications. Taking multiple prescriptions for various health conditions can be overwhelming and confusing without assistance, medication aids and reminders.
- Symptoms of depression. Many ageing adults feel isolated or like a prisoner in their own home but marked changes in behaviour and loss of interest may indicate depression, particularly if accompanied by feelings of hopelessness or changes in hygiene and sleep patterns.
- Personal hygiene. Changes in appearance including unkempt hair and body odour, an unshaven face and dirty clothing or inappropriate clothing for the weather may signal difficulty with tasks like doing the laundry or showering. Many people who live alone also fear slipping and falling in the shower with no-one to help them get up.
- **Decreased mobility or signs of a fall.** Difficulty standing, unexplained bruises, or damage to bathroom fixtures may indicate mobility issues or recent falls. One in four adults aged 65 and over fall each year, but many people don't like to tell loved ones about it.

Nutrition:

- Losing interest in food. Loneliness or mobility issues may lead to someone feeling overwhelmed by cooking and may not eating properly. Their fridge may be nearly empty or contain out-of-date food.
- **Excessive weight loss** can indicate poor eating habits, or that food is not nutritious which can have broader health impacts. Weight loss is not a normal part of ageing and can indicate changes in behaviour or underlying health conditions.

Changes in memory:

- Burnt pots and pans. A forgotten kettle, or pots used for cooking left on the stove, may be an indication of short-term memory loss or even the onset of a more serious health concern such as dementia. Besides falling, fire is one of the greatest safety concerns for older individuals and their families.
- Not recognising names. This may be a sign of cognitive decline as the person no longer knows who people are, frequently uses incorrect names or doesn't recognise familiar faces.

Reluctance to leave their home:

- Resisting social situations. Mobility, memory, or sensory changes may lead to someone losing confidence and gradually distancing themselves from their social circles. This can contribute to loneliness and depression, and other physical health issues.
- Missed medical appointments. Forgetfulness or lack of transportation can result in missed appointments, posing serious health risks. Addressing transportation barriers can help to avoid this.

Any of the signs mentioned above can indicate that someone may need a little support at home. Whilst discussing this with your loved ones may be difficult, having these conversations and getting the right support in place can ensure someone's safety and wellbeing, enabling them to continue living at home for as long as possible.



Dovida understands that many people wish to live independently in their own homes for as long as possible.

In fact, our research shows this is the case for nearly 90 per cent of our clients. A few simple adjustments here and there, as well as being conscious of potential trip hazards, can help you live safely in the comfort of your home. Consider making the following adaptions:

Furniture:

Ensure furniture is steady, comfortable and easy to get in and out of. Often falls occur when getting out of a chair or bed due to becoming disorientated or getting up too quickly.

Lighting:

Make sure there is adequate light at night, especially a well-lit path from the bed to the bathroom. Consider night lights and lighted switch plates, sound-or motion-activated lighting and rope lighting. Alternatively, multi-way light switches enable you to turn on lights as you enter the room and turn them off as you leave from another door.

Accessibility:

Stairs and steps are particularly hazardous and can easily cause a fall. If there's a stair lift installed, make sure the area is free from items that can impact on its safe operation. Utilise handrails in place for balance as you're coming up or down stairs.

Try to keep all rooms as decluttered as possible and pick up any items on the floor, especially if the person uses a mobility aid to move around. Watch out for frayed rugs – this is one of the most common causes of falling among older people. Remove them or use a double-sided non-slip backing to prevent slippage. Avoid wearing loose-fitting slippers or shoes which may cause you to trip.

Tape cords or wires away eg. extension cords, as they can easily be tripped over and avoid running cables across a room. Consider installing lever handle latches on internal doors as they are easier to grasp and handle.

Fire Safety:

If you have battery-operated smoke detectors, replace the batteries once a year. Try to replace all smoke detector batteries at the same time every year – the recommended date is April 1st, which is easy to remember because it's April Fool's Day. If you have hearing problems or vision difficulties, you can get specialist smoke alarms.

Don't leave cooking unattended, be careful to tuck any loose clothing out of the way when cooking, and make sure tea towels or any other cloths are kept away from the hob.

Kitchen:

Many of the most serious accidents involving older people tend to happen in the kitchen, especially from burns and scalds. Consider using a smaller and lighter kettle, a kettle tipper or a cordless kettle and only boil sufficient water for immediate needs. Try not to carry hot liquids further than necessary and rearrange the tea/coffee-making area if needed.

Always use rear hot plates and turn the panhandles away from the front of the cooker.

Keep knives and sharp objects properly stored, heavy objects at waist level and consider replacing glass items with unbreakable ones. Replace cupboard and drawer handles with D-shaped handles, they are easier to use if you have limited strength or suffer from arthritis. To help prevent slipping hazards, make sure you wipe up any spills straight away.

Bathroom:

The chance of slipping and falling in the bathroom is higher than in other rooms - installing slip-resistant, easy-to-see grab rails near the shower, bath and toilet can help. A non-slip bathmat provides extra grip underfoot too.

Fit a thermostatic mixing valve which works to ensure constant, safe shower and bath outlet temperatures. When running a bath, turn the cold water on first: water should be lower than 46°C to prevent scalding.

Consider installing an adjustable shower head as it can be used sitting or standing. A shower seat may be useful or a walk-in bath or shower for step-free easier access. A bath seat allows an older person to be lowered into the bath from a seated position and gently raised up again.

Bedroom:

Many falls happen when a person gets out of bed too quickly and experiences dizziness. To avoid this, sit on the side of the bed for a few minutes before standing. Ensure the bedside lamp is easy to reach and consider touch-lamps.

Check the height of the bed – a bed is too low if your knees are above the hips when sitting on it. Bed raisers under bed legs can increase the bed height and make it easier to get in and out of every day, but ensure you get professional advice before installing.

Outside:

Keep paving stones, paths and driveways free from moss and algae which can be slippery when wet or covered in leaves. Spread salt or salty sand on steps if you need to go outside in colder weather. Add grab-rails to each entrance of the house to support with getting in and out. Avoid using ladders on your own.

In addition, keep outside areas well-lit – install a sensor light outside any entrances. It's also a good security measure to have in place.

Speak to an Occupational Therapist for recommendations to improve home safety. They can also offer advice about any equipment or modifications that may be needed.



Smartwatches can support fitness goals such as tracking workouts and sending reminders to move. They can monitor heart rate, blood oxygen levels, sleep and step count which provides valuable insights into overall health. A variety of wearable smart devices are available from Apple, Garmin, Fitbit, Samsung and Google.

Kitchen aids such as tipper kettles and electric jar openers can help with everyday tasks requiring the use of fine-motor skills.

Personal alarms provide assistance in an emergency by sending an alert when a fall is detected. You can activate these alarms by pressing an emergency button or by using motion-sensors to detect a fall and then sending an emergency alert to pre-set phone numbers eg. a family member or to a 24-hour telemonitoring service. Some alarms are also GPS-enabled and can track a person's location or can facilitate two-way communication.

They include pendant alarms worn around the neck or wristband-style. Smartwatches may also be able to support with this, but they can be harder to use if there is limited dexterity due to conditions such as arthritis, or vision impairment, particularly in the event of an emergency. Discuss the best options with a doctor.

Mobility aids assist people with mobility or balance issues, providing support for movement and increasing stability. They include walking canes or sticks, walking aids such as frames or rollators, wheelchairs, lift chairs, and mobility scooters. If you only need mobility aids temporarily, consider hiring any equipment or purchasing it second-hand - but ensure you get this equipment fully serviced by a professional before using it to confirm it's safe to use.

Assistive Devices

Adaptive tools and assistive technology are designed to improve daily living. These devices can be incredibly useful in enhancing your wellbeing and supporting your continued independence.

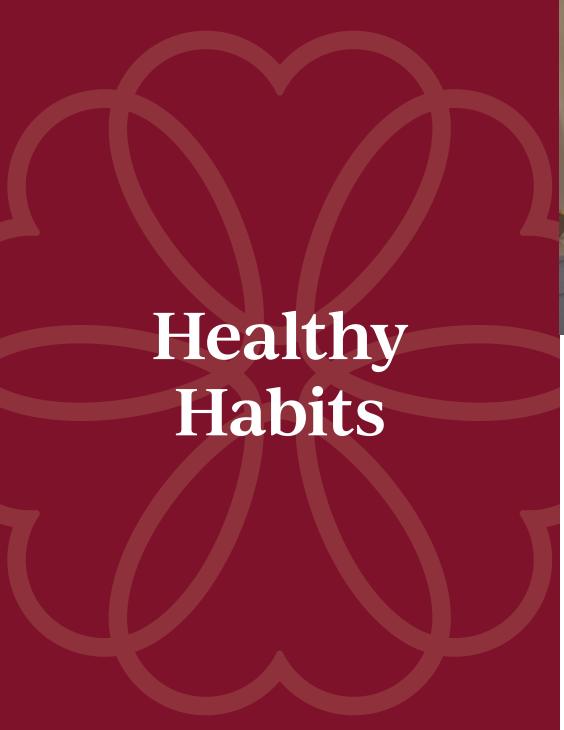
The type of devices or assistive technology you may need will depend on your specific challenges. Occupational Therapists, Physical Therapists, and Speech and Language Pathologists can evaluate individual needs and offer tailored assistive device recommendations.

Tablet devices can be a great way of staying connected to others, including playing puzzles and games which can help to support cognitive function and social connectedness. For example, try Words with Friends or Crosswords.

Smart speakers such as the Amazon Echo or Google Nest, can help with everyday tasks that may have become more difficult, especially if reduced mobility is experienced, as they can be used without having to get up and move around.

They can help with a range of tasks including turning on the lights, setting medication reminders and telling the time.







Nutrition As You Age

We all know it's important to lead an active and healthy lifestyle, and this doesn't change as you get older. To live well later in life, make sure you continue to eat well, stay hydrated, exercise regularly and support your mental wellbeing.

Appetites change with age

As your body ages, your nutritional needs change.

Feeling hungry, or feeling full happens due to a combination of signals and processes including habit, stimulation of the senses, and the relay of messages via nerves and hormones in the digestive system to the brain. Some of these messages are affected by ageing, impacting appetite and resulting in feelings of 'not being hungry' despite not having the food and nutrients needed.

As you get older, it's important to make a conscious effort not to fall into the habit of eating less and less. The process of eating, especially small, frequent meals, can help bring your appetite back on track.

What affects your appetite?

- Changes in your digestive system. The appetite centre of your brain receives messages from your digestive system to give the feeling of fullness. It then sends a reminder to eat again in a few hours. As you age, this system loses its accuracy and the wrong messages can get relayed, tricking you into eating less.
- Changes in your sense of taste and smell. As you age, your taste buds and your sense of smell diminish. Both can be further affected by illness and medications. This can reduce the desire to eat when these senses are reduced.
- Changes in your saliva. As you get older, less saliva is produced and this can be exacerbated by medications. Saliva plays an important role in your ability to taste foods, your ability to swallow and the health of your teeth.
- **Medications.** Different medications can affect your appetite. It's important to regularly review any medications that are taken with a doctor.
- Illness and medical procedures. It's normal for appetite to decrease when fighting illness or infection. But food plays an important role in helping your body repair itself and it's essential that you continue to eat throughout your illness.
- Nutrient deficiencies. A poor appetite can be as self-perpetuating as eating
 poorly as this results in reduced consumption and absorption of essential
 vitamins and minerals, including vitamin B1, magnesium, sodium, iron and
 zinc. All of these are associated with a reduced appetite.
- Emotional wellbeing. Stress, depression, anxiety, grief, serious illnesses or accidents can cause changes or loss of appetite. You may find your appetite completely absent, feel full after only one mouthful, or you may also feel like your throat 'closes up' or your mouth feels too dry to swallow when you try to eat.
- **Bowel issues.** Constipation, diarrhoea and nausea will affect your appetite and food intake. Your bowel works better when you have a good quantity of food and fluids passing through and when the actions of muscles in your belly, hips, legs and arms move your body.



Ways to combat lack of appetite:

- Recognise the 'not hungry' messages are mistakes and try to eat when you know you should.
- **Eat by the clock**. Try to eat something every few hours. Your brain benefits from the repetition and reminders of eating regularly, so make eating enjoyable.
- Make every mouthful count. Choose high-protein, calorie-rich foods and add vegetables, fruits, grains and nuts. Add extra calories to ensure you maintain weight.
- **Be kind to yourself.** Use treats to tempt your appetite these can remind your appetite that food is pleasurable and important.

Ten myths around nutrition and ageing

1. Your stomach shrinks as you get older

Although your appetite and your capacity to eat may change, your stomach doesn't shrink when you get older. In fact, not eating well enough only accelerates the ageing process.

2. Weight loss is healthy

This may be true in middle age, but it's not the case when we are older. Avoid dieting or unintentional weight loss because it causes loss of essential body muscle, which contributes to poor health in many ways. Additionally, a few extra kilos in later age is beneficial to support your body and brain in the years ahead. Try to combine good exercise with a diet rich in protein and healthy fats.

3. You need to eat less as you get older

Whilst your metabolism slows and your energy output decreases, you need food to protect and fuel your body. Try to reduce intake of processed foods and increase consumption of foods rich in protein, vitamins and minerals.

4. Only eat what you feel like it

The ageing process can play tricks on your appetite and the triggers that tell you if you're hungry or full. As a result, you might eat less than your body needs. Despite this, it's important to continue to eat so your body continues to get the energy and nutrients it needs to function. An outright loss of appetite is not normal and could be symptomatic of an underlying health problem. If you are having problems, try to eat small meals regularly throughout the day, even if you don't always feel like it.

5. You need a low-fat diet

Contrary to deeply entrenched popular opinion, a low-fat diet is not always the best, especially for ageing adults. Fat is an important source of calories and you might need to eat a bit extra to maintain weight. Foods containing unsaturated fats are good for heart, body and brain health. Fats found in foods such as olive oil, nuts, seeds, avocado, and oily fish are ideal.

6. Eat more vegetables

Whilst nutrient-rich vegetables continue to be essential in your diet, protein needs to be at the centre of your plate, with vegetables surrounding it. That's because you need more, not less, protein as you get older. Protein keeps your muscles, your immune system, your body's organs, brain and other systems working and renewing continuously. Vegetables are always important, but if your appetite is small, ensure you get the protein first, then enjoy the vegetables.

7. You only need to drink water when you're thirsty

If you feel thirsty, you are already slightly dehydrated which can affect the ability of the body and brain to work at peak capacity. Dehydration can bring on confusion, delirium, hamper kidney function and worsen a multitude of other conditions that commonly affect older people. Seniors tend not to sense thirst as efficiently and are therefore at greater risk of dehydration, making fluid intake an essential element of overall nutrition.

8. Supplements are sufficient

You can't survive off vitamins and supplements alone - your body works best when it's digesting food. Many supplements can interact with common medications. Sharing a meal with family and friends is a great way of consuming all of the vitamins and minerals that you need to keep your body happy and healthy.

9. You must always eat a 'proper meal'

Making sure you eat regularly is essential to help you live well and remain independent as you age. Try eating smaller meals more frequently or having snacks between meals. If cooking is becoming more difficult, try prepacked or frozen meals. Just be mindful that they may not contain enough protein or other nutrients that are important and they may also be high in sodium or saturated fats. The saying 'making good choices' still rings true with old age – just make sure the 'something' you do eat is nutritious.

10. Malnutrition is part of getting older

Malnutrition can affect anyone, at any age and it's not a normal part of the ageing process. But older adults are at greater risk of malnutrition and it's important that you don't dismiss the warning signs as being a part of 'old age'.



Malnutrition and the power of protein

Malnutrition occurs when you don't eat enough of the right foods, which results in your body not getting the nutrients it needs to function properly. The most common sign of malnutrition is weight loss, particularly unintentional weight loss over a relatively short period of time (e.g. a few months). Consult your Doctor or a Dietitian if you are experiencing this.

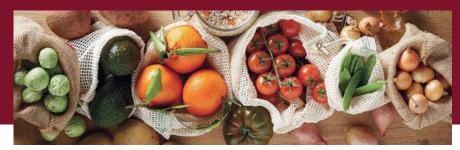
Malnutrition is a major cause of ill health in older adults, contributing to falls, confusion, infection, pressure injuries (bed sores), preventable hospital admissions, post-operative complications, rapid physical and cognitive decline and even premature death. Whilst malnutrition is a major cause of ill health, ill health can also cause malnutrition due to loss of appetite and poor eating habits.

Age increases the risk of malnutrition because people often eat less food than they did when they were younger, even though their need for nutrients doesn't decrease. Eating less over time can easily lead to problems.

Signs of possible malnutrition

- Weight loss
- Reduced appetite
- Lack of interest in food and drinks
- Feeling tired all the time
- Loss of strength and energy

- Poor concentration
- Getting ill often and taking a long time to recover
- Wounds taking a long time to heal
- Feeling cold or colder than usual
- Low mood or depression



The power of protein

As you age, you need to consume more protein. Protein helps the body repair wounds, is important for cell renewal, and essential for an effective immune system.

The body will continue to draw on protein reserves from your muscles, so you need to ensure you're getting enough protein to sustain this.

To help, put protein at the centre of each meal. Don't forget to work your muscles, so that any protein you do eat gets the best possible chance of returning to them.

Sources of protein:

- Lean meat, poultry, fish and seafood
- Eggs
- Dairy products like milk, yoghurt and cheese
- Soy products like tofu
- Seeds and nuts
- Beans and legumes, such as lentils and chickpeas



Making meals enjoyable

Food isn't just about nutrition, it's a sensory experience about sharing and enjoying, often forming an important part of shared cultural traditions. Whilst foods may not always taste the same as they used to, eating meals can still be enjoyable.

Consider the following ways to make meals more enjoyable:

Amp up the flavour:

- Enhance the flavour with fresh or dried herbs, spices, onion, garlic, ginger, pepper or cooking with acidic flavours like citrus or vinegar.
- Adding salt can increase the likelihood of you consuming food when you have a low appetite or are at high risk of malnutrition because it gives the food a stronger flavour. However, you should consult with your Doctor as you may need to use it sparingly.
- Adding sugar can make food more appealing and encourage you to eat an extra mouthful when you're not eating well. Occasional foods such as chocolate, cakes and ice-cream can also help flagging appetites and boost nutrition if you are frail. Again, seek medical advice for an individual recommendation.

Try new things:

- Experiment with different foods or cuisines and try new recipes.
- Combine foods from the different food groups in creative ways and try different kinds of fruits, vegetables and grains that add colour and texture to your meals.
- Take a cooking class to learn new ways to prepare nutritious meals and snacks.

Plate up:

- Present food in a way that makes it more appealing with different colours and textures to add extra vitamins and minerals, have a variety of food on the plate.
- Use smaller plates for smaller meals. Consider portion size as big meals can be daunting, which can be problematic and more wasteful than just serving a small portion.

Eat or cook with others:

- Share the entire experience of meal planning, shopping, preparing and cooking with others.
- Make regular plans to eat with others to enhance the social aspect of eating where good food is shared with good conversation. Try a breakfast or dinner club where everyone takes it in turns to cook.

Reminisce:

 Cook meals of yester-year, enjoy the flavours of old and reminisce on old pastimes. Traditional and familiar meals can reinvigorate appetite and rekindle the enjoyment of food.

Make meals easier to eat:

 The physiological changes that you will experience with age, especially reduced saliva and dental changes, can lead to difficulty chewing and swallowing. Eating soft, moist foods that require less chewing, such as soups, casseroles, stewed fruits etc, can help it become more enjoyable.

Get out and about:

 Add a sense of adventure to your meals and venture out for a meal, visit friends and family or even try a picnic and enjoy some fresh air and the outdoors.

Fortifying foods

 Despite your best efforts, your diet may simply not be providing your body the nutrients it needs to sustain you, especially if your appetite is low or you are finding it a challenge to eat enough food to maintain your weight.

Real, whole foods should always be your priority, but you can fortify foods by adding protein and calories to boost the nutritional value of what you eat. You can fortify foods by adding milk powder, ground or whole nuts, extra eggs, seeds and legumes into your meal preparation. For some, a high-protein powder supplement might be suggested to help.

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Difficulty swallowing

If you have trouble swallowing, known as dysphagia, it can increase the risk of poor nutrition and dehydration. Precautions need to be taken to ensure this doesn't happen: seeking help from a Dietitian may be useful in combating this.

Certain types of foods and thin fluids such as water, milk, tea, coffee, juice and soup can easily 'go down the wrong way' and may need to be thickened. A Speech Pathologist may recommend changes to the textures of foods or drinks and provide rehabilitation techniques and exercises to help you swallow safely.

Nutrition and food after a dementia diagnosis

Nearly half of all people diagnosed with dementia have lost weight in the year prior to their diagnosis, contributing to frailty, falls and ill health*. Understanding and supporting nutritional needs following a diagnosis is essential to maximising physical and cognitive capacity, as well as supporting quality of life.

How dementia impacts eating:

Carers and family members have a vital role to play, so understanding that some of the following can occur due to dementia can help with meal preparation, planning and nutrition:

- Not feeling hungry or unable to express hunger adequately. Food refusal or not eating doesn't mean the person isn't hungry - some people may find some food looks unfamiliar and not enticing.
- Confusion about how to eat. Cutlery may not be recognised or the brain signal to start eating is absent or delayed, causing confusion around the meal.
- Distractions resulting in lost interest or missing a meal eg. having the TV on.
- **Swallowing issues** are very common and changes to the texture of food and drinks may be prescribed by a Speech Pathologist.

Active and healthy:

NSW Health has some great resources to help seniors be 'active and healthy'.

Visit activeandhealthy.nsw.gov to discover where to find local exercise classes for seniors and to access a series of free, online learning lessons about serving sizes, how to read food labels, eating healthily and how to prevent falls.





Suggestions to help combat food refusal:

- Offer light meals, snacks and drinks at the usual time. Indicate that it's time to eat or drink and provide accordingly.
- Try to make sure food looks appealing and is recognisable.
- When presenting food or drink, offer encouragement and a simple description.
- Sit and share food and drinks so that eating can be mimicked.
- Offer foods that can be eaten with the fingers.
- Ensure food contrasts on the plate.
- Minimise distraction and ensure the room is set up properly to look like it's mealtime.

Other considerations:

Fortifying preferred foods with nutritional powders, milk, other protein powders or ground nuts can help to boost nutrition.

Dehydration is a significant issue in dementia and can often add to confusion. Regularly offer a variety of drinks to ensure hydration is maintained.

It's vital for a person with dementia to never miss an opportunity for nourishment and the pleasure of food. That can mean thinking 'outside the box' to find solutions to support them with their nutritional needs.

* Nutrition and Dementia report by Alzheimer's Disease International, 2014



Staying Hydrated

Staying hydrated is as important to your health as eating, exercising, and sleeping well. Water is essential for life and is a major part of the human body. At birth, the body is approximately 75% water, but this decreases with age to about 55% in older people.

water at birth

75% 55% in older people

Water or fluid helps you digest your food, absorb nutrients, and get rid of waste. It also helps to regulate your body temperature through sweating, and acts as a lubricant and shock absorber in joints.

Good hydration, or drinking enough fluids, is particularly important as you age. You might lose your sense of thirst, have a chronic condition that affects the body's ability to work properly or take medications that increase the risk of dehydration.

Not getting enough fluid can lead to dehydration, which is a serious condition.



Dehydration

Dehydration occurs when you don't have enough fluids in your body or lose more water than you take in, meaning your body can't function properly. It can cause you to feel out of sorts and tired, and when it lasts a long time, it can cause serious health problems.

Signs of dehydration include:

- Confusion
- Tiredness
- Headaches
- Light-headedness or dizziness
- Dark yellow or strong-smelling urine
- Urinating fewer than four times a day
- Dry mouth, lips, eyes, or skin
- Low blood pressure
- Disorientation

Thirst isn't always a reliable early indicator of the body's need for water. Many people, particularly older adults, don't feel thirsty until they're already dehydrated.

Dehydration is a common problem in older people, you might not recognise the feeling of thirst in the same way that you used to and so you may need to find other prompts to help you. For example, setting reminders or always having a full glass of water when you take medications.

You may be at higher risk if you:

- Are dependent on others for drinks due to mobility or cognitive issues
- Have difficulty swallowing
- Have diarrhoea and/or vomiting
- Have a high temperature (fever)
- Take certain medications
- Have not drunk enough after physical activity
- Avoid drinking due to continence issues or toilet locations
- Have chronic conditions like diabetes

Health issues associated with dehydration

When you're older, dehydration can cause lots of health problems. Complications result when your vital organs stop working well due to low blood flow or your kidneys try to hold onto fluid. If it's not treated, dehydration can be deadly.

Not drinking enough fluids can lead to:

- Problems with memory, concentration and decision-making
- Feeling extra tired
- Weakness
- Urinary tract infections

- Kidney problems
- Constipation
- More falls
- skin conditions such as eczema and psoriasis
- Pressure sores

Steps to get enough water

While a variety of drinks can help maintain the body's fluid levels, drinking water is one of the best ways to hydrate as each glass is calorie and sugar free. Generally, you should aim for six to eight glasses of fluid a day, but you may need to drink more in hot weather, or if you are more physically active.

Here are some simple tips for staying hydrated:

- Get a reusable water bottle, take it with you wherever you go, and refill it as needed
- Add a slice of lemon or other fruit to your water, making it more enjoyable to drink
- Listen to your body and drink water as soon as you feel thirsty
- Have a full glass of water when you take medications
- Reach for water instead of sugary, alcoholic or caffeinated drinks

- Add more water-rich foods such as vegetables, fruits, and soups into your diet
- Set a daily tea or coffee time with a friend or partner
- Set reminders on your phone to drink water
- Keep drinking water even if you have continence issues and see your doctor for treatment
- Limit your alcohol consumption

 it doesn't count towards your
 daily fluid intake

Good water intake is an important part of staying healthy.

If you're concerned that you're not getting enough water and it's affecting your health, make sure you talk to your doctor.

Healthy Habits

Exercise For Seniors

As you age, muscle strength and balance starts to decline, so it's important to maintain physical activity to help prevent this and reduce the risk of falls or hospitalisation. Muscle mass also reduces in older age and can affect your ability to carry out activities of daily living such as getting out of a chair by moving around on your own.

You are never too old to get moving

The human body responds to exercise, no matter our age, and the health benefits are plentiful. People over the age of 65 must have adequate fitness levels to maintain independence, recover from illness and reduce their increasing risk of disease. The benefits of exercise for older people include:

- Mobility. Joints need regular movement to remain healthy and mobile.
 Being mobile is a crucial aspect of being healthy. If you can't move your joints freely through the full range of motion, you are at an increased risk of injury.
- **Bone density.** Begins to decline after the age of 40 and accelerates around the age of 50, making older people more prone to fractures. Weight-bearing exercise can help keep your bones healthy and strong and reduce the risk of developing osteoporosis and fractures.
- Muscle mass. Slowly decreases with age. Adults who don't exercise are said to lose 3-8% of muscle mass per decade, and 5-10% after the age of 50 so we need to work to maintain and/or increase our muscle mass with regular exercise. As they say, use it or lose it!
- **Balance.** Is important for everyday activities. Balance is definitely something that becomes harder to maintain with age and a lack of balance can lead to falls and injuries. Improving your muscle strength, mobility and bone density all help in improving your balance.



Sit less and move more!

Did you know people over the age of 60 spend up to 80% of their waking day sitting down? Reduce the time you spend watching TV, and break up your sitting time by taking regular walks. Being active and maintaining a regular exercise routine as you get older has many benefits and is key to preventing and managing chronic disease. It:

- Keeps the heart, lungs and blood vessels healthy, strengthens bones and muscles and supports a healthy weight. This can then lower the risk of high blood pressure, high cholesterol, type 2 diabetes, heart disease, bone problems, and some types of cancer.
- Is beneficial for chronic conditions like Parkinson's as it can improve mental and physical wellbeing, balance, flexibility, strength and coordination.
- Maintains independence and the ability to perform activities of daily living including cooking, bathing, dressing, getting into or out of a bed and moving around the home. This helps to maintain quality of life.
- Improves balance and flexibility, helping to prevent falls.
- Eases pain from conditions such as arthritis.

As well as being good for your physical health, being active also supports mental health:

- Improves mood and sense of wellbeing
- Prevents and eases symptoms of anxiety and depression
- Helps brain function eg. thinking, concentration, problem solving and memory
- Improves sleep
- Helps manage stress
- Helps build confidence
- Gives you more energy

Additionally, doing physical activity with others can provide the opportunity for social engagement. Try doing an exercise you enjoy with a friend such as meeting a friend for a walk.

It's important to make sure any exercise you do is suitable for your ability – consult your doctor before starting an exercise routine.

Types of exercises

Aerobic. Or 'cardio' activities that increase your breathing and make your heart beat faster. This supports healthy function of your heart, lungs and blood vessels, improves muscle tone and helps maintain mobility.

Walking is one of the most beneficial exercises a person can do, and it can be as intense or gentle as needed. Consider other aerobic exercises like boxing, cycling, dancing, swimming or aqua-aerobics, active yoga, gardening, housework, team sports and games like tennis or golf.

Strength. Maintains bone and muscle strength, challenges your muscles and helps prevent muscle mass loss. You can strengthen your muscles in many ways, including at home or the gym, but try to do this two times a week.

Choose activities that work all the major muscle groups of your body (legs, hips, back, chest, abdomen, shoulders, and arms).

Consider lifting weights (or everyday objects such as tins of food), work with resistance bands, do exercises that use body weight for resistance (wall pushups, knee lifts or heel raises while seated) or climb stairs.

Development of muscle strength and endurance is progressive over time – gradually increase the amount of weight, number of repetitions, or the number of days a week of exercise to strengthen muscles.

Balance. Prevents falls which reduces the risk of injuries. Try to do these daily, or at least two to three times a week. Use supports such as a chair, wall or benchtop to help.

Activities can include pilates, yoga, tai chi, walking heel to toe, sit-to-stand exercises, standing on one leg and marching on the spot.

Flexibility. Enhances joint movement through the full range of motion. Stretching helps increases flexibility, and thereby can allow people to more easily do activities that require greater flexibility.

Key activities include pilates, yoga, tai chi and dancing, arm circles, leg swings, seated back twist.



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Healthy Body, Healthy Mind

Staying healthy isn't just about exercise and a good diet. Maintaining a positive outlook is just as important as keeping fit - in fact, the two go hand in hand.

Mental health

Good mental health is a positive state of wellbeing where you can cope with the challenges of life and can function well. The World Health Organisation defines good mental health as:

- · Coping with the normal stresses of life
- · Being able to learn and work productively
- Maintaining positive relationships and contributing to the community

As you age, it can become more difficult to stay mentally healthy due to changes in physical health, feelings of social isolation and grief. The most common mental health conditions are depression and anxiety. Some older adults are at greater risk of depression and anxiety as certain chronic conditions such as dementia and Parkinson's cause changes in the brain which can impact mood or emotions.

 Depression. Characterised by overwhelming feelings of sadness, loss and hopelessness, lacking energy and losing interest in things usually enjoyed. Changes to sleep, irritability and difficulty concentrating may also occur. Depression usually develops because of a combination of life events, personal factors and changes in the brain. Medication, therapy (such as cognitive behaviour therapy) and lifestyle changes can help.

Anxiety. Is a feeling of unease, worry or fear and may be characterised
by breathlessness, panic attacks and difficulty sleeping. Everyone feels
anxious from time to time but when those feelings don't go away, happen
without any particular reason or make it hard to cope with daily life, it
may indicate that someone is experiencing anxiety. Medication can help
reduce anxiety along with counselling and relaxation techniques.

There are plenty of things you can do to improve your mental health and wellbeing, but if you are still struggling, speak to your doctor for more support. Don't be afraid or too proud to ask for help if you need it. This is a way of reassuring your family and friends that you are self-aware and capable of living independently at home with a little bit of assistance.

Active mind

An important part of having good mental health is building resilience. This is when you can cope with unexpected changes and challenges in your life, by using your inner-strength and the networks around you. Everyone has challenges in life. People who have good mental health are more likely to be able to cope with these ups and downs.

Following routines can help to build resilience. MindSpot, a free clinical mental health service, has pinpointed five key activities that, if practised three to four times a week, can lead to better mental health:

- Meaningful activities. These provide a sense of accomplishment, satisfaction or joy. Try listening to a favourite song or watching your favourite TV show.
- 2. **Healthy thinking.** This means having realistic thoughts about yourself, the world, and the future. This also means keeping perspective and treating yourself with respect, particularly when things are difficult.
- **3. Goals and plans.** Help with motivation and energy, providing something to look forward to rather than dwelling on problems or past events.
- **4. Healthy routines.** Like our sleep, eating well or being active, are critical for good mental health.
- **5. Social connections.** Regular contact with friends and family helps you to feel validated and provides a sense of belonging.

Isolation and loneliness

One in five older Australians are socially isolated* and 21% of New Zealanders aged 65+ feel lonely**. Feeling connected to others is vital for our quality of life and mental and physical wellbeing, protecting against the negative effects of loneliness and isolation. The impacts of isolation include increased risk of heart disease, stroke, anxiety, depression, dementia and increased likelihood of skipping meals more frequently. Maintaining social connection also helps keep your brain stimulated and prevents cognitive decline including memory loss.

When you're feeling lonely, it can be challenging to connect with others and be sociable, but that's just what you need to do. Try to reach out to a family member, friend or neighbour when you're feeling lonely.

Ways to stay connected and prevent loneliness:

Talk to family or friends. Meet in person or have regular calls.

Build social connections into hobbies and leisure pursuits - eg. Gardening, painting, singing or get involved with the local bowls club. Play cards, go to a quiz/trivia night or play bingo with friends.

Learn a new skill. Libraries often offer a range of education programs including computer classes or Hardware stores offer DIY or gardening sessions.

Consider getting a pet. They provide companionship, love and can help with exercise routines. Plus it's a shared interest you can use as a conversation starter with others!

Do a group exercise session. Local councils often offer a range of activities for older people for free or for a small cost. Consider a dance or fitness class, yoga, aqua aerobics or meditation. Alternatively, consider joining a walking or sports club.

Challenge yourself. Join a book club or do puzzles, jigsaws, crosswords and mathematical problems.

Get crafty. Find a local painting, drawing, knitting or flower arranging group.

Volunteer at a local charity

Join an **online community** with your special interest

Go shopping or have regular coffee 'dates' with friends **Join a community group** eg. a Men's Shed, Country Women's

Association, or Rotary.

*Aged Care Research and Industry Innovation (ARIIA)

** Conquering Loneliness in NZ

Companionship services

Sometimes, you may need a little help to maintain social connections with others. Home care providers, like Dovida, offer companionship and transport services to help with social visits and outings. Regular visits from a familiar face can help someone to build meaningful connections with their carer, feel engaged, and maintain quality of life.

At Dovida, we provide care that centres around you. Our Circle of Care creates meaningful connections that empowers you to live your life, your way.

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Mindfulness

Mindfulness involves focusing on being present in the moment and allowing experiences to come and go without clinging to them or pushing them away. It encourages individuals to observe their thoughts and feelings with curiosity, openness, and compassion. It can help you cope with the stressors of ageing, which can improve your wellbeing and quality of life. Mindfulness practices include meditation and deep breathing exercises.

The benefits of mindful practices include:

- Reduce stress and anxiety
- Improved focus and concentration
- Becoming more self-aware eg. 'how am I feeling'
- Increased resilience
- Greater overall mental wellbeing

How to start?

- Go somewhere you won't be disturbed, perhaps in the garden or a park.
 Take a few minutes to look around and notice what you can see.
 Pay attention to colours, shadows, shapes, insects, clouds, how the trees move etc.
- Next, consider what you can hear, smell or feel. Just observe what's there
 and what's happening.
- Try to bring mindfulness into almost all aspects of life eg. the mindful preparation and eating of food, swimming mindfully (noticing reflections on the water and how the water feels against your skin).

For more information about mindfulness, consider downloading a mindfulness app, watching videos about on YouTube or researching it on the internet.

Support organisations:

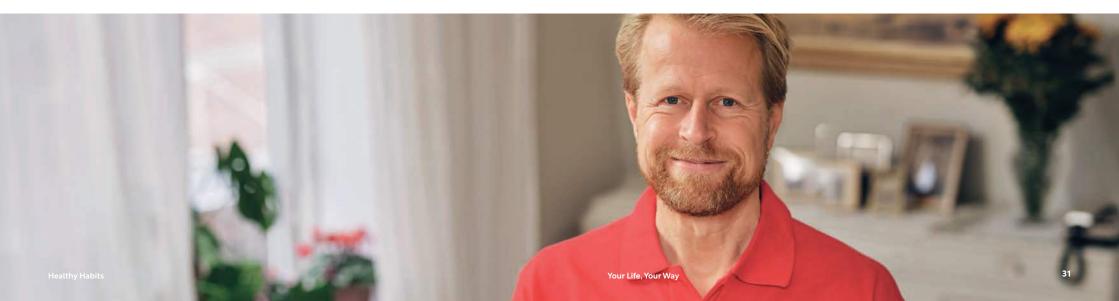
There are a number of organisations that can provide information or support for mental health:

In Australia:

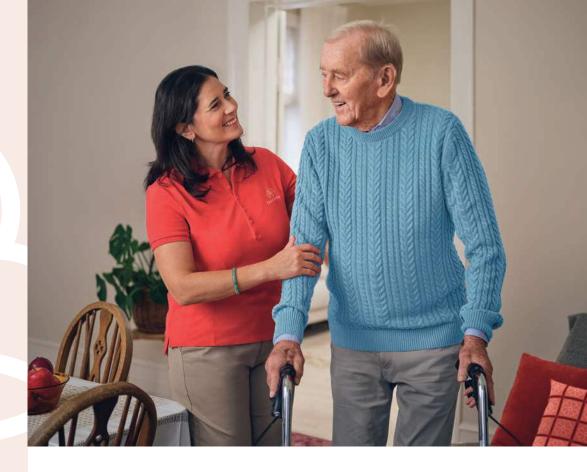
- **MindSpot.** Part of Macquarie University Health, it offers online, personalised mental health support. Visit mindspot.org.au.
- Beyond Blue. Provides mental health information. Visit beyondblue.org.au.
- **Lifeline Australia.** Provides crisis support and suicide prevention services. Visit lifeline.org.au or call their 24/7 Crisis Support on 13 11 14

In New Zealand:

- Mental Health Foundation. Provides information and advice about mental wellbeing and suicide prevention. Visit mentalhealth.org.nz.
- **Need to Talk? 1737.** Supporting people with mental health concerns. Visit 1737.org.nz or call their Need to Talk helpline on 1737.
- Depression.org.nz. Supporting mental health including depression and anxiety. Visit depression.org.nz or call the Depression Helpline on 0800 111 757.
- **Small Steps.** Digital tools developed by Health New Zealand and Clearhead to help with mental health. Visit smallsteps.org.nz.
- **Lifeline NZ.** Provides crisis support and suicide prevention services. Visit lifeline.org.nz or call 0800 543 354.



Preventing Hospitalisation



Keeping Homes Safe

As you age, being admitted to hospital presents a risk in itself - there's the stress of being in an unfamiliar environment, the increased chance of acquiring infections, and even muscle wastage from spending time restricted in a hospital bed.

A fall is one of the biggest risks for older people, with 1 in 4 Australians and 1 in 3 New Zealanders over the age of 65 having a fall every year*. This can be a huge setback, potentially causing serious injury or even lead to premature death. It's often seen as the first step in the path of decline for an older person, but it doesn't have to be this way.

Remember the old saying, 'safety begins at home'? The first step in preventing a fall and a possible hospital stay is ensuring your home environment is safe. With a few simple adjustments to prevent trip hazards, you can continue to live safely and independently at home and stay 'falls free'. Refer back to the information on page 6 about how to adapt your home and prevent falls.

Around the house

☐ Is there any clutter or hazards on the floors? Wires, rugs, books
and magazines?
☐ Are the stairs clear of objects and other hazards such as loose carpet?
☐ Have you put items within reach and made sure your step stool is steady?
☐ Can you easily reach the cupboards or other essential products/items?
☐ Bathrooms can be hazardous, are you using non-slip mats?
☐ Are the appropriate supports in place, such as grab rails?
□ Do you have a smoke alarm fitted? Have you changed the
batteries or had it serviced recently?
☐ Is the lighting easily accessible and easy to reach?
□ Do you have any night lights in hallways?
☐ How sturdy is your furniture and is it at a suitable height?
☐ Are your bedsheets and covers tucked away and not trailing on the floor?
□ Do you have a fall detector pendant to wear in case of an

Staying safe outside

emergency?

☐ Are paving stones, paths and driveways free from leaves, algae o
other slipping hazards? Are the surfaces uneven?
Do you have grab rails installed around the entrances?

☐ Are the entrances well lit?

Other considerations

Are you	exercising	regularly to	maintain	strength	and balance?
		المصما المصادين			

☐ Have you had your vision and hearing checked recently?☐ Do you wear good-fitting shoes with non-slip soles?

☐ Have you recently reviewed your medications with your doctor?

☐ Are you keeping on top of medical appointments?

☐ Are you using the mobility aids recommended by your Occupational Therapists?

 \square Is your diet nourishing and do you drink water during the day?

☐ Are there any community exercise classes which you could get involved with?

Are you staying connected with family, friends and the community?

□ Do you have an Advanced Care Plan and/or Advance Health Directive in place?

Looking After Your Health

Now is the best time to look after your own health, so you can be the best you can be. Making healthy choices might not always be fun, but staying healthy is the best way to avoid falling ill and ending up in hospital. As you age, it's more important than ever to pay extra special attention to our health habits and stick with the choices that will see our health improve, not deteriorate.

Stay safe and home-wise with these helpful hints:

- **Emergency pendant.** Think about wearing an emergency pendant. This can be worn around your neck or wrist and should be activated in an emergency.
- Be prepared for any emergency. Is your emergency contact information within easy access eg. the refrigerator door. Be sure to include phone numbers for your next-of-kin, your GP and your medications.
- Take care. In the familiarity of our own home, we can often become
 complacent. Take care and focus on what you are doing at home to avoid any
 unnecessary accidents or injuries.
- Know your limitations. Is your shopping getting heavier to carry? Is your house harder to clean? Is your garden difficult to maintain? Take two trips.
 Clean one room at a time. Ask for help. Pushing your limits could result in an accident or injury.

Visiting your Doctor

If you're concerned about frailty or your mobility, be sure to visit your GP so they can assess your overall health. An Occupational Therapist can advise on any aids which may help with daily living activities.

Remember to:

- **Have regular check-ups**, including specialist medical appointments, eye and hearing tests.
- Check if **medications are causing side effects** like drowsiness or dizziness. Review your medications (prescriptions, over-the-counter and supplements) annually with your GP or Pharmacist.
- Report any health changes that cause weakness or illness to your GP as soon as possible. This could include pain, aching, and stiffness in your legs or feet, or increased difficulty walking.

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^{*} Health Direct and Age Concern NZ



Looking After Your Senses

Why does safety become a greater risk with age?

As you age, you may experience a decline in mobility and motor skills, which can result in more difficulties with balance. Our senses can deteriorate (hearing, sight, smell, taste and touch) and we may also become forgetful. These changes can impact on our reactions and how we interact with our environment. Changes to our senses can therefore lead to a greater risk of accident or injury in and around your home.

- **Sight.** By the age of 60, the pupils decrease to about a third of the size and age-related eye conditions can develop such as cataracts and macular degeneration. This can make everyday tasks more hazardous, so it's important to have regular checks with your Optician to maintain safety.
- Taste. With age, taste buds decrease in both number and mass. This can affect the ability to detect spoiled food or over-salting food which can lead to higher blood pressure. Salty and sweet are usually the first taste buds to go.
- Smell. Sense of smell diminishes after the age of 70. This is due to nerve loss and less mucus in the nose. This poses safety risks due to not being able to detect things such as gas leaks or burning saucepans.
- **Touch.** As you age, your motor skills deteriorate and people may experience decreased sensitivity to pain and temperature. This poses a risk to older people, particularly in the kitchen (for example, when cooking with hot food and equipment).
- Hearing. Age-related hearing loss can affect your sense of balance, making a fall more likely. It also alters your awareness of the environment (for example, not being able to hear an alarm).

You can minimise the effects of ageing on your senses.

Here are 10 ways to safeguard your senses and stay active:

- 1. Prioritise regular check-ups with trusted doctors and specialists, including your Dentist, Optometrist, and Occupational Therapists. These check-ups are crucial for monitoring sensory changes.
- 2. Maintain a nutritious diet to preserve sensory function; avoid excessive junk food and sugar consumption (which lacks antioxidants and vitamins), as this can lead to conditions like cataracts and macular degeneration.
- 3. Quit smoking and other harmful habits to maintain general health and prevent sensory decline. Smoking has been linked to the loss of all senses, particularly taste.
- 4. Enjoy the sun, safely. While it provides essential Vitamin D, long-term exposure to the sun can cause cataracts. Protect yourself by wearing sunglasses and sunscreen.
- 5. Protect hearing by reducing device volume and taking breaks from loud noises, using earplugs as needed.
- 6. Exercise the sense of smell to potentially improve it. Training can improve your sense of smell try regularly smelling different fragrances such as cloves, roses, lemon and eucalyptus. This can help combat age-related smell loss, which may signal underlying health issues such as dementia.
- 7. Stay active to support heart health and manage conditions like arthritis. Exercise may also benefit vision by increasing blood flow to the eyes.
- 8. Embrace touch through hugs and human contact to promote emotional wellbeing, prevent social isolation and depression that can accompanyageing.
- 9. Prevent head injuries and sinus infections as this can result in loss of smell and taste. Promptly treat any injuries to the brain, which can impact sensory perception. Acquired Brain Injury (ABI) refers to any damage to the brain that occurs after birth and is often caused by accidents, strokes and degenerative neurological diseases, eg. Parkinson's disease and dementia. People over the age of 65 years are more than twice as likely to have ABI, and it's important to prevent accidents that can injure the brain such as falls.
- 10. Seek assistance when needed, such as home care that can help to maintain independence and mitigate the impact of sensory loss on daily life.

Returning Home from Hospital

Sometimes a hospital visit is unavoidable. When you are in hospital you are closely monitored and cared for. When it is time to come home you may be feeling anxious about how you will manage on your own, and you may need some additional help. Here is some advice to help the transition from hospital to home go more smoothly.

Leaving hospital. Practical arrangements need to be made to assist you to leave the ward and get transport home. Home care providers such as Dovida can provide transport services and a settling home service to ensure a smooth transition.

Preparing your home and having ongoing support. Consider what help you may need to get your home ready for your return eg. bed linen changing, cleaning the house, getting groceries and other supplies. Will you need help with everyday tasks such as showering, laundry or meal preparation to help your recovery? Home care providers, like Dovida, can manage all of this for you and prepare your home for your return.

Transition care programs (in Australia). Government-funded, short-term care (up to 12 weeks) to help people return home safely and aid recovery. It includes personal care, nursing services, home help and allied health services such as dietary advice, Physiotherapy, and Occupational Therapy. The hospital staff can arrange an assessment to understand your eligibility for this. It can be received at home or a residential care facility. Speak to My Aged Care on 1800 200 422 for further information.

Discharge summaries. Provided as you are preparing to leave hospital, it outlines why you were admitted to hospital, what care you received (including any tests or procedures that were performed) and any medications that you are now taking/have taken in the past. It also includes a clinical summary of your situation now and any follow-up actions or appointments that have been made. This will then be sent to your local GP and if you're in Australia, an electronic version will be added to your 'My Health Record'. You may also be given a copy of this when you are discharged. Ensure that your GP, Pharmacist and any care organisations that support you receive a copy of this.

Medication. Ensure you have a hospital medication discharge summary, prescriptions for your medications and information regarding any special dietary instructions. Confirm with medical staff what medication you need and when. Make sure you record the contact details of the Pharmacist or prescribing doctor if you have any problems.

Pharmacy tips. Ask your Pharmacist about arranging a medication organiser to make it simple and hassle free to keep track of your medications and vitamin supplements, and to help prevent spills or mix-ups.

It's also a good idea to ask your Pharmacist about a Home Medicines Review (HMR) at this time, to ensure that you are taking your medication correctly. The Pharmacist will talk to you about the medicines you are taking, including prescription medicines, over the counter medicines, vitamins and supplements. They will check everything is being taken correctly and hasn't passed its useby date; show you how to store medicines properly, suggest ways of helping you remember to take the right medicines at the right time; and suggest whether any medicines could be changed.

Follow-up appointments are often scheduled with your local GP or Specialists to monitor recovery progress and address any ongoing health concerns. Don't forget to record when and where they are. It's important that you attend these appointments and communicate any changes in symptoms or health status to your doctor.

Before you leave hospital, consider the following questions within our discharge checklist:

Have you seen your discharge summary to explain what happened in

hospital?
Do you know what treatment you need now — and in the future?
Do you know which medications to take and when? Do you have enough of those medications until you can see your GP?
Is any additional equipment required? Who's arranging this?
Are any dietary changes needed? Will you be able to shop for food and manage to feed yourself?
What follow-up appointments are needed?
Has your GP been informed of your admission and been given your discharge plan?
Do you need any additional support to help recovery eg. in-home care?
How are you getting home - do you need help with this?
Do family/friends or your care provider need to be contacted to advise that you are going home?
Do you have your house keys? If not, how can this be solved?
Does your home need to be cleaned before you get out of hospital?
Are you allowed to drive when you are discharged?
What is an estimate of recovery time or time for any wounds to heal?
Do you have any other concerns that need to be raised before you are discharged from hospital?
Have you collected or packed any of your personal items you had in hospital with you?

Age-related Conditions



Older people are generally living longer and healthier lives than those in previous generations, but many older people live with chronic health conditions. 80% of older Australians (aged 65 and over) have at least one chronic health condition – and 28% have three or more chronic conditions.*

In New Zealand, 24% of older people experience two or more physical or mental health conditions.**

A chronic condition is a health condition or disease that may develop gradually, is likely to be long-lasting, and will result in deterioration over time. Chronic diseases tend to occur in older adults and can require ongoing management to control symptoms or prevent complications. Whilst the condition(s) cannot be cured, they can be controlled to help maintain quality of life.

The most common types of chronic disease in older people are:

- Heart disease and stroke
- Dementia
- Parkinson's
- Diabetes

- Arthritis
- Cancer
- Vision and hearing loss
- Conditions with a terminal diagnosis

In this next section we'll look at each of these chronic conditions, explain what they are, the symptoms, how you can live well with them and where you can get support.

^{*} Australian Institute of Health and Welfare

^{**} Manatū Hauora - Ministry of Health, NZ

Heart Disease & Stroke

Cardiovascular disease

Cardiovascular disease (CVD) is an umbrella term for conditions that affect your heart or blood vessels. It includes coronary heart disease, heart attack, stroke and heart failure.

It is the world's leading single cause of death, accounting for 1 in 4 deaths in Australia and 1 in 3 deaths in New Zealand*. The prevalence of CVD increases with age, however, the number of people with CVD has decreased over time due to research and improved knowledge of risk factors, medicines and interventions.

Heart disease

Heart disease is a range of conditions that affect the heart and blood vessels, including heart attacks and irregular heartbeats (arrhythmias).

Symptoms

The symptoms of heart disease can vary depending on the specific condition and its severity. However, some common symptoms may include chest pain or discomfort (Angina), shortness of breath, fatigue, heart palpitations: swelling in the legs, ankles, feet, or abdomen, dizziness or light-headedness, nausea, sweating and coughing.

It's important to note that not everyone with heart disease will experience all of these symptoms. If you have any concerns, it's important to speak to a doctor.

Risk factors

Several preventable risk factors increase the likelihood of heart disease. Lifestyle changes can effectively manage these risks and promote heart health, enabling a fulfilling life. Here are some key risk factors:

- Older age
- Smoking
- Diet (eg. high in fat, salt, sugar and cholesterol)
- Levels of exercise or inactivity
- General health (eg. weight, blood pressure, blood sugar levels and cholesterol)
- Mental health conditions (eg. stress or depression)
- Family history and background.

Stroke

A stroke happens when blood flow to the brain is interrupted, often by a blocked or burst artery. This deprivation of oxygen and nutrients causes brain cell death and can result in permanent brain damage. They can happen to anyone at any age, but men are at greater risk, and as you age your risk increases. There are two main types of stroke:

- **Ischaemic stroke.** This is the most common type of stroke, particularly in older people. It occurs when a clot blocks an artery in the brain.
- Haemorrhagic stroke. This occurs when an artery in the brain bursts and leaks blood into the brain (cerebral haemorrhage). This means parts of the brain are deprived of blood and a stroke occurs.

Symptoms

The Stroke Foundation Australia recommends thinking F.A.S.T. to identify the most common signs of a stroke:

- Face. Check their face. Has their mouth dropped?
- Arms. Can they lift both arms?
- **Speech.** Is their speech slurred? Do they understand you?
- Time. Is critical. Immediately call **000** in Australia or **111** in New Zealand if you have any concerns. The key is to act FAST and to call an ambulance on 000 in Australia or 111 in New Zealand immediately if you see any of these signs. A stroke is always a medical emergency. The longer a stroke remains untreated, the greater the chance of stroke-related brain damage



Other signs may occur alone or in combination and include dizziness, loss of balance or an unexplained fall, loss of vision, sudden blurring or decreased vision in one or both eyes, headache – usually severe and abrupt onset – or unexplained changes in the pattern of headaches, or difficulty swallowing.

Sometimes the signs disappear within a few minutes - this may be a Transient Ischaemic Attack (TIA). After a TIA, your risk of stroke is higher and it is a warning sign that you may experience a stroke in the future.

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Risk factors

High blood pressure is the key risk factor for stroke. There are no immediate symptoms so it's a hidden risk. The only way you know is to get checked regularly by a GP or Pharmacist.

Other risk factors for stroke are very similar to those of heart disease. People who smoke, have high cholesterol or blood sugars, are overweight or obese, or have heart disease are most at risk.

Living well to reduce risk factors

Consider making the following adjustments to reduce your risk of developing heart disease or having a stroke:

- Maintain a healthy diet; reduce intake of unhealthy fats, salt and added sugar, and try to eat plenty of wholegrains, fibre, vitamins, antioxidants and healthy fats (fish, seeds eggs etc).
- Exercise regularly aim for at least 30 minutes several times a week
- Reduce alcohol consumption
- Quit smoking
- Know your family history

Having a regular Heart Health Check with your GP will help you better understand your risk of a heart attack or stroke. Managing your risks and living a healthy lifestyle can help - with research showing more than 80% of strokes can be prevented.**

Support Organisations

There are a number of organisations that can provide information or support for heart disease and strokes:

In Australia:

- Australian Heart Foundation. Visit heartfoundation.org.au or call 13 11
 12. They also have offices in every state and territory.
- Australian Stroke Foundation. Visit strokefoundation.org.au or contact their StrokeLine on 1800 787 653. For additional resources to help recovery, visit enable me at enableme.org.au.

In New Zealand:

- Heart Foundation New Zealand. Visit heartfoundation.org.nz or call 0800 863 375 or (09) 571 9191.
- **Stroke Foundation New Zealand.** Has 29 Community Stroke Advisors (CSAs) providing free services to stroke survivors, and their family / whānau and carers. Visit stroke.org.nz or call 0800 STROKE (0800 78 76 53).

Dementia

Dementia describes a collection of symptoms caused by disorders affecting the brain. It is a progressive disease and the effects vary from person to person, but generally, it affects mood, memory, thinking ability, personality and behaviour.

Over 420,000 people in Australia and 70,000 people in New Zealand are living with dementia*. Dementia is the single largest cause of disability in people over 65 and one in four people over the age of 85 has dementia.

However, dementia is not a normal part of the ageing process and, whilst age is a risk factor, it can affect adults of all ages. Younger onset dementia, or early onset dementia, affects people under the age of 65.

Types of dementia

The most common forms of dementia are:

- Alzheimer's Disease. The most common form and the most widely known dementia. It accounts for between 50-70% of all diagnoses.
- Vascular dementia. Is the second most common form of dementia, accounting for up to 20% of all diagnoses. It is the broad term for dementia, associated with problems arising from a lack of circulation of blood and oxygen to the brain.
- Frontotemporal dementia
- Lewy body dementia
- Other dementias

Symptoms of dementia

Dementia symptoms are progressive and everyone with dementia will experience different symptoms, but the most common symptoms include:

- Memory loss and misplacing things
- Difficulty performing familiar tasks
- Confusion about time and place
- Problems with language
- Changes in personality or behaviour
- Problems with concentration, planning or organising
- Trouble with images or spatial information.

Living well with dementia

There is no cure for dementia. However, with the right care and support, you or your loved one can live as well as possible for as long as possible. Medications currently cannot stop, slow down or reverse dementia however they can help with some of the symptoms.

^{**} Stroke Foundation Australia

^{*} Australian Institute of Health and Welfare (AIHW) and Age Concern New Zealand

Nutrition. Changes in eating habits, changes in taste, loss of appetite or forgetting to eat, difficulty chewing and swallowing, confusion about how to eat or experiencing weight gain or loss can occur. Consider offering light meals, provide encouragement whilst eating, sharing food, ensuring the food contrasts against the plate and providing food that can be eaten with fingers.

Sleep. Changes in daily sleep routines are common and some people may experience sundowning in the evening which may cause confusion, disorientation, agitation and anxiety. To combat this, create a sleep-friendly bedroom which is quiet, dark and at a comfortable temperature, develop a relaxing routine before bed, such as playing soothing music, encouraging a warm bath or drinking herbal tea.

Reminiscence. Can be a beneficial communication therapy for people with dementia. By capturing the life journey of someone with dementia you will be able to build a deeper relationship with them.

Try reminiscing in the following ways:

- Visually looking through family photo albums
- Auditory listening or singing to familiar tunes
- Smell or taste smelling favourite flowers or foods
- Touch touching objects and different textures



Supporting changes in behaviour

Caring for a person with dementia can be challenging and requires patience and flexibility. Changes in behaviour can be distressing. Try to remember that the behaviour is not deliberate and may be a result of changes taking place in the brain.

The more common changes in behaviour presented by people with dementia can include apathy and/or depression, wandering, refusal, aggression, repetition, sexually inappropriate behaviour and false accusations. You can use these techniques to manage changes in behaviour:

- Offer simple choices
- Distract or divert attention to something that is more positive
- Engage in meaningful activities to create a sense of purpose and accomplishment Eg. activities they enjoy such as walking, gardening, watching sport on TV etc.
- Reminisce look at photographs together, or recall a story from their past.

Communication

Losing the ability to communicate can be frustrating for everyone. As the disease progresses, the ability to communicate may gradually reduce.

Use a combination of verbal and non-verbal methods to effectively communicate with someone with dementia:

Non-verbal communication

Understanding behaviours and body language:

- Be aware of your body language and attitude
 sit openly and lean towards the person
- Limit distractions and noise
- Maintain eye contact and try to speak to them at eye level.

Verbal communication

Consider the following:

- Provide simple choices and ask one question at a time, use visual cues and prompts
- Never argue or raise your voice - speak clearly and slowly
- Listen with your ears, eyes and heart.

Support organisations

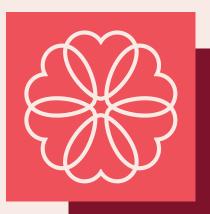
There are a number of organisations that can provide information and support for people living with dementia and their family members or carers:

In Australia:

- Dementia Australia. Provides support services, education and information. Visitdementia.org.au or call their National Dementia Helpline on 1800 100 500.
- Dementia Support Australia. Provides information and support, as well as hosting their Dementia Behaviour Management Advisory Service (DBMAS) to support family carers and professionals responding to changed behaviours. Visit dementia.com.au or call 1800 699 799.

In New Zealand:

- Dementia New Zealand. Offers information, resources and community support for family and friends. Visit dementia.nz or call 0800 433 636.
- Alzheimer's New Zealand. Provides information and education plus host support groups and day programmes for people affected by dementia.
 Visit Alzheimers.org.nz or call 0800 004 001.



LEARN MORE

Learn more about dementia with our 'Dementia Care - A Guide for Carers & Families' booklet.

This is available on our websites dovida.com.au | dovida.co.nz, or call your local Dovida team for a physical copy.



Parkinson's Disease

Parkinson's is a progressive neurological condition that affects an area of the brain that controls movement, as such, it is known as a 'movement disorder'. Movement problems have been linked to a significant reduction in dopamine which affects the area of the brain controlling movement, resulting in slow or abnormal movements.

Parkinson's is the second most common neurological disease in Australia after dementia, affecting nearly 220,000 people and over 12,000 people in New Zealand. It affects an estimated 10 million people worldwide*.

A diagnosis can occur at any age, mostly affecting people over the age of 65. It can also affect younger people, with 20% of diagnoses being in people under 50 years old. This is called Young Onset Parkinson's Disease (YOPD).

While reduced dopamine levels are linked to Parkinson's, the exact cause or trigger of Parkinson's development is still unknown and there is currently no known cure for the condition.

* Parkinson's Australia. Parkinson's New Zealand

Symptoms of Parkinson's

The most recognised motor symptoms of Parkinson's, aka symptoms that affect movement and balance, include:

- Tremor
- Muscle stiffness
- Slowness of movement
- Poor balance
- Changes to the way they walk (gait)

Non-motor symptoms include:

- Mental health conditions including depression and anxiety
- Lost sense of taste and smell
- Constipation
- Numbness or neuropathy
- Voice Changes
- Cognitive changes which may impact concentration, decision making, and other body functions such as blood pressure and the ability to communicate
- Swallowing and chewing problems

Depression is very common in people with Parkinson's. Symptoms include a lack of energy, a feeling of hopelessness or sadness, tiredness, poor concentration and forgetfulness and a change in appetite. About 40% of people with Parkinson's will experience anxiety – a feeling of unease, worry or fear, and may be characterised by breathlessness, and panic attacks.

Living well with Parkinson's

Adjusting to Parkinson's can take time, but understanding more about the condition can help. Many people live well with Parkinson's by embracing healthy habits, such as receiving treatment from specialists, eating nutritiously and regularly exercising.

Medication. Can help to control the symptoms of Parkinson's and can slow its progress, helping to maintain quality of life. For some, Deep Brain Stimulation (DBS) may be recommended to manage some of the symptoms or suppress overactive brain activity resulting from the condition.

Exercise. Next to medication, the most important treatment for Parkinson's is exercise. This can help to improve mental and physical wellbeing as well as balance, flexibility, strength and coordination which enables the continuation of everyday tasks. Walking is very beneficial, and it can be undertaken gently or more intensely. It increases heart rate, improves muscle tone and helps maintain mobility.

Consider other low-intensity activities including tai chi, yoga, pilates, and regular stretching. Speak with your healthcare professional before taking on any physical activities.

Nutrition. Eating a balanced diet can help to ease some of the symptoms eg. weight loss, reduced bone density and constipation. Consider eating a brainhealthy diet, a variety of nuts (eg. pistachios and cashews) and foods high in antioxidants (such as blueberries and leafy greens).

Specialist support. People with a diagnosis may be supported by many different specialists throughout their Parkinson's journey. These may include Movement Disorder Neurologists, Occupational Therapists, Physiotherapists, Dietitians and Speech Pathologists. Getting treatment from a specialist when symptoms arise will achieve better results than when treatment is delayed.

Support organisations

There are a number of organisations that can provide information or support for people living with Parkinson's disease and their loved ones:

In Australia:

 Parkinson's Australia. Provides information and guidance for people living with Parkinson's, their families and carers, including hosting support groups. Visit parkinsons.org.au or call 1800 644 189.

In New Zealand:

 Parkinson's New Zealand. Provides information, education and support for people with Parkinson's and their families. Red Tulip members are invited to local events and activities including exercise classes and social get-togethers. Visit parkinsons.org.nz or call 0800 473 4636.

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Diabetes

Diabetes is a serious, chronic condition where the pancreas can't produce enough insulin or the body can't use it effectively, leading to high blood sugar levels (hyperglycemia). This can damage blood vessels and nerves, causing various health conditions like heart, kidney, eye, and foot damage.

Diabetes is the fastest-growing chronic condition in the world, affecting more than 1.5 million people in Australia and 310,000 people in New Zealand*. While there is currently no cure, you can live a full life by learning about the condition and effectively managing it.

Type 1 diabetes. Is an autoimmune condition where the body's immune system destroys the cells in the pancreas which produce insulin. It's not known what triggers this autoimmune reaction, but environmental factors are believed to contribute. Currently, there is no cure for Type 1 diabetes, and it's lifelong – managed by insulin injections. It most often occurs in childhood but can occur at any age.

Type 2 diabetes. Accounts for 85-90% of all diabetes cases and occurs when the body becomes resistant to the normal effects of insulin or the pancreas doesn't produce enough insulin. For some, there are strong genetic and family-related (non-modifiable) risk factors, but generally, lifestyle changes can slow or stop the progression of the condition. Type 2 is the most common type of diabetes in older people, affecting, one in six people over 65 years, and nearly a fifth of people aged over 85 years.

Symptoms of diabetes

General symptoms of diabetes include:

- Being excessively thirsty
- Passing more urine
- Feeling tired and lethargic
- Always feeling hungry
- Having cuts that heal slowly
- Itching, skin infections

- Blurred vision
- Gradually putting on weight
- Mood swings
- Headaches and feeling dizzy
- Leg cramps

Type 1 diabetes symptoms are often sudden and can be life-threatening so it's usually diagnosed within hours or days. Type 2 diabetes symptoms may be less noticeable for older people and may even go unnoticed or may be misinterpreted as part of the normal ageing process. By the time symptoms are noticed, complications of diabetes may already be present.

Diabetes can only be diagnosed with a laboratory blood test ordered by your doctor.

Living well with diabetes

For people with diabetes, you can continue to live well by embracing healthy habits:

Health checks. Daily diabetes management may involve individual blood glucose levels (BGL) tests. Your diabetes health professional will help you determine your BGL target and how often you need to test.

Ensure you have regular health checks to support management and treatment plans:

- **Foot checks.** Diabetes can damage the nerves and blood vessels in your feet, check them on a daily basis for changes to the skin, ulcers, calluses, infections or nerve damage.
- Eye tests. Diabetes can cause complications such as cataracts, glaucoma and retinopathy, that can lead to blindness if left unchecked.
- Kidney performance (through a urine test) as damage can happen to them over time.

Healthy diet and weight loss. Helps to keep your blood glucose levels within your target range, so you need to be aware of what, when and how much you eat every day. Try to eat less processed or packaged foods, eat regular meals, follow a low Glycaemic Index (GI) diet, and if you take insulin or diabetes tablets, check with your healthcare team if you need to snack between meals. Speak to an accredited Dietitian for individual recommendations.

Regular Exercise. Stay active with at least 30 minutes of moderate-intensity activity daily. Consider walking, swimming, cycling, dancing and mowing the lawn as part of this. It's important to monitor blood glucose levels before, during and after exercise. Speak to your doctor before starting an exercise plan.

Support organisations

If you or a loved one are living with diabetes, there are organisations that can provide information and support.

Diabetes Australia and Diabetes New Zealand have comprehensive websites with detailed information about diabetes, how to manage it and live well day-to-day with the condition, including guidance about driving.

- Diabetes Australia visit diabetesaustralia.com.au or call 1800 177 055.
- Diabetes New Zealand visit diabetes.org.nz or call 0800 342 238.

Your Life, Your Way

Age-related Conditions

^{*} Diabetes Australia and Diabetes New Zealand

Arthritis

Arthritis is a term used for more than 100 conditions that affect the joints. These conditions cause damage to the joints, resulting in pain, swelling and stiffness which leads to reduced mobility and joint motion. It can affect every joint in the body and is a chronic condition with no cure.

Anyone can get arthritis, regardless of background and age. 3.6 million Australians and more than 670,000 New Zealanders have a form of arthritis*. It's commonly thought to be part of getting older, but, two out of every three people diagnosed are aged between 15 and 60.

The most common forms of arthritis are:

Osteoarthritis (OA). Known as the 'wear and tear' condition, it is the most common form of arthritis and affects the whole joint including bone, cartilage, ligaments and muscles.

Rheumatoid arthritis (RA). Is an autoimmune disease where your immune system attacks the lining of joints, causing pain, joint damage and swelling. It usually affects smaller joints such as the hands and feet, but it can also affect larger joints such as the hips and knees.

Other forms of arthritis include:

Gout. Is a common and very painful condition caused by the formation of uric acid crystals around the joint, causing inflammation, pain and swelling. It's often a result of the kidneys not effectively removing waste products (eg.uric acid) from the body.

Ankylosing spondylitis (AS). Is a condition that mainly affects the spine. The joints of the neck, back and pelvis become inflamed, causing pain and stiffness.

Symptoms of arthritis

The different types of arthritis affect people in different ways, but the most common symptoms include:

- Pain, stiffness or reduced joint movement
- Swelling in a joint
- Redness and warmth in a joint
- Tiredness and feeling unwell

In osteoarthritis, symptoms tend to come on slowly, over months or even years. The most common symptoms are pain and stiffness of the joints.

In Rheumatoid Arthritis, there may be periods of increased disease activity or 'flares', alternating with periods of relative remission (reduced activity). This causes stiffness in the joints, especially in the morning or after inactivity and may affect the same joints on both sides of the body.

Living well with arthritis

Although arthritis can't be cured, many types can be easily and effectively controlled. Early diagnosis and the right treatment can limit the effects of arthritis on your life and help you stay active and independent.

Because arthritis affects people in different ways, there's no single remedy and treatment must be tailored to each person. It can take time to find the best combination of medications, treatments and lifestyle modifications to help you cope with pain and live well with your condition, so it's a good idea to see your GP as early as possible to get a proper diagnosis.



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Here are a few ways to live well with arthritis:

- Be informed. Understand your type of arthritis, learn about the treatment options available and work with your healthcare team
- Manage pain. Use medications, topical creams and gels, heat or cold packs
- Stay active. Exercise keeps your joints moving and strengthens muscles
- Healthy eating. Keep to a healthy weight and eat a well-balanced diet
- Apply heat or cold. Heat can ease pain whilst cold may reduce the sensation of pain and can reduce swelling.
- Consider relaxation techniques. Such as acupuncture, massage, yoga
- Manage tiredness. Learn to balance rest and your normal activities don't over do it!
- Utilise assistive devices. Use assistive devices to make everyday tasks easier

Support organisations

If you or a loved one are expierencing arthritis, there are organisations that can provide information and support.

In Australia:

 Arthritis Australia - provides information about arthritis and ways to manage your condition. There also have state and territory offices, courses, education seminars, support groups, and exercise classes. Visit arthritisaustralia.com.au or call the Arthritis Infoline on 1800 011 041.

In New Zealand:

 Arthritis New Zealand - runs webinars and courses, online support groups, and operates Arthritis Assist to provide support for people living with arthritis. Visit arthritis.org.nz or call 0800 663 463.

^{*} Arthritis Australia and Arthritis New Zealand



Vision & Hearing Changes

As you age, it's common to experience changes in your physical health, including vision and hearing changes. The changes tend to happen gradually, over several years, but it's important to manage these changes and take steps to protect your vision and hearing as much as possible.

Vision

Eye conditions such as macular degeneration, glaucoma and cataracts, can impair your vision and increase your risk of falls, as you may not spot hazards as easily.

Age-Related Macular Degeneration (AMD). Is a chronic, painless eye disease associated with ageing that causes you to lose central vision. It can result in dark patches and difficulty seeing faces clearly, and can affect the ability to read, drive and watch TV.

Glaucoma. Is the name given to a group of eye diseases where vision is lost due to damage to the optic nerve. Glaucoma can be treated to prevent or delay further vision damage.

Cataracts. A cataract is when the lens of your eye becomes cloudy, affecting your ability to see. They develop slowly, are common in older people, but can usually be successfully treated with a short operation.

The main symptoms to be aware of include:

- Clouding or opaque vision
- Distorted or double vision
- Eye pain, discomfort or redness
- Reduced ability to adjust to light changes
- Decrease in colour vision

If you notice any changes to your eyesight, seek help from a health professional.

Maintaining good eye health

These tips will help you to protect your vision:

- Maintain regular eye checks. Ensure these tests include a check of the macular and eye pressure. If you have cataracts, arrange to have them removed as soon as recommended.
- A balanced diet (with fresh fruit and vegetables, lean meat, oily fish, legumes, nuts and seeds) provides essential antioxidants that support good eye health. Good eating habits combined with regular physical activity helps to prevent diabetes, which is a significant cause of vision loss.
- Wear protective eyewear. For example, sunglasses protect against UV light, and wearing prescription glasses help prevent further vision loss.

Support organisations

There are a number of organisations that can provide information or advice about vision changes:

- Vision Australia. Visit visionaustralia.org or call 1300 84 74 66.
- Blind Low Vision NZ. Visit blindlowvision.org.nz or call on 0800 24 33 33.

Hearing

Because hearing changes slowly with age, it's not always easy to spot the signs and it can be friends and family who notice it first. Hearing loss occurs when your ability to hear is reduced. It can be caused by many factors, but age and exposure to loud noise are the two most common causes.

Indications you might be developing hearing loss:

- Asking people to repeat themselves, or struggling to follow group conversations
- Family or friends saying the TV or radio is too loud
- · Hearing ringing or buzzing noises in your ears
- Difficulty hearing in noisy places such as shopping centres
- Missing everyday sounds eg. a door knock or telephone ring,
- Loud noises cause you discomfort

Assistive devices

Getting your hearing checked is painless, easy and an initial check can take less than 15 minutes. If you have hearing loss, your clinician will make a recommendation based on your hearing needs and will discuss a range of solutions that might benefit you. These can include:

- Hearing aids
- Assistive listening solutions, eg. alerting devices or personal amplifiers
- Implantable devices such as cochlear implants
- Accessories such as TV transmitters or remote microphones

Maintaining hearing

Social interaction is crucial for healthy ageing. If you are experiencing hearing loss, and finding it more difficult to hear others, this may result in withdrawing from social activities. This can have consequences on mental health such as increasing feelings of loneliness, isolation and can lead to conditions such as depression. In addition, hearing loss can increase the risk of developing dementia and poses other health risks such as not hearing warning sounds like smoke alarms.

Support organisations

There are a number of organisations that can provide information about hearing loss:

In Australia:

 Hearing Australia. Offers free 15-minute hearing checks for adults onboard their Hearing Australia buses and at local branches. Visit hearing. com.au or call 134 432.

In New Zealand:

 Hearing New Zealand. Branches across the country offering free hearing checks. Visit www.hearing.org.nz or call 0800 233 445.



Cancer

Over time, the cells in our body become damaged and cancer develops when damage in the same cell builds up. This results in a higher risk of developing cancer as we age. About 60% of cancers occur in people aged 65 or older* and the most commonly diagnosed cancers in older people are breast, prostate, lung, bowel and skin cancers.

Screening

Some types of cancer can be detected before any symptoms appear, so it's important to have regular checks especially for breast, skin, bowel and prostate cancers. By detecting cancer at an early stage, there's a better chance that treatment will be successful.

Reducing the risks:

At least one in three cancer cases could be prevented** and the number of cancer diagnoses could be reduced significantly by choosing a cancer-smart lifestyle.

Following these simple steps will help:

- Be sun smart
- Maintain a balanced diet and healthy weight
- Stay active
- Quit smoking

- Limit alcohol consumption
- Be aware of family history
- Be aware of exposure to cancercausing agents (eg. asbestos and tobacco smoke)

Always speak to your doctor about any concerns, or changes in your health.

Support organisations

There are a number of organisations that can provide information or support for people living with cancer and their loved ones:

In Australia:

- Australian Government Cancer Australia. For information about national screening programs, visit canceraustralia.gov.au or call 1800 624 973.
- Cancer Council. Information on different types of cancer, causes and preventions. Visit cancer.org.au or call 13 11 20.

In New Zealand:

 Cancer Society NZ. Information on reducing your risks and how to live with cancer. Visit cancer.org.nz or call 0800 467 345.

^{*} Roswell Park Comprehensive Cancer Centre ** Australian Government Cancer Australia

Supporting Conditions with A Terminal Diagnosis

When someone is living with a life-limiting or terminal illness, palliative care can help manage symptoms and maintain quality of life. It can also provide information about the journey ahead and can support family and friends throughout the end-of-life journey.

Palliative care can be received immediately after a life-limiting illness diagnosis alongside other treatments such as chemotherapy, or it can be received when a cure is no longer possible. It can be provided in a hospice, hospital, residential aged care facility or at home. Palliative care extends beyond medical care and supports the physical, psychological, social, emotional and spiritual aspects of end-of-life care for you, your family, friends and carers.

Palliative care services may include:

- Managing symptoms including pain relief and medication
- Advice about nutrition, mobility, sleeping, equipment or aids
- Assistance for families including referrals to respite services
- Information about other services
- eg. home help and financial support
- Support for emotional, social and spiritual concerns
- Counselling, bereavement care and grief support

Work with your support team

Palliative care services are provided by a multidisciplinary support team that may include your local General Practitioner, Allied Health Professionals (Occupational Therapists, Physiotherapists, Speech Pathologists and Dieticians) and Medical Specialists. Palliative Care Nurses can visit you regularly at home, helping you manage your symptoms and plan/coordinate your clinical care needs with your support team.

Care at home

If you want to spend your last days at home, it's important to put plans in place to ensure you receive the care and support you need to make your end of life as comfortable as possible.

Home care providers can support with the activities of daily living, including showering, dressing, continence care, meal preparation, light housekeeping and laundry. They can also provide companionship for those living alone, as well as respite services for family carers. Dovida caregivers have received palliative care training to help individuals remain comfortable at home.

To receive palliative care at home, you may also need to consider mobility aids and modifications to your home. An Occupational Therapist can advise about this.

Support organisations

There are a number of organisations that can help you navigate and understand what palliative care options are available:

In Australia:

 Palliative Care Australia. Provides information about how to access palliative care. Visit palliativecare.org.au or call 02 6232 0700.

In New Zealand:

 Hospice New Zealand. Ensure people needing end-of-life hospice care are well supported and provide information about the services are available. Visit hospice.org.nz or call 04 381 0266.



Being Prepared

Protecting Yourself

The United Nations Principles for Older Persons states: "Older persons should be able to live in dignity and security and be free of exploitation and physical or mental abuse."

In this section, we look at ways you can protect yourself from scams and elder abuse and important things you should consider as you plan for the future.

'Knowledge is power' when it comes to protecting yourself from scams and elder abuse. Knowing what to look out for, what to do and who to reach out to if you need help, is a good start.

Scams

Unfortunately, scams are becoming increasingly common, and more sophisticated. Many scams will target older people, seeing them as potentially more vulnerable, and/or potentially having more money or accumulated wealth than younger people.

Scammers may approach you directly in person, on the phone, via text, or email, approach you on social media or create fake websites to look like well-known brands such as a bank.

These are some of the most common types of scams targeting older people:

Investment. The most common type of scams. They present as "high return/low risk" opportunities and involve promises of big payouts, quick money, or guaranteed returns.

Dating. Scammers will form relationships to extract money, gifts, or personal details.

Unexpected money. This may be in the form of prizes, lottery wins, rebates or inheritance. They will try to convince you that you are owed or entitled to money you didn't expect, or from a competition you didn't enter and will usually ask you to pay a fee upfront, gaining access to your details.

Door to door. Be wary of people cold calling at your home and offering maintenance services such as tree-lopping or roofing, then billing you for additional work that you didn't agree to. They may try to pressure you 'on the spot' or visit you again after you've said no.

Consider the phrase 'if it seems too good to be true, it probably is', as it's highly likely to be a scam.

Avoiding scams:

- Hang up on suspicious phone calls, even if they say they are from big companies. Call back using a number from a trusted source or the company's website.
- Never share passwords and personal information. Anyone who asks you for your password is probably scamming you.
- Be a sceptic when reviewing email attachments, links and suspicious texts. Don't click any links and delete the message.
- Don't send money or personal information to people from unusual locations or asking for payment in an unusual way eg. preloaded debit cards.

Support organisations

In Australia:

 Australian Government's National Anti-Scam Centre and Scamwatch lots of information on scams, including their Little Black Book of Scams. Visit https://www.scamwatch.gov.au/

In New Zealand:

 New Zealand Police - visit police.govt.nz-use-105 or call 105 to report a scam.

Remember the best way to protect yourself is through awareness and education.

Elder abuse

Elder abuse can take various forms:

- Physical. An act that causes physical pain or injury eg. unexplained bruises or malnutrition.
- Emotional or psychological. Causing emotional pain, anguish or distress eg. frightening, humiliating, or harassing a person, stopping a person from seeing family or friends.
- Financial. Theft or misuse of money, assets or property eg. forcing a person to change their will, selling someone's belongings without permission.
- Sexual. Any behaviour of a sexual nature without consent eg. making unwanted sexual approaches or behaving indecently.
- Neglect. Failure to meet someone's basic needs like food, clothing, warmth or medical care eg. untreated medical problems. It can be intentional or unintentional.

Signs of elder abuse may include:

- malnutrition and dehydration
- poor personal hygiene or dirty clothes
- untreated medical problems
- fear, depression or low mood, confusion, feeling of

- helplessness
- unexplained and frequent injuries such as broken bones
- missing belongings
- not having money for basics such as food, clothing, and bills

Preventing abuse risk

Being educated and informed about elder abuse can mitigate the risk of it happening. It's also important to ensure that older people and their carers are empowered to recognise and report potential abuse. Try to remain socially connected to others as this can help provide a safety net for older people, as those who are more lonely and socially isolated experience higher rates of elder abuse.

Support organisations

If you suspect someone is being abused, listen to them and take their concerns seriously, even if they are living with conditions such as dementia. Some older people try to hide abuse because they feel ashamed or because they fear negative repercussions, but if you are experiencing elder abuse, or suspect that an older person is being abused, it's important to know that help is available.

In Australia:

- Australian Government Elder Abuse Phone Line. 1800 ELDERHelp (1800 353 374).
- Seniors Rights Service. Advocating for older people.
 Visit seniorsrightsservice.org.au or call 02 9281 3600.
- Elder Abuse Action Australia (EAAA). Supporting the mistreatment of older Australians. Visit eaaa.org.au or call 1800 ELDERHelp (1800 353 374).
- Older People's Advocacy Network (OPAN). Support for older people receiving government-funded aged care. Visit opan.org.au or call 1800 700 600.

In New Zealand:

- **Age Concern NZ.** Operates Elder Abuse Services across the country. Visit ageconcern.org.nz or call 0800 32 668 65.
- NZ Government Office for Seniors. Visit officeforseniors.govt.nz or call 0800 32 668 65



Planning For The Future

Like most important decisions in life, preparation is key. Planning ahead allows you to have a say in how you want your affairs handled, who you want involved and can ensure your wishes are followed.

Recording these decisions in a legal document can avoid confusion about your wishes and supports decision making if communication is compromised or no longer possible. Whilst difficult, having open and honest conversations about your end of life plans will make the journey easier for everyone involved.

There are several different health and financial elements to consider as part of this:

- Making a Will. This legal document details how your assets and belongings will be distributed after death. Ensure this is easily accessible to others..
- Securing a Power of Attorney (POA) or Enduring Power of Attorney (EPOA). Someone trusted, 'a guardian', is appointed to manage your financial and/or medical health affairs if decision-making is no longer possible eg. after a medical diagnosis like dementia which may affect ability to make decisions. These are known as Medical Treatment Decision Makers in Victoria and forms part of your Advance Personal Plan in the Northern Territory.
- Creating an Advance Health/Care Directive (AHD). This outlines
 any future medical treatment should someone no longer have the
 capacity to manage their own decisions. This can help you record
 whether you would like life-sustaining measures like resuscitation,
 following a terminal diagnosis or life-changing injury has been
 sustained. In Queensland, this may be known as a Statement of
 Choices.
- Type of care. What will best support your needs and will this be funded privately or through government-subsided funding? Consider whether in-home care, residential aged care, or retirement villages would be preferred.
- Developing an Advance Care Plan. Outlines end-of-life care including health care and medical treatment plans, substitute decision-making responsibility and preferred location to die eg. at home or in hospital.
- Outlining funeral plans. Consider specific funeral wishes eg. burial
 or cremation (and what should happen to any ashes), preferred
 service type and location, any specific religious or cultural elements
 to be included and payment etc.
- Charitable giving and philanthropy. Consider whether donations
 to any charities or philanthropic causes are important this can be
 tax effective and offers peace of mind that this gift will have a lasting
 impact on others.

Remember, having open, honest conversations about your end of life will make the journey easier for you and your loved ones in the long run.

Notes:	
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	A wonderful, professional, empathetic
	organisation. The care and attention given
	to my mother is beyond appreciated. All of
	the staff are attentive and thoughtful and I
	am beyond blessed with my mum's
	wellbeing. Cannot recommend more highly.
	 Kathryn, Clients Daughter



Together, we create care that centres around you.

Dovida recognises that your uniqueness is key to providing the highest quality of care.
With you at the centre of everything we do, we help you live the life you want in the comfort of your own home for as long as possible.

Together with you, your family, and multidisciplinary team, we create a Circle of Care that centres around you. Because we don't just want to improve your day – we want to empower you to live your life, your way.

We provide a range of services including everyday companionship, domestic assistance, personal care, meal preparation, medication reminders, and transport to appointments, shopping, and social outings. Care is available from two hours to 24 hours a day and includes dementia care and palliative care.