



THE UNIVERSITY OF
MELBOURNE

Fighting Fractures and Falls with Food: From Science to Practice

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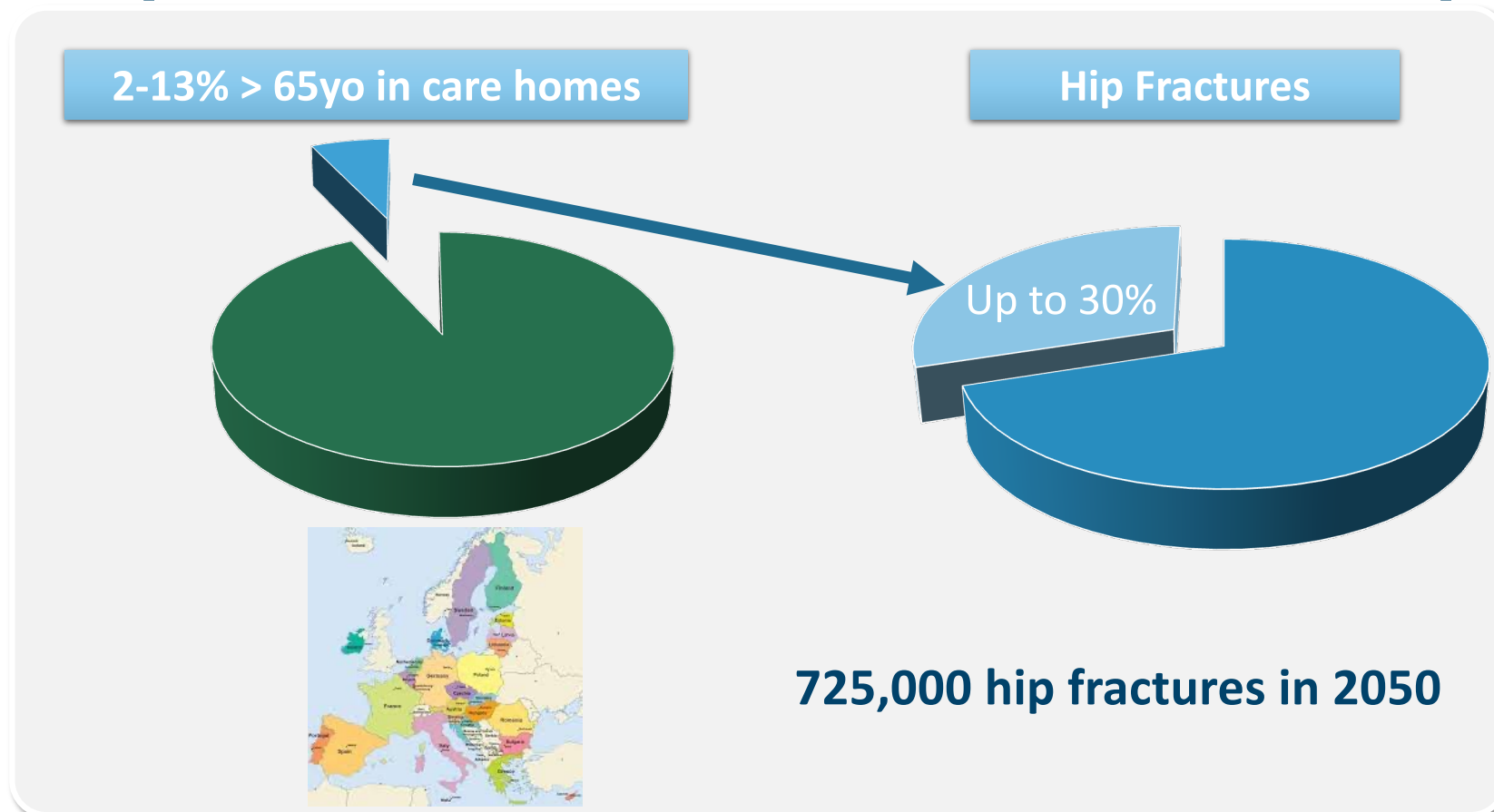
Australian Institute of Musculoskeletal Science

Disclosures

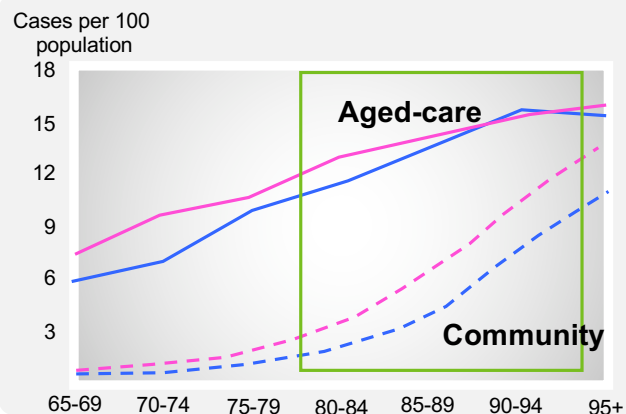
- Abbott: Advisory board / lecture fees
- UK Dairy Council: Expert group-healthy aging
- European Milk Forum: Travel support / lecture fees
- Nestle Health Sciences: Lecture fees
- Israel Milk Board: Lecture fees
- Research support

AUSTIN MEDICAL
RESEARCH FOUNDATION

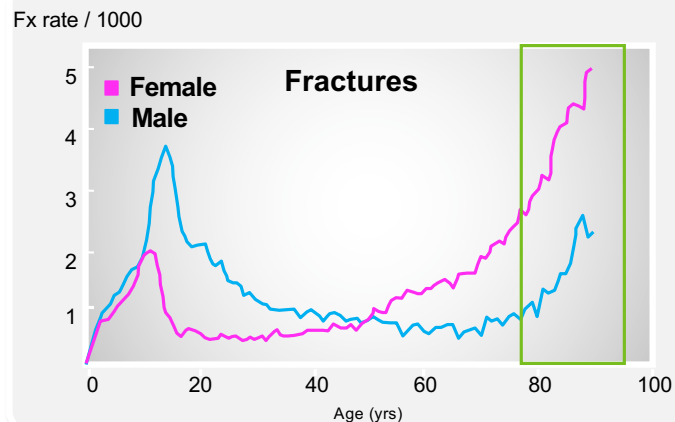
Hip Fracture Burden From Care Homes in Europe



Falls & Fractures in Older Adults



- Falls rates **5 x higher** in aged-care
- **7-20%** of people aged 70+ years fall.
- **30-60%** of older adults in aged care fall.



- **Up to 30%** of hip fractures from aged-care
- Hip fractures cost
 - € 24,000 to health system
 - € 2,700 to the aged care home

Why Improve Nutrition in Aged Care Residents?

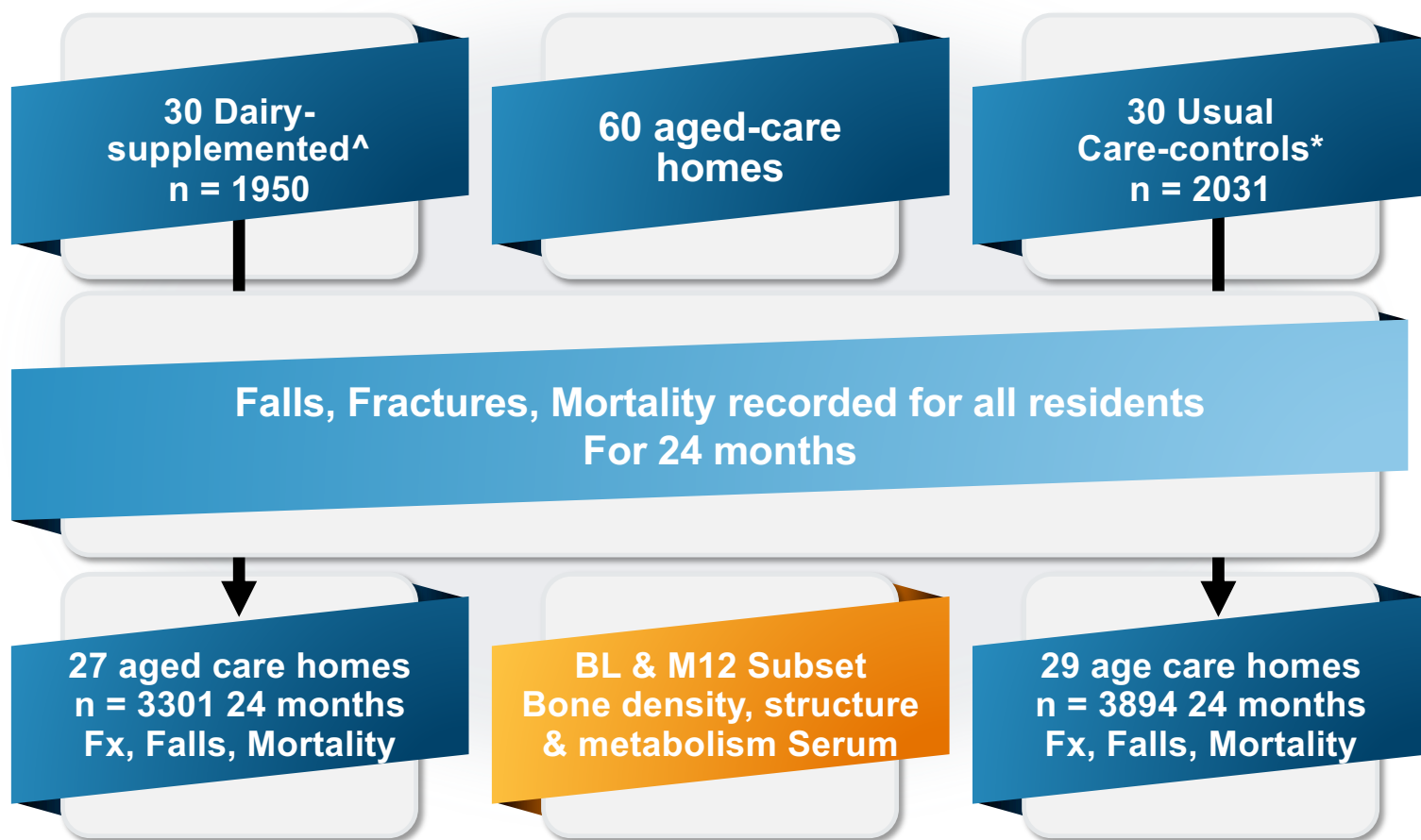
- Source of 30% of hip fractures in the community.
- Falls rates are 5 times higher than community peers.
- High rates of malnutrition.
- Calcium intake 635 mg/day
- Protein intake 0.8g / kg body weight
- Dairy intake 1.5 serving daily*

*250 ml milk, 200 g yoghurt, 40 g cheese

Can improved nutrition using a food-based approach reduce falls & fracture risk in older adults in living in aged-care homes?



Dairy and Fracture Study



Study Design

Food service supported
to increase dairy
options on the menu

Addition



Fortification



Substitution



Modification

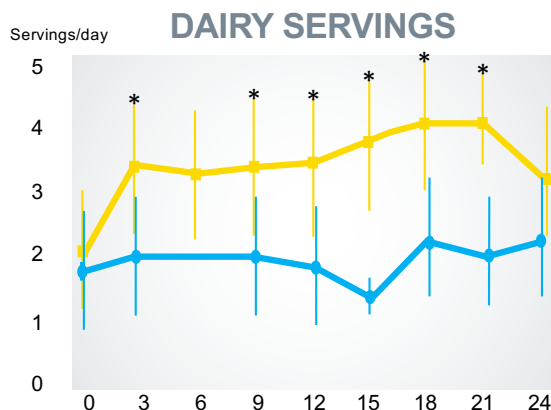


Demographics of Aged Care Residents

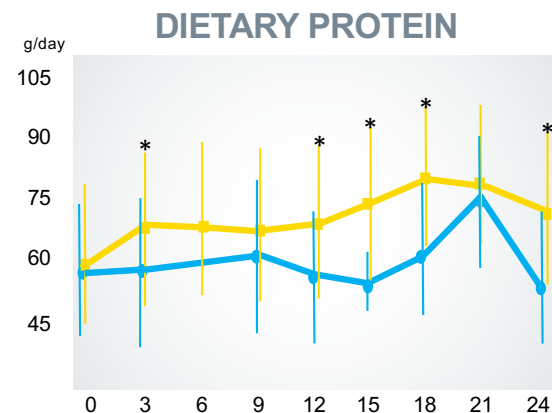
	Intervention n=3301	Controls n=3894
Women (n; %)	2194 (66%)	2680 (69%)
Age (yrs)	87 (8)	86 (8)
Height (m)	1.60 (0.1)	1.60 (0.1)
Weight (kg)	66.5 (15.6)	66.2 (15.8)
Medications (n)*	12 (6)	12 (7)
Medical Conditions (n)*	10 (5)	10 (7)
	n=170	n=130
25(OH)D (nmol/L)	72 (29)	73 (26)

Improved Nutrient intake with Dairy Foods

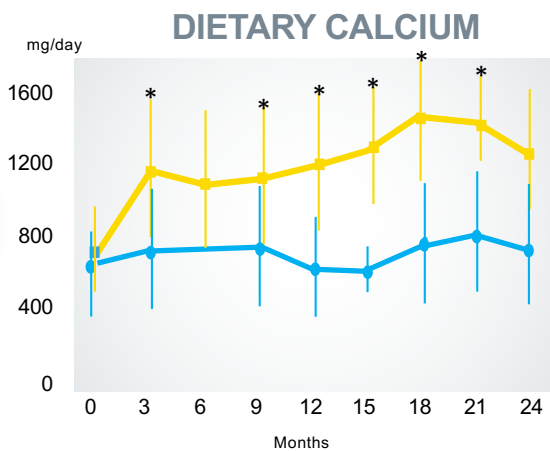
~3.5
Servings daily



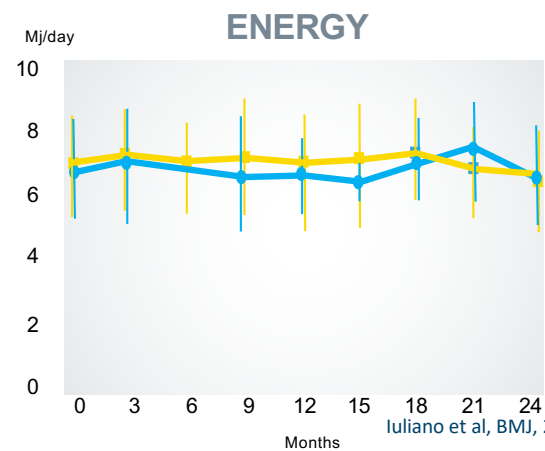
72g/day
1.1g/kg BW



~1100
Mg/day

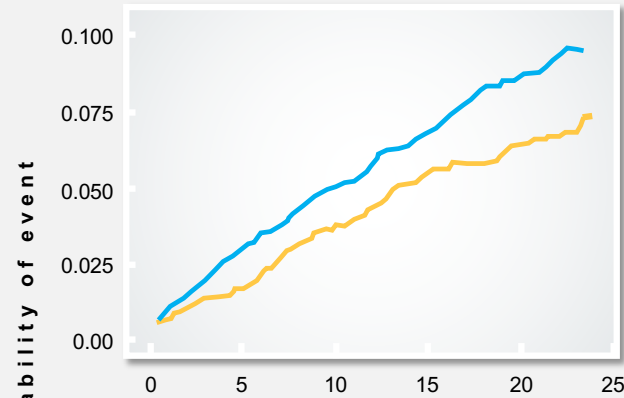


**No
Change**



Reduced Fractures with Dairy Foods

ALL FRACTURES



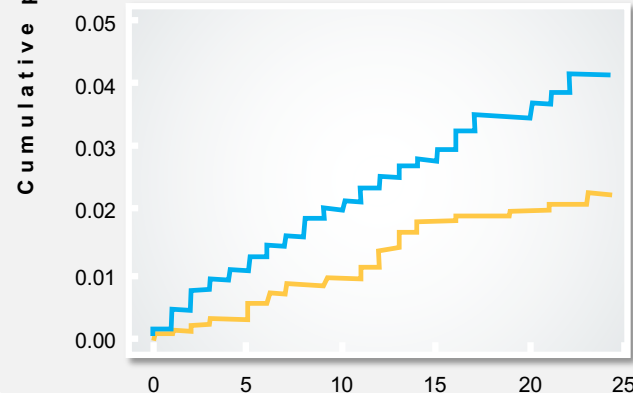
▪ **33% ↓ in all fractures**

▪ Bone density maintained in dairy group, declined in controls

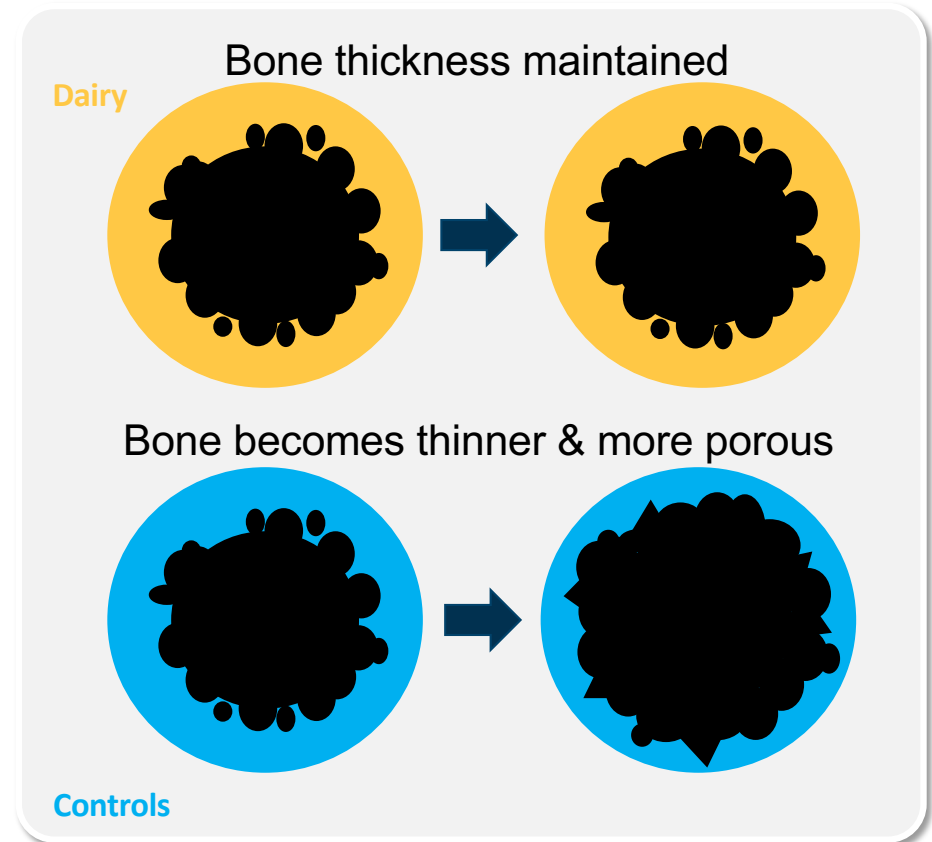
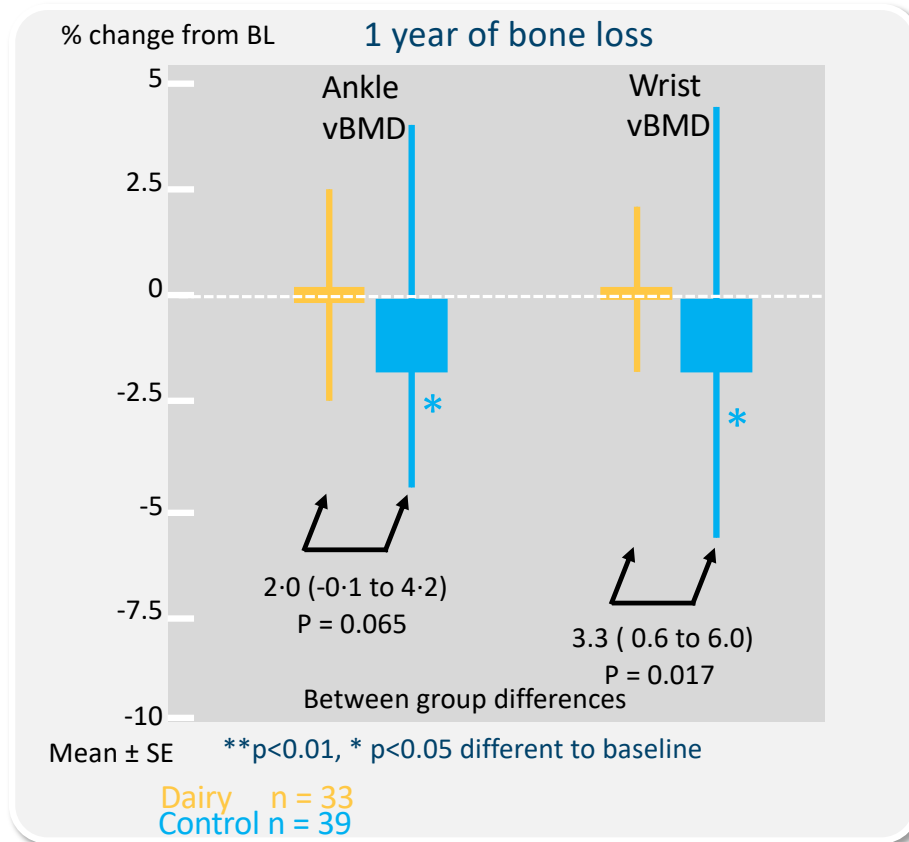
▪ Bone breakdown maintained in dairy group, increased in controls

▪ **46% ↓ in hip fractures**

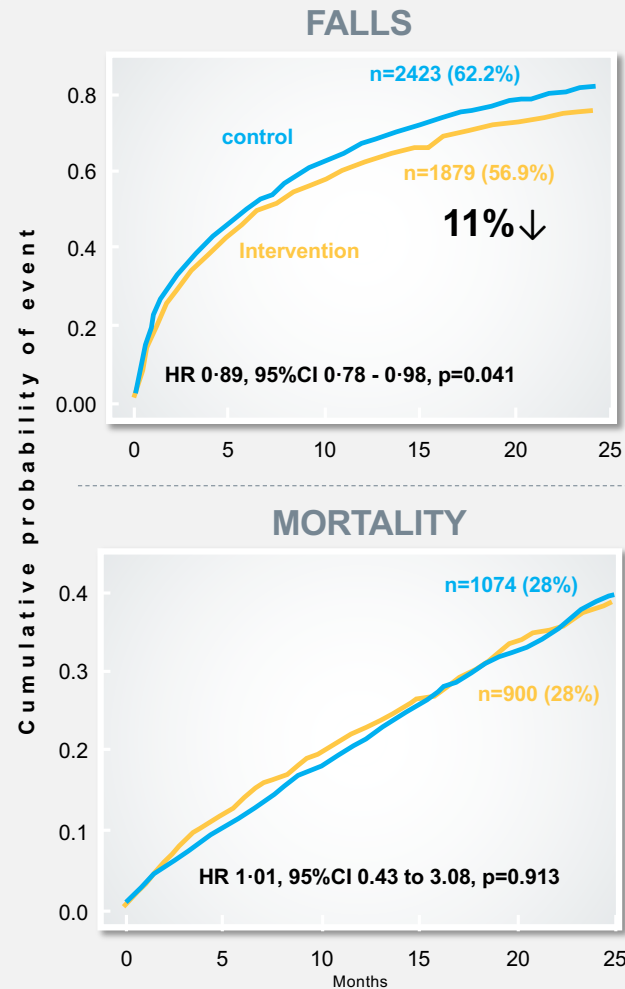
HIP FRACTURES



Dairy Foods & Bone Density in Older Adults



Reduced Falls & Unchanged Mortality with Dairy Foods



- **11% ↓ in falls**

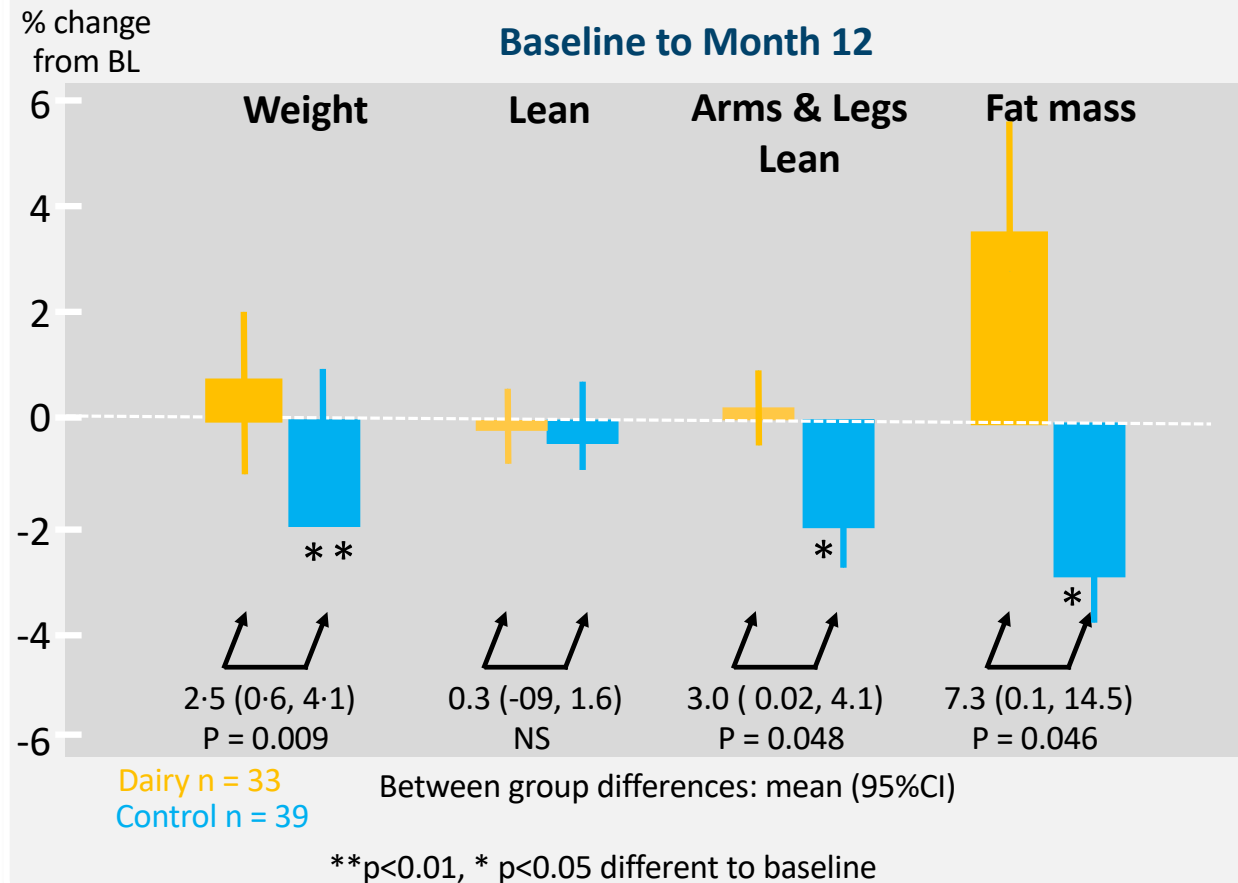
- **Maintained:**
(i) weight

- (ii) muscle at arms & legs

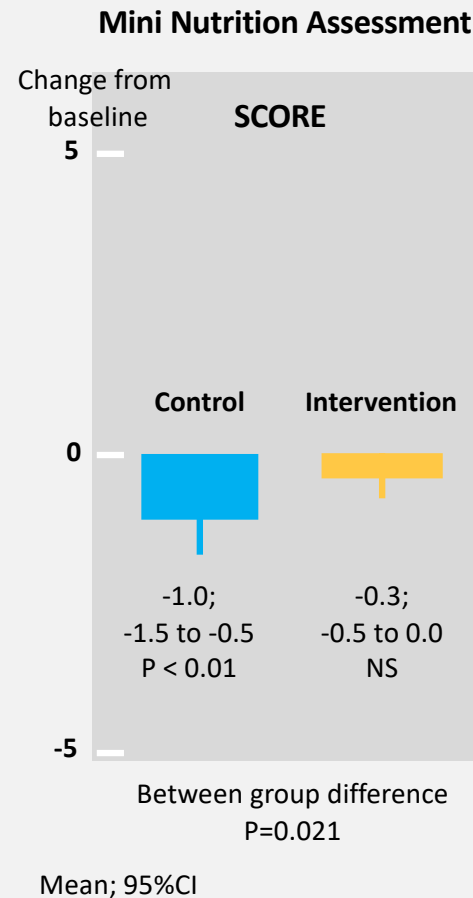
- (iii) nutritional status

- **Same life expectancy with fewer falls & fractures**

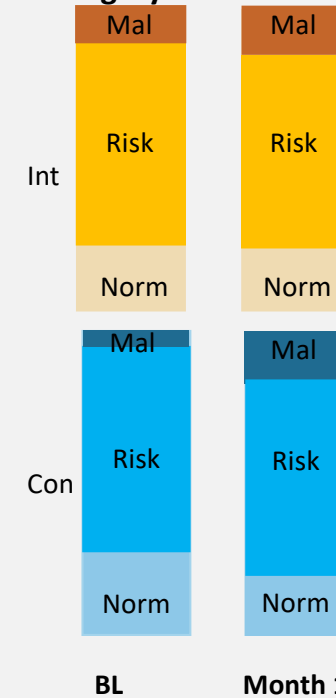
Weight & Lean Mass of Arms & Legs Maintained with Dairy Foods



Nutritional Status Maintained with Dairy Foods

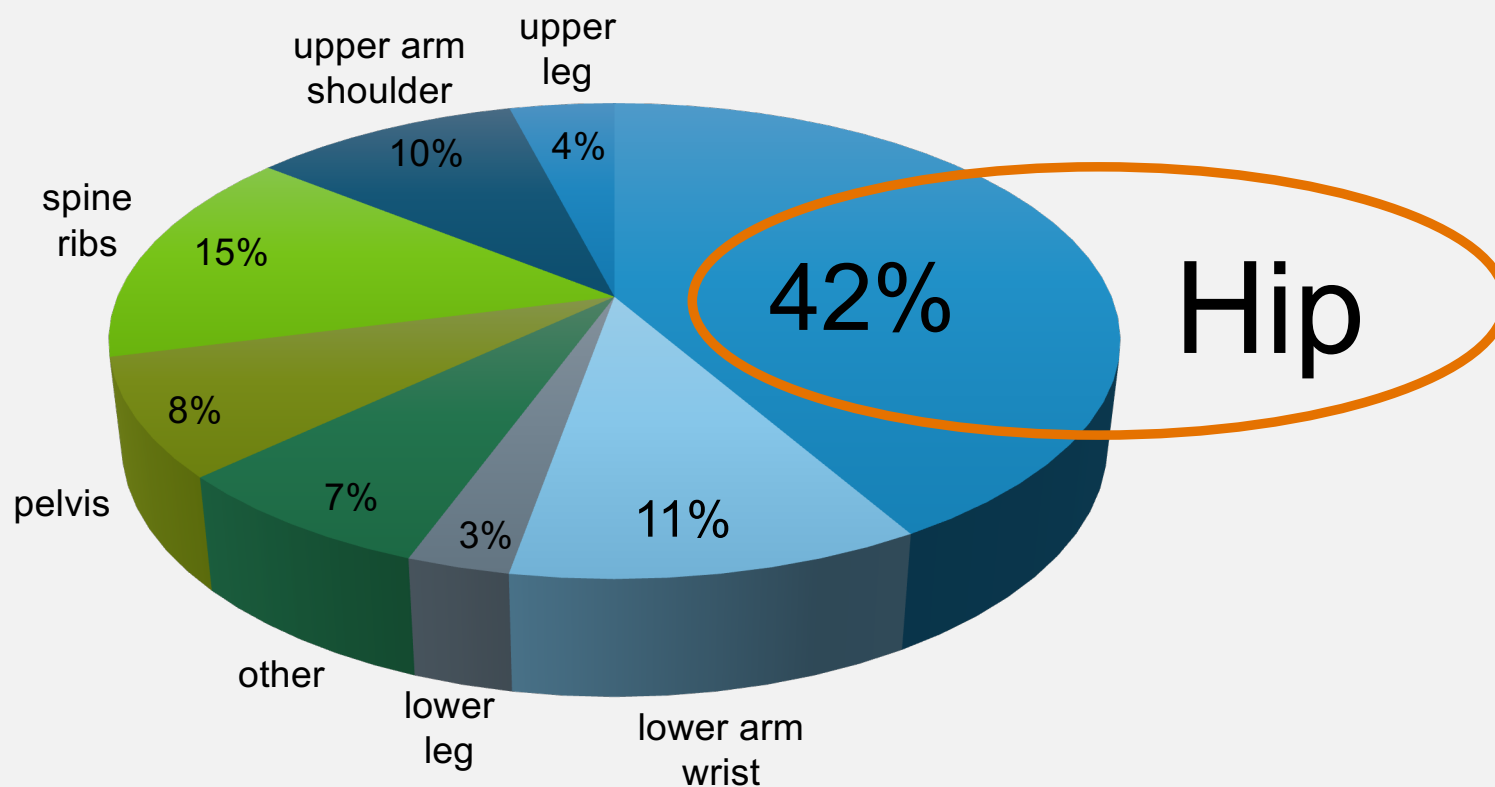


**Proportion of residents in
each category of nutritional status**



Decline in Nutritional Status
Int 22% v Con 32%, p = 0.019

Fractures Types in Aged Care

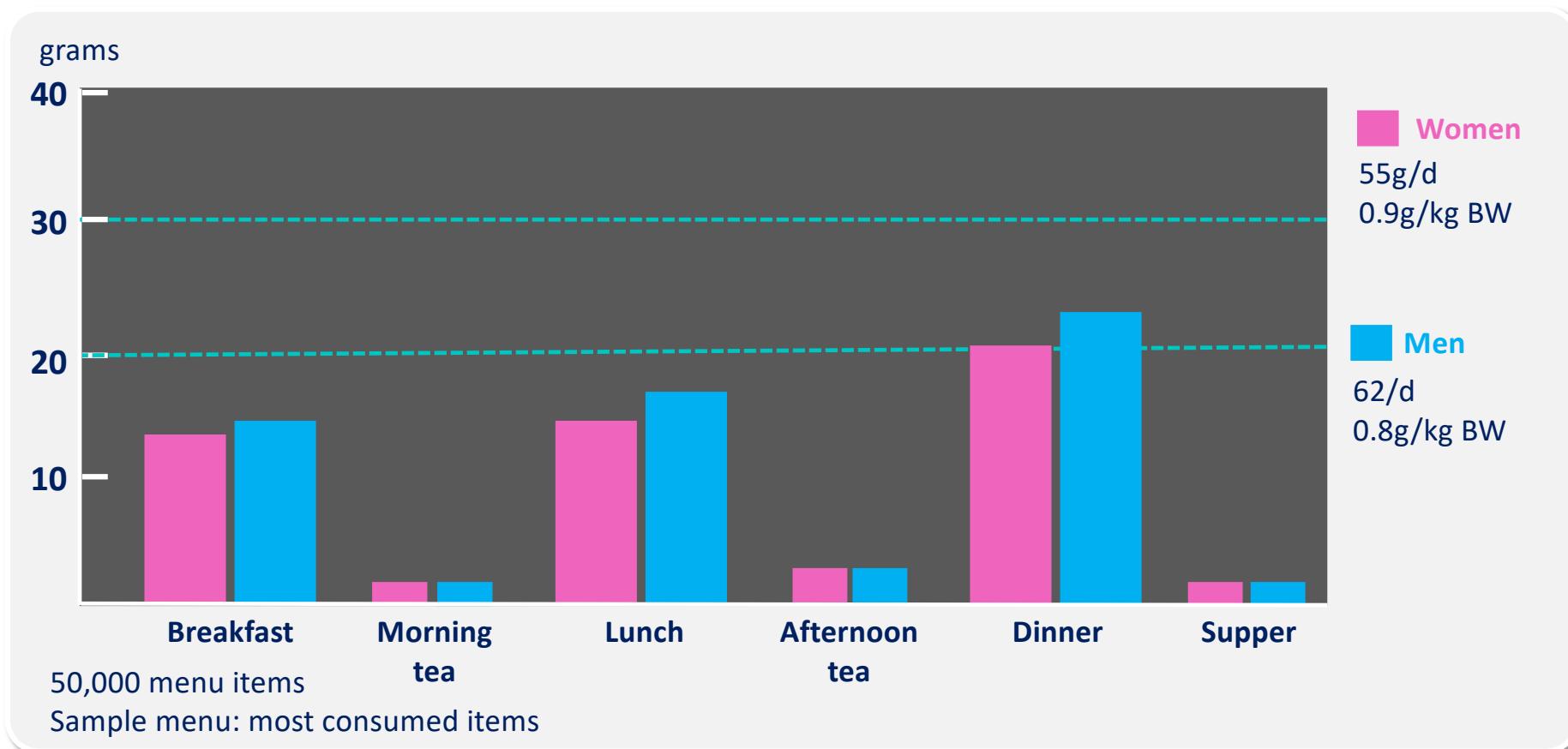


Cost of Hip Fractures in Aged Care



Cost of Dairy Food
< € 0.6 per resident per day

Protein Intake in Older Adults in Aged Care



Food Consumption in Older Adults in Aged Care Homes

Breakfast

Cereal
Toast
Tea/coffee
Juice



Lunch

Meat
Vegetables
Non-dairy dessert
Non-milk drink



Dinner

Soup-min protein
Salad-min protein
Sandwich-protein
Non-milk drink

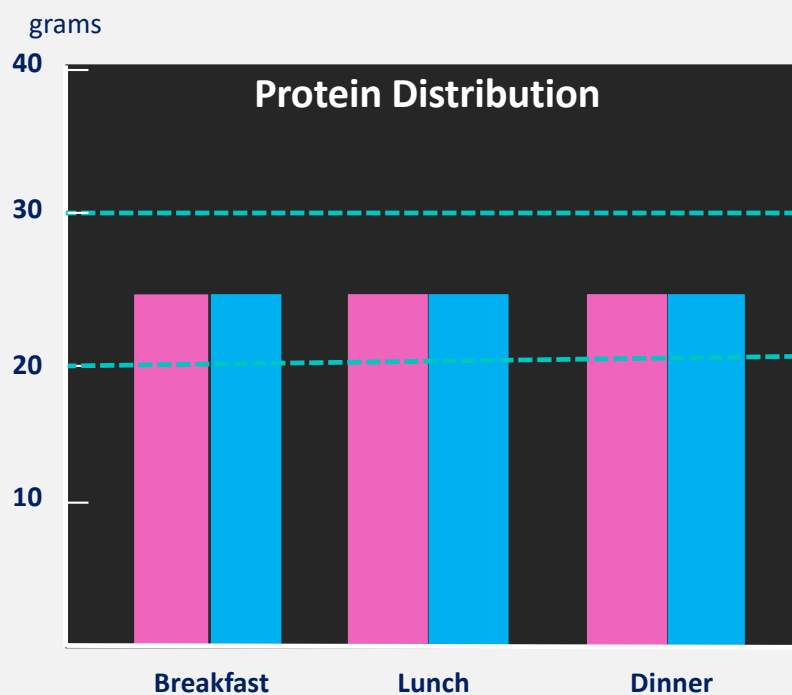


Snacks

Biscuit / cake
Tea/coffee



Improving Protein Distribution with Food



Breakfast

Scrambled eggs + cheese 18 g
Bacon short cuts 8 g
Bread slice 2g
= 28 grams protein

Lunch

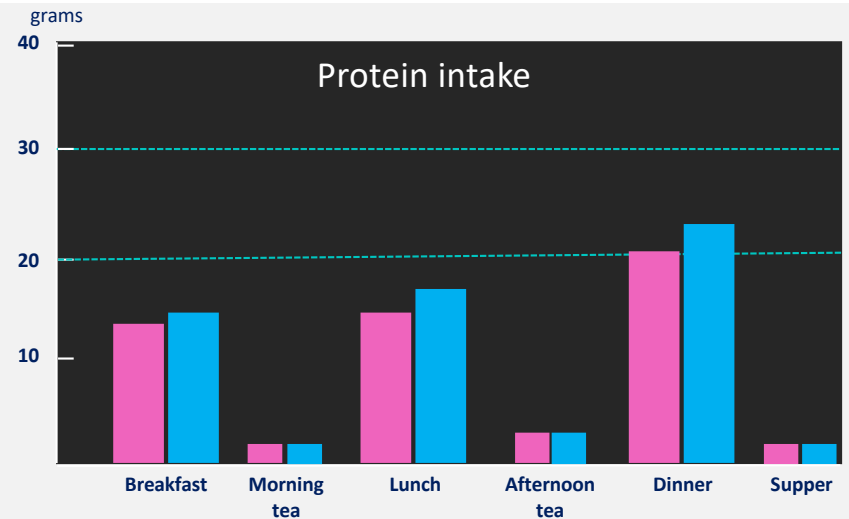
Roast beef 15 g
Vegetable mornay 8 g
Custard + fruit 4 g
= 27 grams protein

Dinner

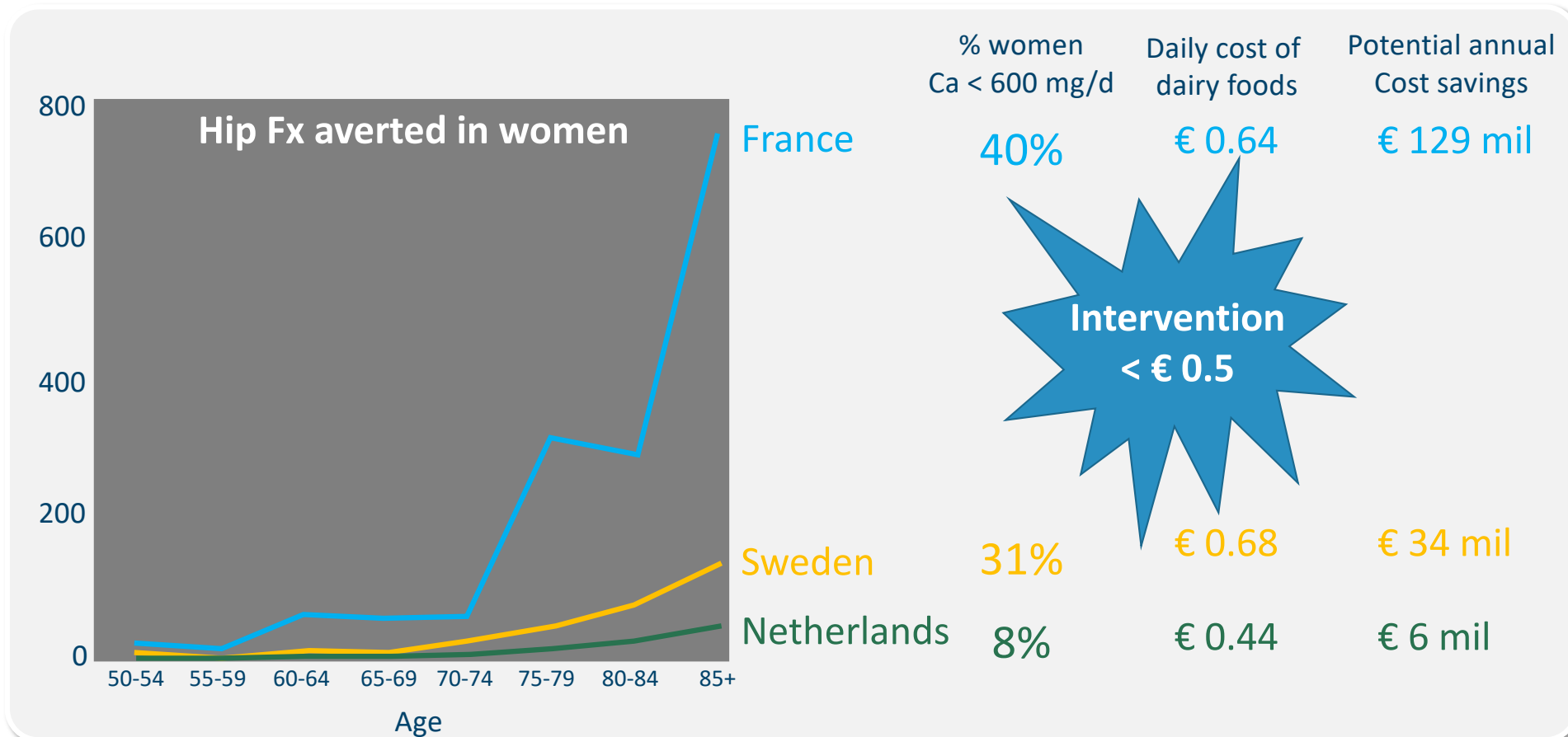
Soup + cheese 7 g
Cheese quiche 17 g
= 25 grams protein

Improving Protein Distribution with Food

- Multiple options across the day
- Consider if snacks are consumed
- Residents' preferences
- Staff engagement
 - Skill levels
 - Facilities available

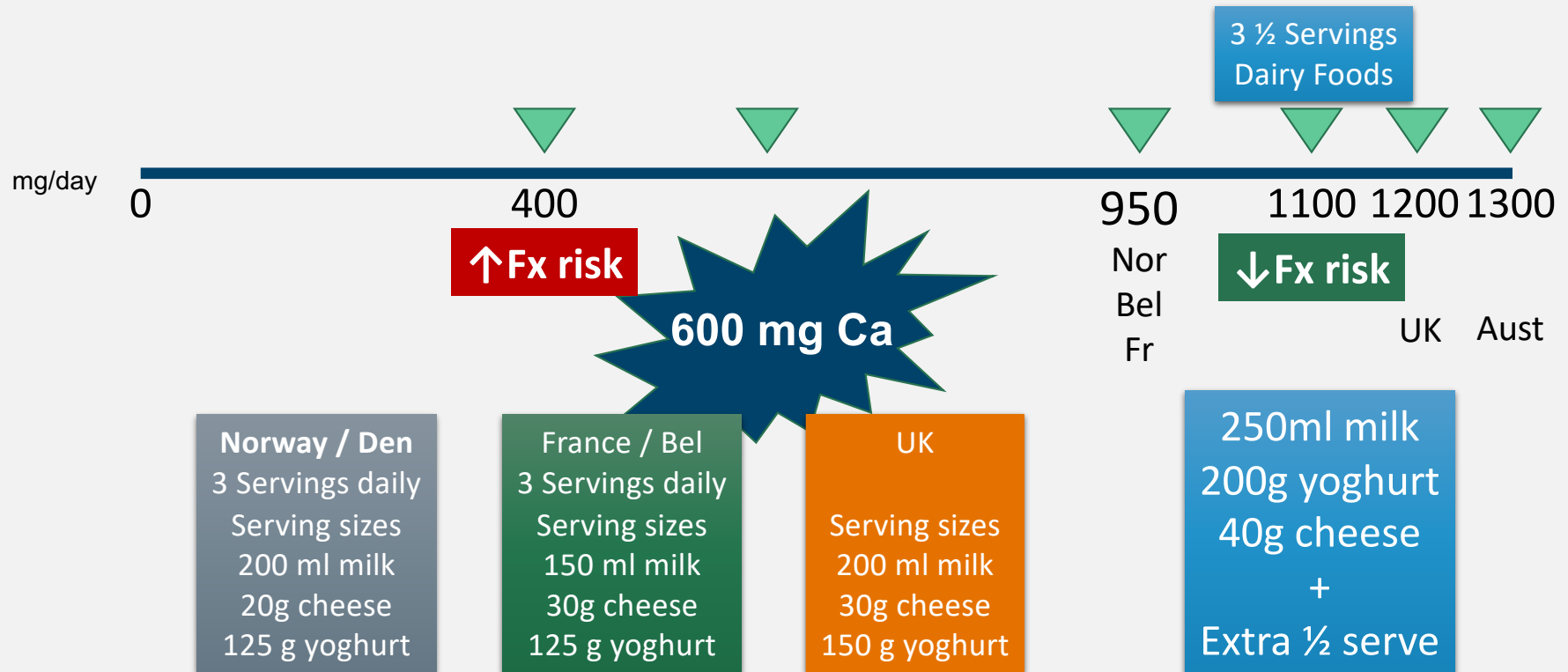


Hip Fractures Averted With Increased Dairy Consumption



Translating Evidence to Policy: Calcium & Dairy Intake

Recommended Daily Calcium Intake for Older Adults



The Importance of Implementation





Our Aims

- ✓ Put research into practice
- ✓ Resource & upskill staff
- ✓ Support best practice

To optimise health
in older adults in our care

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