

The Dangers of Dehydration

Welcome back and thank you for joining us for another episode of All Home Care Matters. Today we are going to be talking about dehydration in seniors. We are going to go over the dangers of dehydration, the signs to look for, and ways to help your loved one avoid and recover from dehydration. Now let's move on to the rest of the show.

According to MedlinePlus, dehydration is a condition caused by the loss of too much fluid from the body. It happens when you are losing more fluids than you are taking in, and your body does not have enough fluids to work properly.

Our bodies need fluids to function. According to Aegis Living, hydration is vital because it keeps electrolytes balanced, blood volume normal, aids in digestion, transportation of nutrients, and kidney functioning. And if your elderly loved one becomes dehydrated, they have the added risk of mental confusion.

Dehydration can be deadly. Without water, our bodies will shut down. Dehydration is especially dangerous for our older loved ones. In our previous episode, Keeping Seniors Safe in the Heat, we discussed the dangers of heat and how seniors may experience dehydration during the warmer months because their bodies are no longer able to regulate temperatures and cool themselves off as well as they used to.

Dehydration is not only a danger in the warmer months, though. It can occur at any time and many seniors experience dehydration without realizing they are dehydrated, which is another reason that dehydration is so dangerous in seniors. One of the unfortunate side effects of aging is reduced thirst. As we age, we often don't feel as thirsty as we used to and don't notice when we need water, which can easily lead to dehydration if we are not careful. And conditions like dementia can make it difficult to remember to stay hydrated.

According to DailyCaring, a UCLA study found that 40% of seniors may be chronically under-hydrated. That can easily lead to dehydration and cause a variety of serious health problems, including urinary tract infections (UTI), falls, kidney stones, and more. And, adults aged 65 and up have the highest hospital admission rates for dehydration.

The early signs of dehydration are often overlooked or unnoticed because they are some of the most common signs of health problems in general. DailyCaring states that symptoms of mild dehydration include dry mouth, dark-colored urine or a very small amount of urine, fatigue, dizziness, muscle cramps in limbs, headaches, feeling weak or unwell, and being sleepy or irritable. If your loved one experiences any of the symptoms, and it is not normal for them to do so, try to get them to drink water and hydrate. If your loved one has trouble drinking water, there are a few other things you can try to help your loved one recover from dehydration.

According to Discovery Village, there are many sources of fluids. People don't have to only drink plain water to stay hydrated. You can drink tea, coffee, fruit juice, fruits, and vegetables. They all contain water and will help to hydrate you. If dehydration is a serious issue for your loved one and they resist drinking healthy fluids, you may need to make trade-offs like letting them drink the less healthy options such as diet soda or sugary drinks. You need to speak with their doctor first and make sure that the pros outweigh the cons. You can also serve food with high water content to help with hydration without drinking fluids.

For people who like savory foods, they may like drinking hot soup broth instead of sweet or neutral-tasting drinks. The broth can come in a box, can, or powder form for greater convenience. This is especially comforting to have during cold weather. If your loved one is concerned about their sodium intake, make sure to buy low sodium broth or make your own homemade broth.

You can make homemade popsicles from fruit juice. This is a fun treat and a great way to get your loved one to take in more fluids. Some elderly may resist drinking so you can entice them to have smoothies or milkshakes. If they like the taste or texture of them, they may be willing to drink them regularly.

Your loved one can also try eating foods with high water content, like watermelon, cucumber, celery, and strawberries. If your loved one is struggling to keep up with their water intake, contact their doctor and make sure they are aware of the

problem. Medication can also be a cause of dehydration. It is important to keep your loved one's doctor informed of any experiences with dehydration your loved one has so that they can adjust medications if needed. Their doctor can only help if they are made aware of the issue.

According to HealthLine, older adults are more susceptible to dehydration for several reasons. One, older adults have a decline in total body fluid. As we age, the amount of fluid in our bodies begins to decrease. This means there are fewer water reserves available for your body to use as you get older. Two, older adults have a lowered thirst response. Feeling thirsty is your body's way of letting you know you need water. However, because the thirst response becomes weaker with age, older adults may not know they need to drink. Three, older adults have decreased kidney function. The function of the kidneys can decline with age, meaning that more water may be lost through urination. And the fourth and final reason is health conditions and medications. Some older adults have underlying health conditions or take medications. In some cases, these conditions or meds can lead to an increase in water loss through urination.

We know that seniors are at a higher risk for dehydration, but what causes dehydration in seniors? According to HealthLine, dehydration can have a variety of causes. The most common causes of dehydration in older adults include heat exposure, illness, mobility problems, underlying health conditions, and medications.

Heat exposure can cause dehydration. Spending time in hot or humid conditions can lead to increased fluid loss through sweating. Being sick with symptoms like fever, vomiting, or diarrhea can cause dehydration. It may be more difficult for older adults with mobility issues to be able to get water on their own. Some underlying health conditions, such as diabetes or kidney disease, can cause you to lose more fluid than normal. And lastly, a side effect of some medications may be increased urination, which can cause additional fluid loss. Some examples of medications that can cause increased urination include diuretics and certain blood pressure medications.

According to National Care Planning Council, or NCPC, about 10% of all hospitalizations are directly attributable to dehydration. NCPC also tells us that elder abuse or neglect by caregivers can also result in a senior not receiving enough fluids. Seniors receiving oversight from others are simply not given enough to drink. As with nutrition, individuals in long-term care facilities seem to suffer more. One study found that 31% of patients or residents in these facilities were dehydrated. Researchers found that 48% of older adults admitted to hospitals after treatment in emergency departments had signs of dehydration in their laboratory results.

Older people who get enough water tend to suffer less constipation, use fewer laxatives, have fewer falls, and, for men, may have a lower risk of bladder cancer. Less constipation may also reduce the risk of colorectal cancer. Drinking a lot of

water also seems to lessen the risk of fatal coronary heart disease.

If your loved one is dehydrated, getting them fluids should be the first step you take. Within five to ten minutes of obtaining fluids, your loved one should start to feel better. If they are still not improving, Better Health While Aging says that older adults with moderate dehydration are often treated with intravenous hydration in urgent care, the emergency room, or even the hospital. Some nursing homes can also treat dehydration with a subcutaneous infusion, which means providing fluid through a small IV needle placed into the skin of the belly or thigh. This is called hypodermoclysis, and this is actually safer and more comfortable for older adults than traditional IV hydration.

Severe dehydration may require additional intervention to support the kidneys, and sometimes even requires short-term dialysis.

While dehydration treatment is relatively safe and easy, our goal is to prevent dehydration rather than treat it.

According to Healthline, If you're an older adult, the following tips may help you stay well hydrated:

Try to drink water throughout the day. Other beverages that may also help with hydration include milk, flavored sparkling water, and fruit juices with low sugar. Drink coffee and tea sparingly,

as they can have diuretic effects. If it's hard to drink too much liquid all at once, take small sips. Try to include foods in your diet that have higher water content. Some examples include watermelon, cucumber, celery, strawberries, and low sodium broths or soups. If you don't find water very appealing, try adding a slice or squeeze of lemon or lime to add flavor. Plan to drink more water if you're going to be out in hot or humid conditions for a prolonged period of time, or if you're going to be exercising. If you're ill with symptoms like fever, vomiting, or diarrhea, make sure to drink more fluids than normal. If you have an underlying health condition, speak with your doctor about your specific fluid and hydration needs.

If you're a caregiver for an older adult, you can do the following to help prevent dehydration:

Remind them to hydrate throughout the day, especially during mealtimes and after exercise or exertion. Keep water in places where it's accessible and easy to reach. Implement easier access to the bathroom if they're concerned about not making it to the toilet in time after drinking fluids.

Everyone has different hydration requirements. If your loved one is often struggling with dehydration, talk to their doctor to find out how much water they should be drinking a day and if there is anything else you can do to help encourage hydration.

Better Health While Aging says that family caregivers are often concerned about whether an older person is drinking enough.

Since dehydration is indeed very common among older adults, this concern is very important. However, before expending a lot of energy trying to get your loved one to drink more, consider the following suggestions:

1. Measure how much your loved one is actually drinking most days. This can require a little extra effort, but it's very helpful to get at least an estimate of how much the person drinks. This can confirm a family's – or doctor's – hunch that the person isn't taking in enough fluid, and can help the care team figure out how much more fluid is required. Keep a journal to record how much fluid your loved one is drinking. It's generally important to track anything you want to improve.

2. Confirm that your loved one is, in fact, often dehydrated. Physical symptoms and urine tests are not enough to either diagnose dehydration or rule it out. Instead, consider these two approaches to confirm clinical dehydration. One is to see if your loved one's energy and mental state perk up when they drink more. The other is to talk to the doctor and request blood tests to confirm dehydration.

Now, you don't necessarily want to request blood tests every time you suspect mild dehydration, but especially if your loved one's dehydration has never been confirmed by a serum osmolality test, it would probably be useful to do this at least once.

3. If frequent urinary tract infections (UTIs) are a concern, learn about asymptomatic bacteriuria and try to determine whether these are real UTIs versus a colonized bladder.

Occasionally, families may be intent on increasing hydration or taking other measures, because they are concerned about repeated or persisting urinary tract infections (UTIs), but UTIs are a bit like dehydration. A UTI is a common problem in older adults and is potentially very serious. But it's also easily misdiagnosed, even by professionals.

Sometimes, when an older person keeps being diagnosed with a UTI repeatedly, the problem is actually that the older person has asymptomatic bacteriuria. This is a very common condition in which an older person's bladder becomes colonized with bacteria. It probably happens because people's immune systems get weaker as they age.

So how is this different from a UTI? Both conditions will cause a positive urine culture, meaning that bacteria is in the urine. The main difference is that in asymptomatic bacteriuria, the older person doesn't experience pain, inflammation, increased confusion, or other symptoms of infection.

In a young person, bacteria in the urine is very uncommon and almost always corresponds to a clinically significant infection. But in an older person, bacteria in the urine is common.

So you cannot diagnose a UTI in an older person just on the basis of a positive urine culture. Instead, the family and clinician must note other signs of infection, such as pain or delirium.

Families are often surprised to learn that clinical trials have repeatedly found that it is not helpful to treat asymptomatic bacteriuria, but it's true. In fact, a 2015 study found that treating asymptomatic bacteriuria with antibiotics increased the likelihood of later having a real UTI and that the real UTI was more likely to be antibiotic-resistant.

4. Talk to your loved one to get their perspective on drinking more, and to find out if continence issues are a concern for them.

Before you keep pressuring your loved one to drink more take the time to talk to them to learn more about their perspective on drinking more, and on avoiding dehydration. The more we learn about how an older person sees a situation, the better equipped we are to try to assist them. In particular, inquiring about how an older adult feels about drinking sometimes reveals that they are concerned about worsening their urinary continence symptoms.

5. Pay attention to figure out which fluids your loved one prefers to drink and try scheduling frequent small drinks.

Ultimately, there's no substitute for paying close attention, keeping track of your observations, and doing some trial and error to figure out what seems to improve things.

No doctor has a magic formula to get an older person to drink more. To identify the drinks your loved one prefers, start tracking how much they drink, and then start experimenting to figure out what works.

Usually, a combination of the following three approaches will improve fluid intake. Offer a beverage the person likes, offer small-to-moderate quantities of the beverage on schedule, and address any urinary incontinence concerns. And as we have already discussed, you can also increase fluid intake by offering foods that contain a lot of water, such as watermelon, or perhaps soups.

We discussed the early signs of dehydration, but not the severe signs. Severe signs of dehydration include low blood pressure, convulsions, severe cramping and muscle contractions in limbs, back and stomach, bloated stomach, rapid but weak pulse, dry and sunken eyes with few or no tears, wrinkled skin; no elasticity, and breathing faster than normal. If your loved one is experiencing any of these signs, call their doctor immediately. They may recommend that you take them to the emergency room.

Many people experience dehydration every day. One family's story inspired the creation of a hydration system that is currently being used to help elderly patients stay hydrated in hospitals.

In 2014 Ellie's grandmother was admitted to the hospital for a routine hip operation. Whilst she was recovering she became incredibly confused and disorientated. She didn't know who she was and struggled to recognize her family. Ellie's family thought it was the early signs of dementia. When her grandmother returned home from the hospital, she had a bad fall and was diagnosed by a doctor with severe dehydration.

Her grandmother went from living independently in her own home to moving in with Ellie and having full-time care. Before she became ill, she loved going for walks along the beach with Ellie and her mom and their dog. Each week she met up with friends at the local church, had her hair done every Friday, cooked her own meals, and loved sitting out in the back garden doing Sudoku. After the fall she was bed-bound and unable to look after herself. It changed all of their lives.

At the time, Ellie was studying Product Design at Bournemouth University and decided to use her personal experience to focus her degree on finding a way to help people like my grandmother. Ellie wanted to develop a product to help vulnerable people to drink more. To make it easier for patients to be reminded to drink more frequently, and also for healthcare professionals to know when one of their patients wasn't drinking regularly enough. During her research, she was surprised by how many people suffered from dehydration, and how it contributed to many common health conditions such as urinary tract infections, memory loss, and confusion. While her grandmother was in the

hospital, Ellie noticed how difficult it was for her to keep herself hydrated. Because of this, Ellie created Droplet, an intelligent hydration system that reminds you to drink. You can learn more about droplet and Ellie's story in our show notes.

Ellie's grandmother's story is not something out of the ordinary, unfortunately. Many people feel healthy up until the point the collapse, which is why it is especially important for older individuals to stay on top of their hydration. Make sure to encourage your loved one to keep drinking water and let them know that you can help them make a hydration plan if they are struggling with dehydration.

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