

Does eating environment have an effect on the intake in the elderly?

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Background

Social and environmental factors are important influences on food intake. Studies demonstrate increases in food intake when there is improvement in the social and environmental surroundings and when people dine together.

In 2010, Western health introduced a supportive community dining environment in the Aged Care subacute setting.

Aim

This study aimed to examine the energy and protein intake of the midday meal in two different eating environments and to obtain feedback on patient preference with each location.

Method

Elderly patients on two rehabilitation wards were observed consuming the midday meal on two consecutive days and in two eating environments: day one in the dining room, and day two at the bedside. The patients intake was recorded using a 5 point visual assessment scale as a proportion of the meal consumed and analysed for energy and protein content using a ready reckoner. Patients were also directly surveyed on their preference to eating environment.

Results

The study found that 68% of the surveyed patients favoured eating their midday meal in the dining room, and consumed 20% more energy and protein when dining in a communal dining room environment. This study also found that patients with a BMI of less than 22, and those with significant cognitive impairment ate 30% more protein and energy in the dining room, and those identified as being at risk of malnutrition (MST ≥ 2) ate 42% more energy and 27% more protein in the dining room although this was not statistically significant.

Conclusion

This study supports the contention that a dining room environment can increase patients' opportunities to

enjoy the social aspect of meal times, increase food intake and potentially lead to weight gain and improvements in nutritional status in the rehabilitation setting.

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