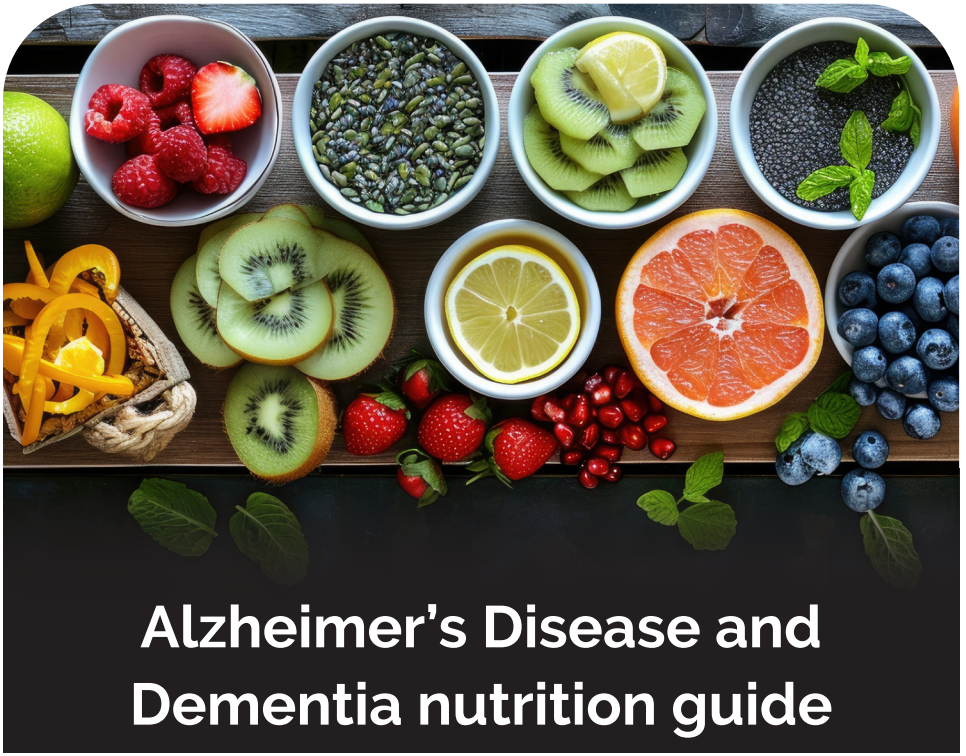

Alzheimer's Disease and Dementia nutrition guide

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spectrum generations

GENERAL INFORMATION

Alzheimer's disease (AD) is a progressive condition characterized by a decline in cognitive function and ability to perform activities daily living abilities (ADLs).

Emerging research suggests that nutrition may play a role in both supporting brain health and may help slow disease progression. While the exact connection between diet and cognition is not fully understood, we know that a healthy diet can lead to a reduction in inflammation which is helpful for brain function.

In this guide we will discuss nutrition considerations for managing AD, common barriers to eating and practical strategies to promote adequate intake.

Maintaining good nutrition can be challenging for individuals with Alzheimer's. While no single food prevents Alzheimer's, a balanced diet supports overall health and function.



NUTRITION RISKS

Those living with Alzheimer's disease are at a greater risk of undernutrition and protein-calorie malnutrition due to decreased appetite, forgetfulness and difficulty eating independently.

Weight loss often progresses as the disease advances and may further accelerate functional decline. Malnutrition can lead to increased frailty, reduced mobility, skin fragility and pressure injuries, increased risk of falls and fractures, exacerbation of chronic disease and increased risks of hospitalization.

Additional factors that can make it harder for individuals with Alzheimer's to eat enough and maintain good nutrition may include medication side effects (e.g. taste changes, nausea, dry mouth), and behavioral symptoms such as agitation and wandering, reduced ability to recognize hunger and thirst and difficulty chewing or swallowing in later stages.

Dehydration is also a concern. It can lead to headaches, increased confusion, constipation and urinary tract infections. It may also worsen existing symptoms. Signs of dehydration include dryness around the mouth, dizziness or lightheadedness, needing to urinate less than normal or dark or strong-smelling urine.

Early and ongoing attention to nutrition and hydration status is important to maintain strength, weight and quality of life.

COMMON NUTRITION BARRIERS AND STRATEGIES

Barriers	Strategies
Overwhelm with too many food choices or a busy table setting	• Keep table setting simple (avoid patterns) • Provide only necessary utensils • Offer one food at a time if needed
Forgetting to eat	• Offer meals and snacks regularly • Be flexible as food preferences may change • Encourage social meals when possible
Difficulty recognizing food	• Use high visual contrast (e.g. white plate + colored placemat, clear glass with a brightly colored straw) • Separate foods clearly on the plate
Chewing or swallowing difficulties	• Modify food textures as needed • Monitor for signs of choking • Consult a speech and language pathologist (SLP) if needed
Decreased sense of smell and taste	• Enhance odor and flavor with herbs, spices and marinades • Incorporate naturally sweet foods such as fruits • Serve foods at appropriate temperatures
Distractions during meals	• Serve meals in a quiet environment • Turn off TV and reduce background noise
Reduced Appetite & Thirst	• Offer small, frequent meals and snacks • Include calorie dense foods such as nut butters, full fat dairy or oral nutrition supplements



KEY NUTRIENTS OF INTEREST

Specific vitamin and mineral supplementation has not been proven to prevent or delay disease progression. However, consuming a diet rich in the following nutrients and limiting saturated fats may be beneficial. Nutrients are always best absorbed through whole foods. Supplementation should only be used when there is a documented deficiency or clinical indication.

Nutrient	Role In Brain Health	Examples
Saturated Fats	• High intake linked to faster progression of AD • May contribute to inflammation and plaque buildup	• Butter and lard • Fatty meats such as steak, pork, chicken • Full fat cheese and creams
Unsaturated Fats	• Associated with slower cognitive decline • Anti-inflammatory	• Liquid oils such as olive oil • Nuts • Seeds such as pumpkin, hemp, flax and chia • Seafood
Omega-3 Fatty Acids	• May help support memory, mood and language ability • Anti-inflammatory	• Fatty fish such as salmon, sardines and tuna • Flax, chia and hemp seeds • Walnuts
Antioxidants	• Found to reduce formation of plaques • Broad term for hundreds of plant compounds. Examples include anthocyanins found in berries and lycopene found in tomatoes	• Found in most fruit and vegetables • Berries, tomatoes, beets, dark leafy greens, cruciferous vegetables, green tea
Vitamin E	• May help delay cognitive decline	• Nuts • Seeds • Vegetable Oils
B Vitamins	• Particularly Folate, B12, thiamin and B6 are believed to support brain function and reduced plaque buildup	• Leafy greens • Whole grains • Eggs • Meat and Dairy
Vitamin C	• Individuals with AD are often deficient • Adequate intake may support slower decline	• Citrus fruits • Peppers • Strawberries • Broccoli
Vitamin D	• Low Levels linked to increased risk of cognitive impairment • Important for overall brain and bone health	• Fortified milk and juice • Fatty • Egg Yolk • Sunlight Exposure
Soy Foods	• May support cognitive functioning, especially in post-menopausal women	• Tofu • Soy milk • Edamame

ORAL NUTRITION SUPPLEMENTS

Oral nutrition supplements such as Ensure, Boost and Premier Protein Brands provide a convenient high-calorie, high-protein option that can support weight maintenance or gain.

These may be especially useful when appetite is poor, meals are skipped, weight loss is occurring, or when chewing and swallowing solid foods are an issue.

TIP: Offer supplements between meals rather than as a meal replacement to maximize total intake. If you are using these as a meal, speak to your dietitian to confirm how many are appropriate.

DIETARY PATTERNS

MEDITERRANEAN DIET:

- **Emphasize:**
  - *-Fruits*
  - *-Veggies*
  - *-Whole grains*
  - *-Legumes*
  - *- and seafood*
  - *-Unsaturated fats (olive oil)*
- **Moderate Amounts of:**
  - *-Animal proteins*
  - *-Dairy*
- **Limit:**
  - *-Red Meats*
  - *-Processed Foods*
  - *-Sweets*

MIND DIET:
Hybrid of Mediterranean + DASH Diet

- **Focuses on specific brain supporting foods such as:**
  - *-Leafy Greens*
  - *-Berries*
  - *-Whole Grains*
  - *-Beans*
  - *-Nuts*
  - *-Fish*
  - *-Olive oil*



KEY TAKEAWAY

Research suggests that combined lifestyle approaches are more effective than any single intervention. These include:

- **A balanced diet—rather than focusing on individual nutrients or supplements—is linked to better cognitive health.**
  - Prioritizing adequate calories and protein intake
  - Simplifying meals and reducing distractions
  - Focusing on healthy fats and plant based foods
    - *Limit consumption of animal products to a few times a week*
    - *Use The Mediterranean and MIND diet principals as a guide*
  - Adjust strategies as the disease progresses and individual needs change
    - *Note, for those who are experiencing weight loss and symptoms of malnutrition or undernutrition, restriction of foods that may limit intake is not recommended and should be avoided.*

- **Regular physical activity as this increases blood flow to the brain and has been found to lower cholesterol levels**
  - Walking or light strength training (~30 minutes/day) or 3-6 hours per week.

- **Stress Management**
  - Incorporating calming routines, music or relaxation techniques

- **Social Engagement**
  - Shared meals and meaningful interaction

- **Overall approach**
  - A flexible, compassionate approach is essential

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