

# **Positive** Healthy Ageing Newsletter

#### Everyone can age positively and healthily

Welcome to the first issue of Positive Healthy Ageing Newsletter, an initiative by the Positive Healthy Ageing Programme (PHAP), a multi-disciplinary expert-driven holistic community educational programme aiming to educate and empower Malaysians towards positive healthy ageing practices.

We are very excited to launch this newsletter which will be shared with you on a bimonthly basis. Each issue we will feature relevant information about practices for positive healthy ageing as well as raise awareness of issues related to ageing.

In this issue we are featuring four articles on different areas of ageing, including common health conditions among older persons, tips on nutrition for golden years, protein needs of older persons as well as vaccination recommendations for older persons aged 65 and above You will also find a list of directories of geriatric hospital/ clinics available in the country. Whether you are an elderly looking for information or inspirations to age healthily; caregiver, child or family member with elderlies at home, we hope you find something useful here for you

We also have a website and we will be delighted to have you visiting the website regularly to look for more information: https://positivehealthyageing.org.my/. Sign up as our member at the website to receive your complimentary copy of Newsletter together with news on loads of other exciting events and activities that could be of interest to you!

And we are also on Facebook (Positive Healthy Ageing Malaysia) and Instagram (positivehealthyageing.my) Please follow and connect with us! Please also share with your friends.

Enjoy the read, Dr Tee E Siong,

Committee Chair, Positive Healthy Ageing Programme An initiative of Elderly Health Awareness Society Selangor

#### 每个人都可以积极健康地步入黄金岁月!

欢迎阅读《积极健康乐龄化期刊》第一期,此双月刊中 马来西亚积极健康乐龄化计划 (Positive Healthy Ageing Programme) 发起,旨在教育和赋权马来西亚人掌握积极健 康乐龄化的实践方法。

我们将在每一期中与您分享和积极健康老龄化相关的问题和实 践信息。在本期中,我们为您带来四篇文章,包括银发族常见 的健康问题、银发族如何确保营养充足,老年人蛋白质摄入, 以及疫苗接种推荐。本期也收录了国内的老年病学医院/诊所 的列表。无论您是想要寻找关于健康老龄化信息的长者,还是 关心家中长者健康的照料者、子女或家庭成员,希望您能从我 们的期刊中获益。

同时,欢迎您经常访问积极健康乐龄化计划的官网(https:// positivehealthyageing.org.my/) 或关注此计划的社交媒体户 口 (面子书Positive Healthy Ageing Malaysia; Instagram: positivehealthyageing.my)和我们交流。您也可以在官网 上注册成为会员,以及时收到我们的刊物和更多关于积极健康 乐龄化的活动讯息。

我们欢迎您提供反馈意见, 任何建议或反馈可致电 012-288 0866 或发送电子邮件至 secretariat@positivehealthvageing.org.mv

祝阅读愉快 郑怡祥博士

积极健康乐龄化计划委员会主席

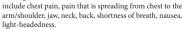


he average life expectancy at birth for Malaysians has reached 73.4 years in 2022. By 2040, 14.5% of Malaysians will be aged 65 or older. Malaysians are living longer thanks to increased income, reduction in poverty, improved employment, increase in urban population, higher per capita income and better health awareness. While living longer is a significant achievement all of us can be proud of, we certainly also want to spend our golden years in good health, or at least delay some of the diseases that tend to occur more frequently as we age.

Certain chronic diseases are also some of the most common causes of death and disability among older adults in Malaysia It is important to be informed of these common health conditions so that we are able to identify their symptoms, get medical assistance when needed, and take preventative steps to ameliorate these risk factors.

#### Cardiovascular diseases (CVDs) & their risk factors

Heart attack and stroke are the leading causes of death among older adults in Malaysia. Heart attack occurs when the supply of blood to the heart is disrupted, usually by a blood clot. Signs of heart attack



Stroke happens when there is obstruction or rupture of a blood vessel that disrupts the blood flow in one area of the brain. Symptoms of stroke may include sudden drooping of the face, speech difficulty, limb weakness, visual disturbance or instability. Leading risk factors for heart disease and stroke are high blood pressure, high low-density lipoprotein (LDL) cholesterol, diabetes mellitus, smoking and secondhand smoke exposure, obesity, unhealthy diet, and physical inactivity. Both can cause serious disability and death.

#### Diabetes Mellitus

Diabetes mellitus is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. High blood sugar is a common effect of uncontrolled diabetes mellitus and over time leads to serious damage to many of the body's systems. Complications of diabetes mellitus involve damage to large and small blood vessels in the body i.e.

cardiovascular disease, stroke, kidney disease, nerve damage, blindness, foot problem.

The risk is higher as we get older. 1 in 3 older adults in Malaysia has diabetes mellitus. Malaysians are getting diabetes at a younger age. We must be mindful of the early signs of diabetes such as increased



thirst, frequent hunger pangs, unexplained weight loss, frequent urination, fatigue, blurred vision. However, some people may have no symptoms at all and are diagnosed after a complication has occurred. Annual screening is important to detect this silent disease and should begin at the age of 30 years old.

#### High blood pressure

The National Health and Morbidity Survey in 2019 reported that the prevalence of hypertension among Malaysian adults aged 18 years and above was 30.0%. The rate increases to 81.7% among older adults aged 75 years and above. Hypertension is a silent killer as people usually would not even realise it until their blood



pressure is measured. When the blood pressure is high, some people may have severe headaches, fatigue, chest pain, nose bleed, difficulty breathing. High blood pressure can put significant strain and bring serious problems to the heart, kidney and blood vessels. Therefore, it is important to have regular check-up or self-monitoring at home, especially if you are in a high-risk group e.g. obesity, smoking, sedentary lifestyle, having a family history, or eating a diet high in salt.

#### High cholesterol

You may have heard of good and bad cholesterol; high cholesterol usually refers to too much bad cholesterol in the body. 64% and 56.7% of Malaysian adults had elevated total cholesterol and lowdensity lipoprotein cholesterol (LDL-c), respectively. Similar to high blood pressure, high







cholesterol typically does not cause any symptoms. However, high cholesterol increases the risk of heart disease and stroke.

#### Cancer

Cancer is the 7th most common cause of death in Malaysia in 2021, accounting for 1.7% of all deaths. The most common cancers in



Malaysia are breast cancer, followed by colorectal cancer, lung cancer, nasopharyngeal cancer, and liver cancer, according to the World Health Organization. Breast, colorectal, and lung cancers consist of half of the total cancer cases reported by the Malaysia National Cancer Registry. Both breast cancer and cervical cancer are among the leading causes of death for Malaysian women with cancer. The

incidence of cancer increases with age (female: increased risk after the age of 40; male: higher risk after the age of 50-60). Therefore, regular screening is important.

# Mild cognitive impairment (MCI) and dementia (including Alzheimer's Disease)

Mild cognitive impairment is a condition in which the person experiences minor problems with memory and/or other mental abilities. However, the symptoms are not severe enough to interfere significantly with daily life. The incidence rate of MCI in Malaysia was 10.5 per 100 person-years. A community survey amongst Malays aged 60 years and above in Selangor, found that 24% were having cognitive impairment. Older adults with mild cognitive impairment have a significant increased risk of developing dementia, a condition characterised by progressive cognitive decline that affect the ability to function independently.

On the other hand, 8.5% of Malaysian older adults are having dementia. It is important to note that dementia becomes increasingly prevalent with older age, but it is not a normal part of aging, a common misconception. Symptoms to watch out for include memory loss that affect daily activity, disorientation to place and time, difficulty doing familiar tasks, difficulty communicating, asking questions repetitively, and getting lost in familiar environment. 12 modifiable risk factors for dementia include shorter duration of formal education, hypertension, hearing impairment, smoking, obesity, depression physical inactivity, diabetes, low social contact. excessive alcohol consumption, traumatic brain injury, and air pollution.

### How to think about age-related diseases?

While aging itself is not a disease, it is a risk factor for these different conditions. That does not mean you will have an age-related disease; it just means you are more likely to experience these conditions as you get older.

It is important to watch out for the effects of lifestyle factors like smoking, diet and fitness levels, as well as simple wear and tear, which can all accelerate the rate of decline in different people. Practising a healthy lifestyle at any age plays a crucial role to help prevent or delay the onset of these common health conditions. We must strive to follow a healthy diet, maintain healthy weight and body composition, stay active every day, quit smoking if you smoke, and get adequate sleep. Also, maintain a positive mindset and healthy social circle to keep oneself occupied.

In conclusion, good health adds good quality life to years. It is never too late. Start investing in your health today!

### 随着年龄增长, 需要注意的健康 状况有哪些?

庄瑞福医生,老年医学专科顾问 积极健康乐龄化计划

2022年,马来西亚人的出生预期寿命已达到73.4岁。到了2040年,预计将会有14.5%的马来西亚人达到65岁或以上。马来西亚人的长寿得益于收入增加、贫困减少,就业改善、城市人口增加、人均收入提高和健康意识增强等因素。 虽然长寿是值得引以为做,但事实上我们更应该希望在健康的情况下度过黄金岁月,或者至少推迟一些随着年龄增长而衍生的疾病。

在马来西亚,某些慢性病是导致老年人死亡和失能的一些最常见原因。因此,了解这些常见的健康状况极为重要,以便能够识别其症状,在需要时获得医疗援助,并采取预防措施来改善这些 网险闲套

#### 心血管疾病及其风险因素

心脏病发作和中 风是马来西亚老 年人死亡的主要 原因。心脏病发 作的原因是心脏 的血液供应被破 坏,通常是由的 块阻塞造成的。 心脏病发



状包括胸痛,疼痛从胸部蔓延到手臂/肩膀、下 巴、脖子、背部,呼吸急促,恶心,头晕。

而中风则是由血管阻塞或破裂,使得脑部的某个 区域的血流中断而引起。中风的症状可能包括面 部突然下垂、说话困难、肢体无力、视觉障碍或 不稳定。心脏病和中风的主要风险因素包括高血 压、高"坏"胆固醇、糖尿病、吸烟和暴露于二 手烟、肥胖、不健康的饮食和缺乏运动。值得注 意的是心脏病发作和中风两者都可以导致严重的 残疾和死亡。

#### 糖尿病

糖尿病是一种慢性 疾病,当胰腺不能 产生足够的胰岛素 (调节血糖的荷尔 蒙)或身体不能有 效利用其产生的胰 岛素时就会发生。 高血糖是糠尿病不



受控制的常见后果,随着时间的推移,会导致 身体的许多系统受到严重损害。糖尿病的并发 症涉及身体内大血管和小血管的损害,即心血管疾病、中风、肾脏疾病、神经损伤、失明和 足部问题。

糖尿病的风险会随着年龄的增长而增加。在马来 西亚,每三个老年人中就有一个患有糖尿病,而 马来西亚人患上糖尿病的趋势也越来越年轻化。 能尿病的前兆是有迹可循的,几个必须注意的早 期症状包括口渴、经常饥饿、不明原因的体重下 降、尿频、疲劳和视力模糊。然而,有些人可能 根本没有症状、在发生并发症后才被诊断出糖尿 病型,每年的筛查很重要,建议30岁开始 验测加糖。

#### 高血压

2019年的全国健康和发病率调查报告显示,马来西亚18岁及以上的成年人中,高血压的发病率为30.0%。在75岁及以上的老年人中,这一比例增



加到81.7%。高血压是一个无声的杀手,因为人们通常甚至不会意识到自己有高血压,直到血压被测量。当血压高时,一些人可能会有严重的头痛、疲劳、胸痛、流鼻血、呼吸困难等症状。高血压会给心胜、使用检查或在家里进行自我监测是很重要的,特别是如果你属于高危人群、如肥胖、吸烟、久坐、有家族病史或常吃高盐饮食。

#### 高胆固醇

你可能听说过"好"的和"坏"的胆固醇, 高胆固醇通常是指体内有太多的"坏"胆固醇。64%和56.7%的马来西亚成年人分别有 高"总胆固醇"和高"低密度脂蛋白胆固醇"(坏胆固醇)的健康状况。与高血压举似,高胆

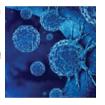
固醇通常不会引

起任何症状。然

而,高胆固醇会 增加患心脏病和中风的风险。



2021年,癌症是 马来西亚第七大 最常见的死亡原 因,占所有死亡 人数的1.7%。根 据世界卫生组织 的数据,马来西 亚最常见的癌症 是乳腺癌,其次



是结直肠癌、肺癌、鼻咽癌和肝癌。乳腺癌、结直肠癌和肺癌占马来西亚国家癌症登记处报告的 癌症病例总数的一半、乳腺癌和宫颈癌则是马来 西亚女性癌症患者的主要死亡原因之一。癌症的 发病率随着年龄的增长而增加(女性:40岁后风险增加;男性:50-60岁后风险更高)。因此,定期储含是很重要的。

#### 轻度认知障碍和失智症(包括阿尔茨 海默氏病)

轻度认知功能障碍是指一个人在记忆和/或其他 心理能力方面出现轻微问题的情况,而其特征 并不严重到足以严重干扰日常生活。在马来西 亚,轻度认知障碍的发病率为10.5/100人年。 在雪兰莪树60岁以上的马来人中进行的一项社 区调查发现,24%的人有认知障碍。患有轻度 认知障碍的老年人患失智症的风险大大增加, 失智症的特征是认知能力逐渐下降,影响独立运 作的能力。

另一方面,8.5%的马来西亚老年人患有失智症。值得注意的是,随着年龄的增长,失智症变得越来越普遍,但它不是衰老的正常部分,这是一个常见的误解。需要注意的症状包括影响日常现点和时间的迷失,做熟悉的工作有困难,沟通困难,重复问问题,以及在熟悉的环境中迷路。12个可改变的失智症风险因素包括接受正规教育的时间较短、高血压、听力障碍、吸烟、肥胖、抑郁、缺乏运动、糖尿病、社会接触少、饮酒过度、脑外伤和空气污染。

#### 该如何看待老龄化和有关的疾病?

虽然衰老本身不是一种疾病,但它是这些不同病症的一个风险因素。这并不意味着一定会患上这些疾病;这只是意味着随着一个人年龄的增长,人们更有可能经历这些状况。重要的是要注意生活方式因素的影响,如吸烟、饮食习惯和健康水平,这些都会影响我们的衰退速度。在任何年龄段实行健康的生活方式对帮助预防或推迟这些常见健康状况的发生起着关键作用。我们必须努力遵循健康的饮食习惯,保持健康的体重和身体成分,每天保持活动,避免吸烟,并获得充足的睡息。同时,保持积极的心态和健康的社变圈,使自己的告诺丰富多影。

总而言之,良好的健康会使人的生活质量提高很多年。关注健康,永远不嫌迟,今天就开始投资 于你的健康吧!





s we age, our bodies undergo several changes which ultimately affects our nutritional needs. Let us learn more on the role and importance of protein in fuelling our body to power up our golden years!

#### The importance of getting sufficient daily protein

Protein is an important nutrient that plays an integral role in various physiological functions (Table 1). As we age, protein becomes increasingly more important. Particularly when it comes to preserving muscle mass and strength, as our body may begin to lose them as early as at the age of 30. This is what is known as *sarcopenia*, a condition that describes a gradual loss of muscle mass, strength, and function due to ageing. Sarcopenia affects a staggering 59.8% of older adults aged between 60 to 70 years old (Reshmy, 2022). Therefore, as protein can help build, repair, and maintain body tissues (e.g. muscle, skin, etc.), it is important to consume enough protein to help potentially slow down the onset and progression of sarcopenia. Maintaining muscle mass and strength is also important as it can reduce the risks of back pain, falls and bone fractures. Sufficient protein intake can also help reduce recovery time from illnesses.

Table 1: Summary of the physiological functions of protein in the body

#### Functions of Protein in the Body

- Building and repairing tissues (e.g. muscle, bones, skin, etc.) when damaged
- Helps in the wound healing process
- Production of antibodies of the immune system
- Production of enzymes in the body which helps to regulate metabolism, digestion, and immune function

#### Meeting protein needs

We can obtain protein from both animal and plant-based sources. Common animal-based protein includes poultry, eggs, fish, meat, etc. Plant-based proteins such as tofu, chickpeas tempeh, etc. are also good sources of protein, and are generally lower in fat and packed with vitamins and minerals like the B vitamins, zinc, calcium, etc. According to the Malaysian Recommended Nutrient Intake 2017, it is recommended that on average, older male and females adults aged 60 years and above require around 58g and 50g of protein per day respectively. This is approximately equivalent to around 4 servings of protein foods per day (1 serving = 14g of protein).

Refer to Table 2 below to better visualise a single serving of

Table 2: Examples of different food portions that are equivalent to a single serving of protein

Food	Portion Equal to Single Serving of Protein
Chicken drumstick	A single medium drumstick
Lean beef	A palm sized portion
Chicken eggs	Two eggs
Ikan kembung	A single medium sized fish
Tofu	One and a half square pieces

A simple way to ensure we are eating enough protein as part of a balanced meal is by following the 'Quarter-Quarter-Half' healthy plate concept, which involves dividing each meal into a quarter plate of lean protein (e.g. grilled chicken breasts), another quarter plate of complex carbohydrates (e.g. rice. bread), and the remaining half plate of fruits and vegetables

(e.g. mixed vegetables/ulam and an apple). In addition to this, it is important to evenly spread the daily recommended intake of protein throughout the day for steady supply of protein and to stimulate muscle protein synthesis throughput the day. A full day example menu can be seen in Table 3 below. Additional tips include: (1) choose protein foods from both animal and plant sources, and (2) opt for fresh, lean cuts of meat - avoiding preserved/processed meats which are high in fats and sodium.

Table 3: Full day example menu

#### Breakfast

2 half-boiled eggs



· Half a plate of vegetables e.g. cucumber slice & mixed fruits (e.g. papaya, watermelon, apple, etc.)

#### Lunch

- Quarter plate of tofu with
- minced meat/stir-fried chicken Quarter plate of steamed brown rice
- · Half plate of stir-fried mixed vegetables/ vegetables stew (e.g. carrots, bok choi, etc.)

#### Snack

- 1 fruit (e.g. 1 orange, 1 slice of pineapple etc.)
- · 1 glass of milk

#### Dinner

- Quarter plate of grilled/steamed fish
- Quarter plate of steamed potatoes
  A bowl of vegetable soup



#### Consider your personal dietary need

There are various factors which affect one's physiological need for protein, for example those who are sick or recovering from an illness may require a higher protein intake to support healing and prevent muscle loss.

As a rule of thumb, you should be taking in 1.0 to 1.2 grams of protein per kilogram of your body weight in order to fight against muscle loss. However, it should be noted that older individuals with specific dietary requirements (e.g. those with kidney disease), or even those who find it difficult to chew. should consult with a dietitian to find out how to adjust meals to meet their daily protein requirements

Although there are many benefits of ensuring sufficient protein intake in older adults, eating protein alone is not enough. We should also strive to have a balanced diet and regular exercise, which can also help us maintain our health and independence

## 老年人需摄入 更多蛋白质

Zaitun Yassin 博士 营养师, 积极健康乐龄化计划

当年龄渐长,我们的身体会经历一系列变化,从而影响着我们对 营养的需求。现在就让我们来了解蛋白质对于老年人维持健康的 作用以及如何保证饮食中蛋白质的供给。

#### 在日常饮食中获取足够蛋白质的重要性

蛋白质是一种重要的营养素,对各种生理和机体功能起着重要作 用(见表1)。随着年龄的增长、尤其是在保持肌肉质量和力量方 面,蛋白质变得愈加重要。我们的肌肉量有可能从30岁开始就渐 渐流失,这种与年龄相关的肌肉质量、力量和功能的逐渐丧失我 们称之为肌少症。肌少症影响着过半(59.8%)60至70岁之间 的老年人。蛋白质可以帮助构建、修复和维护如肌肉、皮肤等身 体组织。因此,在日常饮食中摄取充足的蛋白质有利于维持肌肉 量及肌肉功能,进而减缓肌少症的发生和演变。保持肌肉质量和 力量也有助于降低背痛、摔倒和骨折的风险。摄取足够的蛋白质 还可以维持免疫系统,帮助縮短病愈期。

#### 表1: 蛋白质在体内的生理功能摘要

#### 蛋白质对身体发挥的作用

- 构建和修复受损组织(如肌肉、骨骼、皮肤等)
- 协助伤口愈合过程
- 帮助生产免疫抗体
- 生产身体内的酶以帮助调节新陈代谢、消化和免疫功能

#### 满足蛋白质需求

我们可以透过各种动物性和植物性来源获取蛋白质;常见的动物 蛋白来源质包括家禽肉、鸡蛋、鱼、各种肉类等。植物蛋白如豆 腐、鹰嘴豆、天贝等,也是很好的蛋白质来源,这些植物蛋白的 脂肪含量也较少,并富含维生素和矿物质,如B族维生素、锌、钙 等。根据2017年马来西亚的营养素推荐摄入量,60岁及以上的男 性和女性成人每天需要大约58克和50克的蛋白质,相当于每天摄 入约4份蛋白质食物(1份=14克蛋白质)。

以下图表2举例了一份蛋白质食物的食物量供参考

蛋白食物	相当于14g蛋白质的量
鸡腿	一只,中等大小
瘦牛肉	一块,掌心般大小
鸡蛋	两颗
鲭鱼(甘望鱼)	一尾,中等大小
豆腐	1.5块

要达到一日三餐中饮食均衡并摄入足够蛋白质的一个简单方法, 就是遵循 "1/4-1/4-1/2"的健康餐盘概念。即是在每顿餐中,瓜 分餐盘的四分之一为蛋白质食物(如烤鸡胸肉),四分之一为碳 水化合物食物(如米饭、面包),其馀的半盘则为蔬菜和水果 (如蔬菜沙拉和一个苹果)。除此之外,将每日建议的蛋白质摄 入量均匀分布在一日三餐,以确保一天内蛋白质的稳定摄取,并 促进肌肉蛋白合成。全天菜单示例可參照表3。在每日三餐中,我 们可以把动物性和植物性蛋白质食物换着吃, 但也别忘了多选择 新鲜的瘦肉,避免脂肪和钠含量高的加工或腌制肉类。

#### 表3: 一天菜单示例

#### 早餐 2颗鸡蛋





• 四分之一盘豆腐炒肉末/炒鸡肉

• 四分之一盘糙米饭

半盘炒杂菜/炖菜(如胡萝卜、菠菜等) 加餐

•一份水果(如1粒橙、1片黄梨等

• 1杯牛奶

晚餐

• 四分之一盘烤/蒸鱼

• 四分之一盘蒸马铃薯

一碗蔬菜汤



#### 考虑个人饮食需求

个人对蛋白质的需求也受多种其他因素影响,譬如患病或康 复中的病人可能需要更高的蛋白质摄取量以支持恢复和防止肌

在理想情况下,每公斤体重就需要摄入1.0至1.2克蛋白质,以抵抗 肌肉流失。然而,应注意的是,具有特殊膳食需求(如肾脏疾病 患者)或有咀嚼困难的老年人应咨询饮食治疗师,了解如何调整 饮食以满足每日的蛋白质需求。

尽管摄入足够的蛋白质对老年人有许多好处,但就健康饮食而 论,单凭摄入蛋白质是不够的。我们还应努力保持均衡的饮食和 定期运动,以帮助我们在老年时保持健康和独立。

Vaccinations as We Age

By Dr K C Wong, Consultant Physician, Positive Healthy Ageing Programme

hen we discuss about vaccination, we often assume that it is only for children. Vaccination is one of the important tenets in health maintenance and disease prevention in the elderly population. This is well demonstrated in the recent Covid-19 pandemic that ravaged this globe and emphasized the importance of vaccinations especially in the elderly. We will discuss the reasons for elderly vaccinations, the schedule and the recommendations especially in the adults above 65 years old.

### Why the elderly need vaccination?

As we age gracefully, we are more susceptible to diseases and infections. Some diseases like diabetes mellitus, chronic kidney disease, heart diseases, chronic lung disease and cancers make us prone to infections. This is due to in part also to degeneration of our immune systems qualitatively and quantitatively in terms of the cells or antibody response.

Thus, older adults are more likely to get sick and may suffer from more serious symptoms and complications when they are ill. This can result to a more prolonged illness, hospitalisation and even death. More-over recovery from the illness can be prolonged.

In addition, immunity acquired during childhood vaccination may wane over time. Hence, even though we have been vaccinated before, the protection may not last and we may need to get booster shots to keep ourselves protected against vaccine-preventable diseases. These are the few reasons why it is important for you to consult your doctor about vaccinations in the elderly to stay healthy.

### Which vaccines are recommended?

For the elderly the following are the recommended vaccines:

- COVID-19 vaccine: Coronavirus disease
  (COVID-19) is a respiratory infection
  caused by the SARS-CoV-2 virus. Older
  adults are at a higher risk of suffering from
  serious complications, especially those with
  underlying medical conditions like diabetes
  or heart disease. COVID-19 vaccine reduces
  the risk of getting this disease and protects
  us from getting seriously ill if we do get
  infected. Most Malaysian citizens have
  completed their primary doses during the
  nationwide COVID-19 vaccination drive.
  But consider getting the booster dose as well
  if you haven't received it!
- Influenza vaccine: Influenza or flu is easily transmitted from person to person. While it is usually a mild infection, it can be severe in vulnerable populations such as the elderly. They may develop serious complications such as pneumonia and have a higher risk of hospitalisation and mortality. Influenza vaccine should be taken annually this is because the flu virus mutates over time and the vaccine is updated every year to ensure it remains effective against the current virus strain.
- Pneumococcal vaccine: The bacteria pneumococcus causes one of the most common lung infections called pneumonia. This disease can spread by direct contact with respiratory secretions from patients and healthy carriers. Other than pneumonia, this disease can also lead to bacteraemia (blood infection) and meningitis (an infection of the brain), which can be fatal. All adults above 60 years old, especially those with underlying medical conditions

like chronic lung and heart diseases, are recommended to be vaccinated with Pneumococcal vaccine.

- Tdap vaccine: Tdap vaccine protects against tetanus, diphtheria and pertussis, three bacterial infections that can cause serious illness. Tetanus (lockjaw) causes muscles to contract involuntarily, diphtheria results in breathing difficulty and pertussis (whooping cough) causes severe coughing. As a child, most of us have been vaccinated against these diseases with DTaP vaccination, but the immunity wanes over time. Thus, a booster shot is recommended every 10 years to stay protected against these diseases.
- Shingles vaccine: The same virus, varicella-zoster virus, causes shingles and chickenpox. After a person has recovered from chickenpox, the virus still lingers in the body. As you get older, the virus may reactivate and cause shingles (Zoster), which can cause painful nerve pain at the site of

infection called Post-Herpetic Neuralgia. Even after the rashes disappear, 1 in 5 people may experience long-term pain. Shingles vaccine is recommended for people who are 50 years and above with a history of chickenpox to prevent this severe and debilitating neuralgic pain.

Keeping ourselves fit and healthy as we age is important so that we can continue doing things that we like and spending time with our loved ones. Vaccination is one way to achieve that. Certain vaccines such as influenza and pneumococcal vaccines may be available at public hospitals for the elderly with chronic medical conditions. You may also get vaccinations for adults at private health facilities. This is a general guideline - talk with your doctor to see the suitable vaccines for you and to learn more about vaccinations for the elderly.

Table of recommended immunisation for the elderly (≥ 65 years old)

Vaccines	Dosages	
COVID-19 vaccine	2-3 primary doses, booster doses as advised	
Influenza vaccine	1 dose annually	
Pneumococcal conjugate vaccine (PCV) or pneumococcal polysaccharide vaccine (PPV)	1 dose	
Tetanus, diphtheria, pertussis vaccine (Tdap)	Boost with Tdap/Td every 10 years (after completion of 3 doses of primary vaccination)	
Shingles (Zoster) vaccine	1 dose	
Meningococcal vaccine	1 or more doses	
Hepatitis A vaccine	2-3 doses depending on the type of vaccines	
Hepatitis B vaccine	3 doses	
Haemophilus influenzae type b vaccine (Hib)	1 or 3 doses depending on indications	

### 老年人疫苗接种 知多些

黄国忠医生,内科专科医生 积极健康乐龄化计划

谈论到疫苗接种, 我们通常只考虑到儿童。然而,这并不是儿童的专利,疫苗接种在老年人群中是保持健康和预防疾病的重要措施之一。近几年的新冠疫情大流行清楚地验证了疫苗接种的重要性,尤其是对老年人群。这里我们将讨论为何老年人需要接种疫苗,以及针对65岁以上老年人的奋苗接种建议。

#### 为什么老年人也需要接种疫苗?

年龄增长,我们的免疫力也随之下降,容易受 多种疾病感染。此外,老年人若患有如糠尿病、 肾脏疾病、心脏病、肺部疾病和癌症等疾病, 防公罹患感染性疾病的风险亦显着增加。这是 由于免疫系统在细胞或抗体反应方面的质量和 数量上都有所下降。一旦发生感染,其发生严 重症状和并发症的风险远高于其他人群,比如 可能导致病程更长、需要漫长的恢复期,住院 且容死亡

值得注意的是,在儿时接种获得的免疫力可能会 随着时间的流逝而减弱。因此,即使以往接种过 疫苗,其保护效果可能无法持续,从而需要接种 加强剂来保持免疫力以继续达到预防作用。这种 种原因都说明了为什么老年人应该咨询医生有关 干容苗接种以维持健康。

#### 推荐接种哪些疫苗?

以下是一些对老年人疫苗接种的推荐:

#### COVID-19新冠病毒疫苗

新型冠状病毒肺炎(COVID-19)是由SARS-CoV-2病毒引起的呼吸道感染。一旦感染,老年人患上严重并发症的风险更高,特别是那些患有糖尿病或心脏病等疾病的患者。新冠病毒疫苗可以降低感染的风险,并在不幸感染后保护我们免变重病情的侵害。大多数马来西亚公民的免疫在全国范围内的疫苗接种活动中完成了主要剂次。如果你还沒有接种加强剂,请考虑接种!

#### 流感疫苗

流行性感冒很容易通过人与人之间传播。虽然它通常是一种轻度感染,但在易感群体,如老年人中,可能会导致严重并发症,如肺炎,并具有更高的住院率和死亡率。流感疫苗应每年接种一次,这是因为流感病毒易于变异,不同年度流感疫苗针对的流感病毒株会有所差异,需每年接种以确保对当前病毒株的有效性。

#### 肺炎球菌疫苗

肺炎链球菌是导致最常见的肺部感染(肺炎)之 一的细菌。该疾病可通过与患者或健康带菌者的 呼吸道分泌物直接接触而传播。除了肺炎外,该 疾病还可引起败血症(血液感染)和脑膜炎(脑 感染)等,后果可能是致命的。建议所有60 岁以上的成年人,特别是那些患有慢性肺部和心 脏疾病等基础疾病的人,接种肺炎球菌疫苗。

#### Tdap疫苗

Tdap疫苗可预防破伤风、白喉和百日咳这三种 细菌感染。这些感染可导致严重疾病; 破伤风 (强直性痉挛)会导致肌肉不受控制地收缩, 白喉会导致呼吸困难,百日咳会引起严重的咳 嗽。大多数人可能在儿童时期已接种DTaP疫 苗,但免疫力会随着时间的推移而减弱。因此, 建议每隔10年接种一次加强剂,以保持对这些 疾病的免疫力。

### 带状疱疹疫苗

水痘-带状疱疹病毒是引起带状疱疹的元凶,与 水痘是同一种致病病毒。一旦出过水痘,此病毒 会一直存留在体内。随着年龄增长,病毒可能会 再次活化并引起带状疱疹。带状疱疹可能会在感 染部位引起神经病理性疼痛,称为带状疱疹后神 经痛。即使皮疹消失,每5个人中会有1人可能 经历长期疼痛。建议50岁及以上的人,尤其是 有水痘病史的人,接种带状疱疹疫苗,以预防 这种严重影响患者生活质量的神经痛。

当年齡新长,维持身体健康对我们能够继续做自己喜欢的事情并与所爱的人共废时光尤为重要。 疫苗接种是实现此目标的一种方式。某些公立医 院可为患有慢性疾病的老年人提供某些疫苗接 种,如流感和肺炎球菌疫苗,您也可以在私立医 疗机构询问接种以上成人疫苗。温馨提醒以上所 提只属一般疫苗接种推荐,请向您的医生咨询以 了解适合您个人的疫苗以及有关老年人疫苗接种 的更多信息。

### 老年人(≥65岁)疫苗接种推荐

疫苗	剂量
新冠病毒疫苗	2-3剂主要剂次,根据建议接种加强剂
流感疫苗	每年1剂
肺炎球菌结合疫苗(PCV)或 肺炎球菌多糖疫苗(PPV)	1剂
破伤风、白喉、百日咳疫苗(Tdap)	完成3剂主要疫苗接种后,每10年接种一次Tdap/Td加强剂
带状疱疹疫苗	1剂
脑膜炎球菌疫苗	1剂或更多剂
甲型肝炎疫苗	取决于疫苗类型,2-3剂
乙型肝炎疫苗	3剂
B型流感嗜血杆菌疫苗	取决于适应症,1剂或3剂

# Nutrition for your golden years

By Dr Tee E Siong Consultant Nutritionist & Chairman, Positive Healthy Ageing Programme

utrition is important at all ages, especially as we grow older. As we age, we are more prone to health issues such as reduced bone density, age-related muscle loss, weakened immune system, and the risk for certain diseases such as high blood pressure, diabetes, heart diseases can rise. By having healthy nutrition through the golden years, we can help to maximise body function, keep the immune system strong, reduce the risk of health issues or delay the onset of diseases, so as to stay healthy, energised and independent for longer.

### Age-related factors may make it harder for us to eat as we age

However, ageing also bring changes in our bodies that affect nutritional intake and make it challenging for us to ensure receiving optimal nutrition.

Over time, our metabolic rate slows and with a less active lifestyle, we need fewer calories than we do when we were younger At the same time, our body tends to become less efficient at digestion and nutrients absorption due to the lower production of digestive enzyme, secretion of stomach acid and weaker muscular contraction along the digestive tract. Our appetite can also decrease with the gradually declined sense of smell and taste, especially after age 60. Reduced appetite in old age can also be the result of illness or medication. These may cause us to skip meals, and some may also have problems chewing or swallowing foods. These factors are putting us at a higher risk of not meeting the requirements for some important nutrients. The risk for dehydration is also higher as there is a diminished sensation of thirst with ageing.

In fact, three out of ten older adults in Malaysia have been found to be suffered from malnutrition. Several local studies have also shown that older adults in Malaysia are not consuming enough key nutrients such as protein, B vitamins, vitamin D, vitamin E, iron, calcium, zinc, essential fatty acids and dietary fibre. Three in ten elderlies also do not drink enough water daily.

## Eating balanced and nutrient dense diet is important

The nutritional challenges with ageing can be addressed with a healthy, balanced and nutrient-dense diet and some lifestyle changes:

- Follow Malaysian Healthy Plate 'Quarter-Quarter-Half' for each meal. It is any easy way to help you having a well-balanced meal with a right proportion of each food group. Here is how:
- Fill quarter plate with grains or grain products, preferably whole grains
- Fill quarter plate with good sources of lean protein e.g. lean poultry or meat, fishes, eggs, tofu, tempeh
- Fill half plate with fruit and vegetables
- Make plain water or milk your drink of choice
- Instead of three big meals, opt for five or six smaller meals throughout (e.g. 3 main meals, 2-3 healthy snacks) the day. Go for nutrientdense foods containing higher vitamins, minerals and dietary fibre. This helps to ensure we get an adequate amount of essential nutrients even with smaller meals. Tips for choosing nutrient-dense foods from each food group:
  - Grains or grain products. Choose more wholemeal varieties of rice, noodles, breads or other



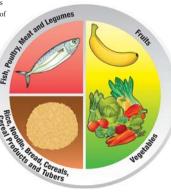
whole grains/wholegrain foods such as oat, barley, millet. They provide higher amount of dietary fibre and B vitamins.

Meat/poultry/fish/egg/tofu/tempeh.

These foods provide good quality protein that is important to help maintain our muscle mass. Include protein foods from both animal and plant sources



in your meal. For animal protein, choose skinless poultry or lean cuts of meat and avoid fatty meats or preserved meats that are high in fats and sodium. Fish is an excellent option as it is an easier to digest protein than meats and poultry. Fishes such as tuna, herring, sardines, mackerel and salmon are also good sources of a type of polyunsaturated fatty acids (PUFAs) called omega-3 fatty acids, which have been shown to support cognition/memory health, eye health, heart health, immune function as well as muscle function in older adults. Fish can be consumed everyday as part of healthy diet. On the other hand, plant-based foods such as tofu and other soya-based foods, tempeh, beans, peas, and lentils are not only great sources of protein, they also provide additional nutrients, such as calcium and



 Fruits and vegetables. These foods are packed with vitamins, minerals and phytonutrients. Go for variety and eat fruits and vegetables of different colours every day. Colourful fruits and vegetables also make the meals more appealing and help to improve appetite.



-Milk/Dairy products. Milk and dairy products such as yoghurt and cheese are good sources of calcium, which is important for bone health and lowering the risk of fractures. Aim to have 1-2 servings of milk or dairy products.



Some milks are also fortified with important nutrients such as vitamin A, vitamin B complex, vitamin C, vitamin D, vitamin E, magnesium, iron, zinc, probiotics, prebiotic etc, which could help to fill the nutrient gaps in our diet. For older adults with low appetite, fortified milk can be a convenient part of daily diet and simple way to help meeting daily nutritional needs. One way to identify a fortified milk is by reading the food and nutrition label at the milk packaging. You can also consult a nutritionist or dietitian to know more about your needs of fortified milk.

- To improve appetite, enhance flavours with natural flavour enhancers, spices and herbs such as ginger, garlic, citrus juice, onion, lemongrass, cloves, star anise, mint, cinnamon, instead of salt and sugar.
- For snacks in between main meals, opt for healthier and nutrient dense snacks such as fruits, milk, steamed wholemeal bun, mung bean soup, tauhu sumbat, popia basah, tau fu fa.
- If chewing is a problem, go for finely chopped meat/soft cooked vegetables, or try different cooking methods such as soup and stew.

Healthy nutrition plays important roles in the way one age and crucial for supporting general health. While age brings about challenges to dietary intakes, with some planning and modification, we can still meet the nutritional demands to stay strong and healthy.

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### 健康营养,健康晚年

#### 郑怡祥博士

#### 营养顾问 & 积极健康乐龄化计划主席

营养在各个年龄段都非常重要, 特别是对老年群 体,健康营养尤其重要。随着年龄的增长,长者 更容易受健康问题影响,例如骨密度逐渐降低、 肌肉流失、免疫系统减弱以及高加压、糖尿病、 心脏疾病等疾病的风险增加。然而, 透过在晚年 时保持健康均衡的营养, 我们可以帮助身体最大 限度地发挥其功能,增强免疫系统,降低健康 问题的风险或延缓疾病的发生,从而帮助确保健 康 精力充沛和独立的老龄生活。

#### 老龄化带来营养挑战

与其他人群相比、伴随着老化出现的身体变化让 老年人群面临更多的营养风险。随着年龄增长, 我们的新陈代谢率减缓,加上不活跃少运动的生 活方式,使得我们需要的热量比年轻时要少。与 此同时,由于消化酶的产生减少。胃酸的分泌以 及消化道肌肉收缩减弱,导致食物消化和营养吸 收功能减退。尤其在60岁后,老年人的食欲也 可能会减少,除了衰老,老年人食欲不振也可能 是由疾病或药物副作用引起的。因此,无法摄入 足够重要营养素的风险也跟着提高,此外,老年 人感到口渴的灵敏度也随着年龄减弱, 脱水的风 险也更高。

实际上,马来西亚的三分之一的老年人患有营养 不良的风险。几项国内研究也显示, 马来两亚的 老年人摄取的关键营养素不足,包括蛋白质、维 牛素B群、维牛素D、维牛素E、铁、钙、锌、 必需脂肪酸和膳食纤维。三成老年人每天的喝水 量也不足。

#### 均衡,高营养密度的饮食对老年人 至关重要

老龄化带来的营养问题可以通过健康、均衡、营 养密集的饮食和一些生活方式得到改善和解决:

• 遵循马来西亚健康饮食餐盘 "四分之一 - 四 分之一 - 一半"的概念进餐,这简易的方法 有助于摄入均衡的饮食, 保持每种食物类别的



合理比例,只需以下简单步骤就能做到:

- 将餐盘的四分之一用于盛放谷类或谷类制 品, 最好选择全谷物;
- 将餐盘的另外四分之一用于盛放良好的蛋白 质来源,如瘳禽肉或肉类、鱼类、鸡蛋、豆 腐、天贝;
- 水果和蔬菜占餐盘的 一半
- 选择白开水或牛奶作为首选饮品
- 心會多餐讲會。每天吃五到六顿的小餐。洗 择含有更多维生素、矿物质和膳食纤维的营 养密集型食物。以下是如何在每个食物类别 中选择营养密集型食物的一些小贴士:
- 谷类或谷类制品: 多选择全麦米饭、全麦 面条、全麦面包或其他全谷物食品,如燕 表、大表、小米等。它们含有更多膳食纤 维和B族维生素。
- 肉**类/禽类/角类/蛋/豆腐/天贝:** 这些食物提 供优质蛋白质,有助于维持我们的肌肉质 量。我们可以把动物性和植物性蛋白质食 物换着吃。对于动物蛋白质,选择去皮的 禽肉或瘦肉,避免高脂肪和高钠的加工或 腌制肉类、鱼类是一个很好的选择、比起 肉类和禽类更容易消化。金枪鱼、鲱鱼、 沙丁鱼、鲭鱼和三文鱼等鱼类也是多元不 饱和脂肪酸 (omega-3脂肪酸)的良好来 源,这些脂肪酸在支持老年人的认知/记忆 健康、眼睛健康、心脏健康、免疫功能以 及肌肉功能等方面有一定作用。鱼类可作

为健康饮食的一部分,每天食用。另一方 面,植物性食品如豆腐和其他豆制品、天 贝、豆类不仅是良好的蛋白质来源,还提供 额外的营美素 加红和雌會纤维,

- 水里和蔬菜: 这些食物富含维生素、矿物质 和植物营养素。在一天中可多样化食用不同 颜色的水果和蔬菜。不同颜色的蔬果也会使 餐食更具吸引力,有助于改善食欲。
- **牛奶/乳制品**:牛奶和乳制品,如酸奶和奶 酪是钙的良好来源,对于骨骼健康和降低骨 折风险至关重要。老年人可每天适量摄入 1-2份牛奶或乳制品。
- •除了丰富的钙,一些强化奶还添加了重要 的营养素,如维生素A、维生素B群、维生 素C、维生素D、维生素E、镁、铁、锌、 益生菌、益生元等,这些营养素有助于填 补我们饮食中的营美缺口, 对于食欲较低 的老年人来说,饮用强化牛奶可在日常饮 食中帮助满足日常营养需求。我们可以查 看牛奶包装上的食品和营养标签来辨认强

化牛奶。你也可以向营养师或饮食治疗师 咨询更多关于强化奶的信息。

- 在偿进會欲方面 减少盐和糖的使用 多使用 天然调味品、香料和香草,例如姜、大蒜、柑 橘汁、洋葱、香茅、丁香、八角、薄荷、肉桂 等增加食物的风味
- 选择更健康、营养密集的零食,例如水果、牛 奶、蒸馒头、绿豆汤、蔬菜酿豆腐、春卷、豆 腐花等.
- 存在咀嚼困难的年长者可多注意食物的质地, 选择切碎的肉类/软煮的蔬菜,或尝试不同的 烹调方法,如汤和炖菜,以协助进食。

健康的营养在我们的老龄化过程中起着重要的作 用,对于维持整体健康至关重要。只要通过一些 饮食上的改变和调整,老年人群一样可以满足身 体对营养的需求, 保持强壮和健康。

此教育文章中积极健康乐龄化计划撰写, 并获得 Anlene Malaysia给予教育资助。





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