

# NUTRITION NEWS

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MAY 2020

## Older American's Month

May is Older American's Month. In 2020, Older American's Month will have the theme of "Make your Mark." This is in an effort to highlight the ways that older Americans enrich our communities. They donate their time, offer their experiences, and share their talents with family, peers, and other community members. Their contributions are numerous and should not be discounted.

As most of us unfortunately know, as we age, our risk of dementia increases. But did you know that obesity can also increase your risk of developing dementia?

A recent study that followed one million women for 20 years suggests that obesity in midlife is linked to a greater risk of dementia later in life. The study found that women who were obese at the start of the study had a 21% greater risk of dementia compared with women who had a desirable BMI. It is important to note that this study is limiting as it only looked at women and not men. Obesity is well linked to cerebrovascular disease. And

since cerebrovascular disease is definitely linked to dementia, it makes sense that obesity can also play a role in the development of dementia.

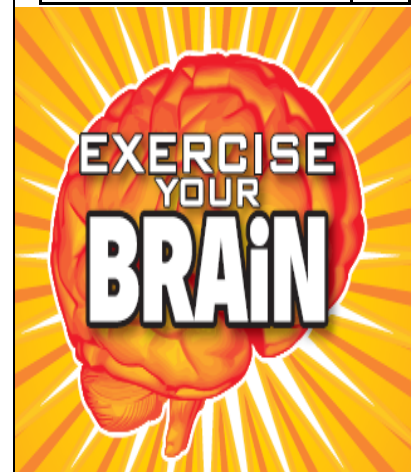
Other ways to reduce your risk of dementia include the following:

1. Be physically active— each week aim for 150 minutes of moderate aerobic activity.
2. Eat a healthy diet— aim for a diet rich in fruits, vegetables, and whole grains, and low in fat and sodium.
3. Don't smoke— this is the single most preventive step you can take to cut your risk of a number of different chronic conditions.
4. Drink less alcohol—try incorporating lower alcohol or non-alcoholic "cocktail."
5. Exercise your mind daily—reading, puzzles, and card games can all improve your mental acuity.



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Did you know that medications can interact with other medications? Did you know that medications can interact with food? Food and medication can have interactions that are potentially dangerous. It is important to check with your physician and pharmacist for a list of foods to avoid or limit and also the timing of eating in regards to taking your medication.

Drug interactions may make your medications less effective. In other circumstances, it may actually make your medication “too effective”; that is, consuming certain foods at the same time as your medication may speed up your body’s absorption of the medication, thereby making the results intensified.

Common oral medications used to treat diabetes are some of the most common medications prescribed today. Fortunately, the differing medications have different mechanisms to control your blood sugar. Therefore, if you have an unwanted side effect from a specific medication you may be able to choose one that works differently and obtain better results. Metformin (or Glucophage) can cause bloating, gas, diarrhea, and a loss of appetite. Glyburide may cause unintentional episodes of low blood sugar. Actos can cause fluid retention, which may increase the incidence of congestive heart failure in at risk individuals.

Medications used to treat hypertension (or high blood pressure) are also very common. Some of these medications include Lisinopril, Lasix, Captopril, Norvasc, and Atenolol. Diuretics (such as Lasix) may cause a dangerously low potassium level, as potassium is excreted in the urine. Sym-

ptoms of low potassium include weakness, fatigue, and leg cramps. Occasionally, diuretics cause an increase in blood sugar levels, specifically in diabetic patients. Therefore, an adjustment in diabetic oral agents may also accompany a prescription of a diuretic. Other common side effects of blood pressure medications include insomnia, cold hands and feet, skin rash, dizziness, or dry mouth.

Lastly, cholesterol medications are a known class of medicine that interact with grapefruit and grapefruit juice. Other medications, including certain antibiotics, blood pressure medications, and cardiac medications. Chemicals in the fruit can interfere with the enzymes that break down the medication in your digestive system. As a result, the medication may stay in your body for too short or too long a time. If the medication is broken down too quickly, it may not have time to work. And if the medication stays in the body too long, it can increase to potentially dangerous levels, causing serious side effects.

Keeping an updated detailed list of medications (including dosage and timing) in your wallet or on your fridge can possibly help prevent medication mix-ups. It is also important to share it with each and every doctor that you see, especially if they are located in different facilities. This will help ensure that one prescriber does not order something that interacts with a drug that a different physician prescribed.



Did you know that mushrooms have been used for thousands of years for their medicinal purposes? The early Greek, Roman, Chinese, and Mexican civilizations have all used mushrooms as medicine through the years.



“Medicinal mushroom” usually refers to the more exotic, specialty mushrooms. However, even common white button mushrooms may still have some medicinal value.

Although classified as vegetables, they are technically fungi. They are relatively high in protein and are also an important source of carbohydrates. They also contain chitin, a form of dietary fiber that is found in the exoskeletons of insects and crustaceans, but not in plants. Lastly, mushrooms contain beta-glucans, which are bioactive compounds that stimulate the immune system.

The beta-glucans have been the primary focus of the medicinal interest in mushrooms. Some mushrooms are higher than others in these compounds. Oyster and enoki mushrooms are relatively high, while white button mushrooms contain much less.

Mushrooms are also high in several key vitamins, including the B vitamins riboflavin and niacin. And while they only contain low amounts of B12, the form of B12 highly bioavailable.

According to a recent study, some of the best evidence for the benefits of medicinal mushrooms relates to cancer. Mushrooms are especially important for the prevention and treatment of oncological diseases. Much of the research has focused on breast cancer. Isolated specific compounds from mushrooms were shown to inhibit breast cancer growth. There is also emerging evidence to suggest that compounds from mushrooms may be effective against liver cancer, uterine cancer, bladder cancer, leukemia, and gastric cancer.

There are some mushroom supplements on the market now. They are available in a variety of forms, including tablets, hard capsules, soft capsules, tinctures, and granules. It is always important to consider that adding the true food may be more beneficial than taking a supplement. It is also important to note that this evidence is just emerging and is in no way a substitution for more typical medical treatments for cancer.

Lastly, clinical studies are showing that mushroom consumption may help to protect against other diseases and conditions, including obesity, heart disease, and Type 2 diabetes. The research is not conclusive, but it is promising!

Here is a mushroom recipe for you to try!

### **Gourmet Mushroom Risotto**

6 cups chicken broth, divided

3 tbs olive oil divided

1 pound Portobello mushrooms, thinly sliced

- 1 pound white mushrooms, thinly sliced
- 2 shallots, diced
- 1 1/2 cups Arborio rice
- 1/2 cup dry white wine
- Sea salt to taste
- Freshly ground black pepper to taste
- 3 tbs finely chopped chives
- 4 tbs butter
- 1/3 cup freshly grated Parmesan cheese

In a saucepan, warm the broth over low heat. Warm 2 tbs olive oil in a large saucepan over medium high heat. Stir in the mushrooms, and cook until soft, about 3 minutes. Remove mushrooms and their liquid, and set aside.

**HEAP**

If you received HEAP last year but have not yet received an application for this year, please call our Office at 867-1195.

If you did not receive HEAP last year but want to apply this year, please call our Office at 867-1195.

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Funding for this newsletter is from the NYS  
Office for the Aging & Herkimer County

Add 1 tbs olive oil to skillet and stir in the shallots. Cook 1 minute. Add rice, stirring to coat with oil, about 2 minutes. When the rice has taken on a pale, golden color, pour in the wine, stirring constantly until the wine is fully absorbed. Add 1/2 cup broth to the rice, and stir until the broth is absorbed. Continue adding broth 1/2 cup at a time, stirring continuously, until the liquid is absorbed and the rice is al dente, about 15 to 20 minutes. Remove from heat, and stir in mushrooms with their liquid, butter, chives, and parmesan. Season with salt and pepper to taste.

May is also National Salad Month! Here's a different recipe to share at a gathering.

**Roquefort Pear Salad**

- 1 head leaf lettuce, torn into bite size pieces
- 3 pears— peeled, cored, and chopped
- 5 ounces Roquefort cheese, crumbled
- 1 avocado— peeled, pitted, and diced
- 1/2 cup thinly sliced green onions
- 1/4 cup white sugar
- 1/2 cup pecans
- 1/3 cup olive oil
- 3 tbs red wine vinegar
- 1 1/2 tsp white sugar
- 1 1/2 tsp prepared mustard
- 1 clove garlic, chopped
- 1/2 tsp salt

Fresh ground black pepper to taste

In a skillet over medium heat, stir 1/4 cup sugar with pecans until sugar is melted and pecans are caramelized. Allow to cool and break into pieces. For the dressing, blend oil, vinegar, 1 1/2 tsp sugar, mustard, garlic, salt, and pepper. In a large bowl, layer lettuce, pears, blue cheese, avocado, and onions. Pour dressing over salad and sprinkle with pecans.