

# Food and Fitness

## Inside this issue:

**The Truth About Significant, Unintentional Weight Loss in the Elderly** 1-2

**Spotting the Signs of Weight Loss** 3

**Fruit—Black Olives** 4-5

**Recipe—Fabulous Olive Salsa by James** 6

**Brain Exercise** 7

**Monthly Observation** 8

**Contact Information**

## The Truth About Significant, Unintentional Weight Loss in the Elderly

Weight loss is something that is often looked at as a good thing, but is not always good when you are losing a significant amount unintentionally. The elderly are an age group that this can impact negatively the most. When weight loss happens without trying, it can throw up some red flags. When you or someone you love loses a significant amount of weight without meaning to, it isn't necessarily healthy and could be a warning sign.



What does significant weight loss or unexplained weight loss mean? According to the Mayo Clinic, unexplained weight loss, or losing weight without trying—particularly if it's significant or ongoing—many be a sign of a medical disorder. It is defined as losing more than 5% of your body weight within 6 to 12 months. Examples of significant, unexplained weight loss would be someone who weighs about 160 pounds and has lost 8 or more pounds in 6 to 12 months, or someone that is 100 pounds that presents with a 5 pound weight loss in that same time frame.

Why does this happen in the elderly? There are many reasons. One of the major factors is loss of taste or a reduction in taste. When you lose your ability to taste as you once had, it can make food much less enjoyable. Other issues can be related to chewing, swallowing, memory issues, and even food access. Food access can mean transportation challenges all the way to not having enough money to buy groceries.

## The Truth About Significant, Unintentional Weight Loss in the Elderly

Problems can start to arise when you have this kind of weight loss. A common symptom is feeling tired and weak all of the time. Food is fuel for energy, and when you are not getting the right amount of energy, it can be draining. Another concern is bone health. Bones can become fragile when they are not getting the right nutrients. To add to those, immune health can be impacted, making it harder to fight off illnesses. Paying attention and addressing significant, unintentional weight loss sooner than later can go a long way in preventing these issues.

What are some other signs? The first is recognizing there has been weight loss. Most people have a good idea of what they look like and notice a change in their body weight. If you are looking at someone you love, you may notice this as well. It is good practice to have a scale that you use consistently, because one doctor's office scale may vary from another doctor's office scale. Maybe you keep a scale at home or even use a relative's or neighbor's scale. Also, skipping meals or only eating small amounts in comparison to before is another sign. The underlying issues here could be related to many medical conditions. They may have memory loss and forget to eat, or they may have issues swallowing and try to eat very little. Lastly, the amount of food one has in their home can be another sign. Sometimes noticing that people do not have the food they need can create a storm of issues with food insecurity.

All of these things can be serious, but the good news is that there are solutions. The first step is to identify there is a problem with weight loss. The next step is to determine the cause of the weight loss: talk to your primary care provider to discuss the issue of unintentional weight loss so they can guide you in the direction that gets you back on track. The third is to maintain a good understanding of your weight and follow your doctor's guidance to prevent it from happening again.



# Spotting the signs of weight loss



Shirt collars **looser**

**Looser** dentures

**Thin** arms

Belts and waistbands **looser**

Jewellery **looser** or **slipping off**

Clothes look **too big**

Shoes and slippers **looser**

**Thinner** legs



## Where to go for help

If you or someone you know are concerned, it's best to seek individual advice from **your Practice Nurse** initially, unless you have a medical issue, in which case you should make an appointment with **your GP**. **Your community pharmacist** may also be able to provide support and advice.

Your **local community organisation** (e.g. Age Concern) and **the council** can also provide information, and a range of options to support you.



**Wessex**  
Academic Health  
Science Network

You can also **email Wessex AHSN** for more information and a leaflet about nutrition: [nutrition@wessexahsn.net](mailto:nutrition@wessexahsn.net)

Visit: [wessexahsn.org.uk](http://wessexahsn.org.uk) Follow: [WessexAHSN](https://twitter.com/WessexAHSN)





# Fruit—Black Olive

Black olives are a fruit that grows on a tree. They are small and belong to a group of fruit called the drupes or stone fruit. They are also related to the mango, cherry, peach, almond, and pistachio.

When the olives are harvested, they are fully matured. The olive goes through a process of debittering and curing to give them their texture and flavor. When the olive is cured, it changes from green to black, and curing develops the unique flavor. There are a few different methods to cure olives, but the most common method is to soak them in a brine. One option for a brine is a water, salt, vinegar method. They brine for several weeks to several months.

Olives are often enjoyed in the Mediterranean diet. They are used for snacking, added to salads or pizza, pasta dishes or in dips. However, most of the olives grown are turned into olive oil.

As far as nutrition is concerned, they contain vitamin E, iron, copper, calcium, sodium, and other antioxidants. They also contain healthy fats which are often extracted to produce olive oil.

WHAT IS THIS FOOD MADE OF?



83.1%	Water	32.5g
0.9%	Protein	0.35g
6.2%	Carbs	2.4g
9.8%	Fat	3.8g
0%	Alcohol	0g

WHERE DO THE CALORIES COME FROM?



4%	Protein
21%	Carbs
75%	Fat
0%	Alcohol

## Minerals

		-- = missing data	%DV
Weight	40g		
Calcium	36mg		3%
Iron, Fe	1.3mg		7%
Potassium, K	3.2mg		0%
Magnesium	1.6mg		0%
Phosphorus, P	1.2mg		0%
Sodium	294mg		12%
Zinc, Zn	0.09mg		1%
Copper, Cu	0.1mg		11%
Manganese	--mg		--%
Selenium, Se	0.36mcg		1%
Fluoride, F	--mcg		--%

## Nutrition Facts

### Olives Black

Serving Size:

1 × 10 medium ( 40g)



## Nutrition Facts

Serving Size

10 medium (40g)

**Calories 42**

% Daily Value \*

Total Fat 3.8g	5%
Saturated Fat 0.51g	3%
Trans Fat --g	
Cholesterol 0mg	0%
Sodium 294mg	12%
Total Carbohydrate 2.4g	1%
Dietary Fiber 1.2g	4%
Total Sugars 0g	0%
Includes --g Added Sugars	--%
Protein 0.35g	1%
Vitamin C 0.44mg	0%
Vitamin D 0mcg	0%
Iron 1.3mg	7%
Calcium 36mg	3%
Potassium 3.2mg	0%
Phosphorus 1.2mg	0%

\*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

## Vitamins

-- = missing data %DV

Weight	40g	
Vitamin A, RAE	7.6mcg	1%
Vitamin C	0.44mg	0%
Thiamin (B1)	0mg	0%
Riboflavin (B2)	0mg	0%
Niacin (B3)	0.01mg	0%
Vitamin B5 (PA)	--mg	--%
Vitamin B6	0mg	0%
Biotin	--mcg	
Folate (B9)	0mcg	0%
Folic acid	0mcg	0%
Food Folate	0mcg	0%
Folate DFE	0mcg	0%
Choline	3.7mg	1%
Vitamin B12	0mcg	0%
Retinol	0mcg	
Carotene, beta	90.8mcg	1%
Carotene, alpha	0mcg	0%
Cryptoxanthin, beta	3.6mcg	0%
Vitamin A, IU	--IU	
Lycopene	0mcg	
Lut + Zeaxanthin	204mcg	
Vitamin E	0.66mg	4%
Vitamin D	0mcg	0%
Vitamin D2	--mcg	
Vitamin D3	--mcg	
Vitamin D (IU)	--IU	--%
Vitamin K	0.56mcg	0%

## Recipe—Fabulous Olive Salsa by James

### Ingredients

- 1 (6 ounce) can pitted black olives, or more to taste
- 1 (4 ounce) can chopped green chilies
- 1 large white onion, cut into large chunks
- 2 tomatoes, cored
- 3 tablespoons olive oil
- 1 ½ tablespoons red wine vinegar
- 4 cloves garlic, peeled
- 3 drops hot pepper sauce (such as Tabasco®), or to taste



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*Recipe Received From: [Fabulous Olive Salsa by James Recipe](#)*

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### Instructions

1. Drain green and black olives and green chilies in a colander.
2. Chop white onion in a food processor, pulsing several times. Add green and black olives, green chilies, tomatoes, olive oil, red wine vinegar, garlic, and hot sauce to the processor. Pulse several more times to mix; process until chunky, 20 to 30 seconds.
3. Enjoy!

# Brain Exercise

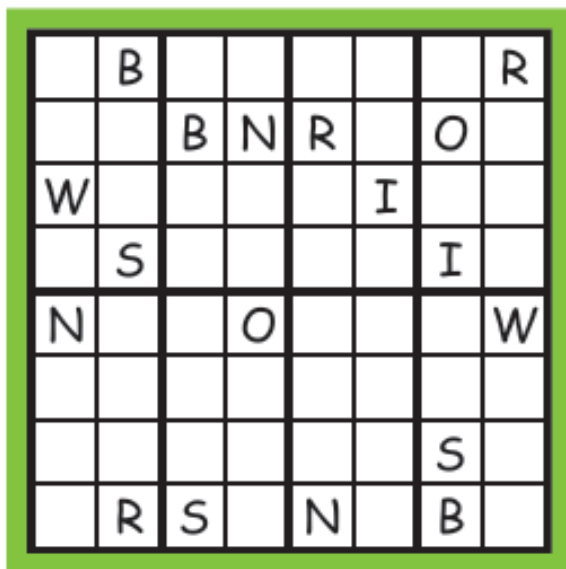
Don't Just Exercise your body, workout your brain!



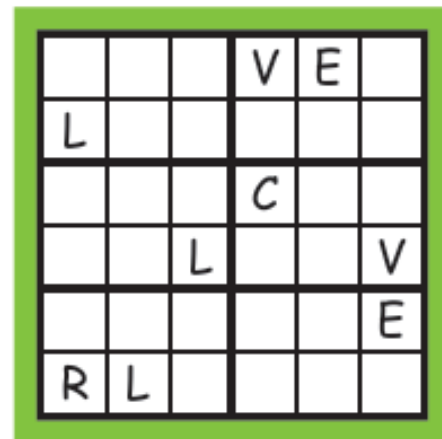
## Saint Paddy's Sudoku

DIRECTIONS: Fill in the grids so that each horizontal row contains each letter exactly once, each vertical column contains each letter exactly once, and each subgrid contains each letter exactly once. We recommend you use a pencil.

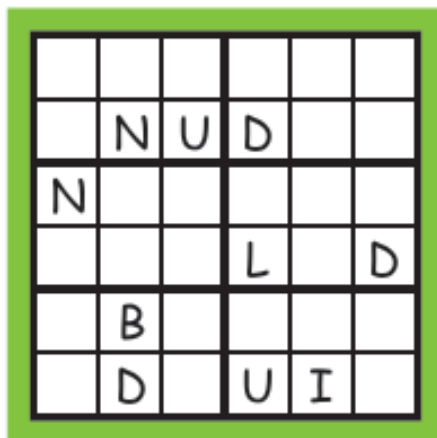
RAINBOWS



CLOVER



DUBLIN



SHAMROCK



# March 2025

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1 <i>Peanut Butter Lovers Day</i>
2 <i>Old Stuff Day</i>	3 <i>Caregiver Appreciation Day</i>	4 <i>National Snack Day</i>	5 <i>Ash Wednesday</i>	6 <i>National Oreo Cookie Day</i>	7 <i>National Cereal Day</i>	8 <i>Genealogy Day</i>
9 <i>Get Over It Day</i>	10 <i>Middle Name Pride Day</i>	11 <i>Johnny Appleseed Day</i>	12 <i>Plant a Flower Day</i>	13 <i>Popcorn Lover's Day</i>	14 <i>National Pi Day</i>	15 <i>Corn Dog Day</i>
16 <i>Giant Panda Bear Day</i>	17 <i>Saint Patrick's Day</i>	18 <i>Tea for Two Day</i>	19 <i>Poultry Day</i>	20 <i>Earth Day</i>	21 <i>Fragrance Day</i>	22 <i>As Young As You Feel Day</i>
23 <i>Chip and Dip Day</i>	24 <i>National Cheesesteak Day</i>	25 <i>Pecan Day</i>	26 <i>National Spinach Day</i>	27 <i>National "Joe" Day</i>	28 <i>Something on a Stick Day</i>	29 <i>World Piano Day</i>
30 <i>National Doctor's Day</i>	31 <i>World Backup Day</i>					

## MONTHLY



- Irish American Heritage Month
- Music in Our Schools Month
- National Celery Month
- Craft Month
- Frozen Food Month
- National Nutrition Month
- Peanut Month
- Red Cross Month
- Social Workers Month



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## Saint Paddy's Sudoku

### SOLUTIONS

RAINBOWS

O	B	I	S	A	N	W	R
I	A	B	N	R	W	O	S
W	N	O	R	S	I	A	B
R	S	W	A	O	B	I	N
N	I	A	O	B	S	R	W
S	W	R	B	I	A	N	O
B	O	N	I	W	R	S	A
A	R	S	W	N	O	B	I

CLOVER

O	C	R	V	E	L
L	E	V	R	C	O
E	V	O	C	L	R
C	R	L	E	O	V
V	O	C	L	R	E
R	L	E	O	V	C

SHAMROCK

C	M	O	A	H	R	K	S
H	K	R	S	O	M	A	C
A	R	S	H	K	O	C	M
O	C	M	K	R	A	S	H
S	H	A	C	M	K	O	R
R	O	K	M	C	S	H	A
K	A	H	R	S	C	M	O
M	S	C	O	A	H	R	K

DUBLIN

D	I	L	B	U	N
B	N	U	D	L	I
N	L	D	I	B	U
I	U	B	L	N	D
U	B	I	N	D	L
L	D	N	U	I	B

This newsletter is created by Kathrine J. Clark, MS, RD, LD,  
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