Older adults need to eat more protein-rich foods when losing weight, dealing with a chronic or acute illness, or facing a hospitalization, according to a growing consensus among scientists.

During these stressful periods, aging bodies process protein less efficiently and need more of it to maintain muscle mass and strength, bone health and other essential physiological functions.

Even healthy seniors need more protein than when they were younger to help preserve muscle mass, experts suggest. Yet up to one-third of older adults don’t eat an adequate amount due to reduced appetite, dental issues, impaired taste, swallowing problems and limited financial resources. Combined with a tendency to become more sedentary, this puts them at risk of deteriorating muscles, compromised mobility, slower recovery from bouts of illness and the loss of independence.

**Impact on ‘functioning’**

Recent research suggests that older adults who consume more protein are less likely to lose “functioning”: the ability to dress themselves, get out of bed, walk up a flight of stairs and more. In a 2018 study that followed more than 2,900 seniors over 23 years, researchers found that those who ate the most protein were 30 percent less likely to become functionally impaired than those who ate the least amount.

While not conclusive (older adults who eat more protein may be healthier to begin with), “our work suggests that older adults who consume more protein have better outcomes,” said Paul Jacques, co-author of the study and director of the nutritional epidemiology program at Tufts University’s Jean Mayer USDA Human Nutrition Research Center on Aging. In another study, which was published in 2017 and followed nearly 2,000 older adults over six years, people who consumed the least amount of protein were almost twice as likely to have difficulty walking or climbing steps as those who ate the most, after adjusting for health behaviors, chronic conditions and other factors.

“No eating an adequate amount of protein is not going to prevent age-associated loss of muscle altogether, not eating enough protein can be an exacerbating factor that causes older adults to lose muscle faster,” said Wayne Campbell, a professor of nutrition science at Purdue University.

**Recommended intake**

The most commonly cited standard is the Recommended Dietary Allowance: 0.8 grams of protein per kilogram (2.2 pounds) of body weight per day. For a 150-pound woman, that translates into eating 55 grams of protein a day; for a 180-pound man, it calls for eating 65 grams. To put that into perspective, a 6-ounce serving of Greek yogurt has 18 grams; a half-cup of cottage cheese, 14 grams; a 3-ounce serving of skinless chicken, 28 grams; a half-cup of lentils, 9 grams; and a cup of milk, 8 grams.

After reviewing additional evidence, an international group of physicians and nutrition experts in 2013 recommended that healthy older adults consume 1 to 1.2 grams of protein per kilogram of body weight daily — a 25 to 50 percent increase over the RDA. (That’s 69 to 81 grams for a 150-pound woman, and 81 to 98 grams for a 180-pound man.)

Its recommendations were subsequently embraced by the European Society for Clinical Nutrition and Metabolism. For seniors with acute or chronic diseases, the group suggested protein intake of 1.2 to 1.5 grams per kilogram of body weight daily — a 25 to 50 percent increase over the RDA. (That’s 69 to 81 grams for a 150-pound woman, and 81 to 98 grams for a 180-pound man.)

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What about powdered or liquid protein supplements? “The first line of defense should always be real food,” said Samantha Gallo, assistant director of clinical nutrition at Mount Sinai Hospital in New York.

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