What to expect as you get older
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This guide is not a comprehensive statement of the law in this subject and Age Concern cannot give individual legal or financial advice. The information in this guide describes the situation in England. Different rules may apply in Northern Ireland, Scotland and Wales. Some rules may have changed since the publication of this guide. If you have any queries which this guide does not answer, seek further advice from one of the organisations suggested.
Introduction

Ageing is a natural process that affects your appearance and how your body responds to general ‘wear and tear’ and illness. Not everyone ages at the same pace because genes, lifestyle choices and environment all play their part.

This guide aims to identify changes you are likely to notice as you get older, including changes that may indicate early signs of treatable conditions, and actions you can take to improve your long-term physical and mental health and wellbeing. It is not inevitable that you will experience the changes described here but it becomes more likely the older you are.

Throughout this guide you will find suggestions for organisations that can give further information and advice about your options. Their contact details can be found in the ‘Useful organisations’ section. ▶ pages 19–22 Contact details for local organisations can usually be found in your local phone book. If you have difficulty finding them, your local Age Concern should be able to help. ▶ page 19

As far as possible, the information given is applicable across the UK but in some instances different healthcare arrangements may apply in Northern Ireland, Scotland and Wales. Readers in those countries are advised to contact their national Age Concern organisations for further information where appropriate. ▶ page 19
Brain power and memory

We can be forgetful at any age. Usually it is things we do not need to remember, and so, despite the irritation, we can live with it. As you get older, however, you may feel your brain is not as agile or your memory as good as it used to be. This is not unusual but if it starts to affect your daily life, it can make you and those around you worry. What might be causing it? Could it be the beginning of a type of dementia, such as Alzheimer’s disease?

What is dementia?

Dementia is a progressive disorder that affects how the brain works. It is rare in those under 60 and mainly affects those over 75. It is not a normal part of ageing.

Alzheimer’s disease is the most common type of dementia. Another is vascular dementia, which can start suddenly following a stroke or more slowly following a series of mini strokes (known as TIAs, transient ischemic attacks).

What are the symptoms?

Symptoms vary, depending on the type of dementia. In the case of Alzheimer’s, they develop gradually, often over several years, and include:

- forgetfulness or short-term memory loss – forgetting names; being unable to find the right words for things; forgetting what you did or were told a short time ago
- difficulty following what people are saying, understanding relatively simple instructions or retaining new information
- changes in personality or usual behaviour.

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If you have concerns, speak to or visit your GP, who can examine you and run some tests. Similar symptoms can occur with treatable conditions such as depression or an under-active thyroid. It could be a side effect of medication you take.

Contact the Alzheimer’s Society for more information.

You may also like to contact them if you are concerned about a family member who is reluctant to visit their GP.

Can you reduce your risk of developing dementia?

Research suggests genetic and environmental factors are involved in dementia, although in most cases the effect of genetics seems small. If a parent or other relative was over 65 when they developed Alzheimer’s, your chances of developing it are only a little higher than if there were no cases in your family.

People who follow a healthy lifestyle and keep their brain active have been shown to have a lower risk, so aim to:

- eat a varied diet with plenty of fruit and vegetables
- eat less salty and fatty food, particularly avoiding those high in saturated fat
- drink alcohol in moderation only
- stop smoking
- ask your GP to check your blood pressure and cholesterol: if they are high, it can particularly affect your risk of vascular dementia
- take regular exercise
- enjoy an active life with plenty of outside interests that exercise your body and mind.
Sleep

You may sleep more lightly, be more easily disturbed or lie awake longer during the night as you get older. Women may find their sleep disturbed during the menopause due to hot flushes. Older men may have an enlarged prostate gland, which can cause pressure on the bladder that wakes them at night for urination. Once a disturbed sleep pattern is established, it can be difficult to break.

It is not how many hours you sleep that is important but waking up feeling refreshed and staying alert throughout the day. So try the following to help you get a good night’s sleep.

- Stick to a regular bedtime and getting-up time.
- Keep the bedroom at a comfortable temperature.
- Take regular exercise but remember that exercise too close to bedtime makes it harder to get to sleep.
- Relax by reading a book or listening to music.
- Avoid alcohol in the hours before bedtime. It leads to restless sleep and can encourage snoring.
- Be sure to have 6–8 glasses of fluid each day but remember that drinking close to bedtime makes night time trips to the bathroom more likely.
- Limit caffeine to earlier in the day. You could try decaffeinated tea or coffee.

If disturbed sleep is making you tired during the day or you are a man and having to make frequent trips to the bathroom at night, discuss this with your GP. Contact the British Snoring and Sleep Apnoea Association for information on problem snoring. ➤ page 20
Digestion

Bowel complaints such as constipation can become a problem as you get older. You can avoid them, and ease the symptoms, by eating more fibre-rich food and aiming to drink around 6–8 glasses of fluid a day. Keeping active helps, so if you are not as active as you used to be, this could be a factor too.

Foods rich in fibre include:

- wholegrain cereals, bread, chapatti or rice
- dried fruit such as apricots, prunes
- baked beans, peas and lentils
- fruit and vegetables.

Your bowel is also the site of one of the most common cancers – colon cancer.

Who is at risk of colon cancer?

- People over 40 but is more common in the over 60s.
- People with a close relative who has had colon cancer.
- People with an inflammatory bowel disease such as Crohn’s.

Visit your GP if you could be at risk or if you notice blood in your stools or significant changes in your bowel habits. This cancer can be more successfully treated when picked up early.

A screening programme for older people is being rolled out in the four UK nations. The timetable and initial age ranges differ for each nation. Your GP will know when roll out is reaching your area. Look on NHS Choices for information about bowel cancer.

This site also has links to websites for the NHS in Scotland, Wales and Northern Ireland. The NHS Cancer Screening website explains the programme in England.
Sight and hearing

Sight

Age-related changes in your eyes mean you are likely to want more light for reading and may need glasses. Being fitted with glasses will improve your sight but an eye test is not just about whether you need glasses. Eye tests can detect potentially serious problems before you notice any effect on your sight and before damage has been done.

Age is the most significant risk factor for developing common eye conditions such as glaucoma, age-related macular degeneration (AMD) and cataracts, which can lead to blindness. People over 60 can have a free NHS eye test, yet around 47% of over 60s fail to have their eyes tested regularly.

For more information on eye health and eye conditions contact RNIB or one of the specialist organisations listed at the back of this guide. ► pages 19–22

If you are under 70, have your eyes tested every two years. If you are over 70, it should be every year.

You can have an eye test at home if you are housebound. Contact your Primary Care Trust for more information. ► page 21

If you are over 40, of African-Caribbean origin or have a close relative with glaucoma, you are at more risk of developing glaucoma, so regular tests are particularly important.

You should have an annual eye test for retinopathy if you have diabetes. Ask your GP about local arrangements for this test.

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Look after your eyes

- Wear sunglasses to protect your eyes. ► page 10
- Do not smoke – smoking is linked to development of AMD and cataracts.
- Eat plenty of fruit and vegetables – they are rich in antioxidant vitamins, which are thought to protect against AMD.

Hearing

Most people find their hearing gets worse as they get older. It is a recognised consequence of ageing, although ageing is not necessarily the cause. You may have some hearing loss if you agree with the following:
- People seem to mumble more than they used to and I frequently need to ask them to repeat themselves. ♠
- It’s become more difficult to follow conversations in noisy places and on the phone. ♠
- I can’t hear the television at a volume others find acceptable. ♠

Call the RNID on 0845 600 5555 (lo-call rate) and take their 5-minute automated hearing check on the phone. If it seems you have some hearing loss you will be advised to see your GP.

Your GP can check if there is problem such as a build up of wax and, if not, refer you to a specialist for a hearing test. If you need a hearing aid, you can have one on free loan from the NHS.

Contact the RNID ► page 22 or Hearing Concern ► page 20 for information and support. Sense is an organisation for people with hearing and sight problems. ► page 22
Skin

As you get older, the structure of your skin changes. It becomes thinner and loses its plumpness and elasticity, so that lines and wrinkles will form. Nothing hastens this process more, and increases your risk of skin cancer, than exposure to the sun. Sun also encourages formation of moles and brown ‘age spots’ on your hands. Oil-producing glands that moisten your skin are less active and so dry skin is more common.

Look after your skin

● Use moisturiser, particularly if you have dry skin.
● Stay in the shade between 11am and 3pm when the sun’s rays are strongest.
● When out in the sun always use high UVA and UVB protection sun cream (make sure it is at least SPF15 or appropriate for your skin type) and apply it generously every one to two hours. Always reapply after swimming or washing.
● Wear a sun hat to protect your face and eyes.
● Wear sunglasses with one of the following: a CE mark, UV400 label or statement that they offer 100% UV protection.

Remember
Spring and summer sun stimulates vitamin D production in your skin. So do not avoid the sun completely – just be sensible, particularly on holiday.

Moles, freckles and brown patches on your skin are usually harmless. However, if they bleed, change size, shape or colour, or develop irregular edges over weeks or months, report this to your GP without delay and have them checked. See the Cancer Research UK Sun Smart Campaign for more information. ➤ page 20
Jim, 71, doesn’t like to trouble his doctor unless he thinks something is wrong …

I woke up one morning and noticed spots of blood on my pillow. When I felt a rough, raised patch on the back of my ear, I decided this was probably where the blood came from. As I hadn’t injured my ear, I wondered why I’d got it but I hoped if I left it alone it would just go away.

When I was at the GP’s two weeks later, even though the patch was still there, I nearly didn’t mention it but in the end I did. Having looked at it, my GP wanted me to have it checked out at the hospital. They took a biopsy and it was cancer but not the malignant kind that can spread to other parts of the body. They removed the whole thing and I had my ear dressed and checked until it healed but it’s fine now.

From seeing my GP to having the patch removed was about two weeks. My GP said it’s important to report situations like mine as soon as you notice them, particularly any changes you notice in a mole. When caught early most skin cancers are easily treated and cured. As I’ve had one skin cancer there is a 40–50% chance of having another, so I’ll go straight to the GP if I suspect anything in future. I’m also wearing a hat when I play bowls on a sunny day. Even though I always used sun cream on my arms and bald head, I never gave my ears a thought.
Heart and arteries

The linings of arteries supplying your heart and brain with blood are likely to develop cholesterol-rich deposits as you get older. This narrows the channel through which blood must be pumped and can lead to angina (pain on exertion), a heart attack or a stroke. This change is not a normal part of ageing and is affected by the food you eat.

Blood pressure is the force that keeps blood circulating around your body. At one time it was believed the increase that occurs with age was normal. Then it was noticed that those with higher blood pressure were more at risk not only of heart disease and stroke but kidney disease too.

If you have not had your blood pressure or cholesterol checked recently, or at all, contact your GP practice. High blood pressure and high cholesterol are often symptom-free, so measuring and monitoring them are important.

- Blood pressure should be below 140/90. If yours is persistently higher than this when measured on several occasions, your GP will suggest treatment that can bring it down and keep it down.
- Total blood cholesterol and levels of two particular types of cholesterol (known as HDL and LDL) are measured and treatment can be offered to keep these at acceptable levels.

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It is never too late to make healthier choices

Symptoms of heart disease tend not to appear until middle age or later but the damage starts when you are much younger. However, changes to your diet and lifestyle at any age can help reduce your risk of developing heart disease and strokes. They can also help prevent an existing condition from getting worse.

The diet and lifestyle guidelines below can help prevent heart disease and strokes and many can also reduce the risk of developing of diabetes and bowel cancer too.

- Eat a wide range of foods, particularly plenty of fruit and vegetables.
- Eat less fatty food, choose sunflower or olive oil for cooking and choose low-fat versions where you can.
- Eat less salty food. Salt is in most processed foods – breakfast cereals, bread, bacon, ham and salty snacks – so get into the habit of reading the label.
- Eat fish twice a week – make one of those portions an oily fish such as salmon, mackerel or sardines.
- Keep your weight within ‘normal’ limits.
- Give up smoking.
- Exercise regularly – brisk walking is good but choose activities you will want to carry on doing!
- Alcohol is fine in moderation, so keep within recommended limits of no more than three to four units in 24 hours for men and two to three units for women.

NHS Choices, the British Heart Foundation and The Stroke Association pages 20–22 and Age Concern’s free booklet Your guide to healthy living all offer healthy lifestyle information.
Joints, muscles and bones

Osteoarthritis is the most common form of arthritis and signs of it often appear in your 50s or 60s. Contrary to popular belief it is not caused by ageing. It is a repair process that, in some people, does not always adequately compensate for initial damage done to a joint. The damage continues and symptoms of joint stiffness and pain develop. It most commonly affects the lower back and joints in your knees, hips and fingers. It is twice as common in women and seems to run in families. The lifestyle advice on page 16 can help prevent as well as treat it. Also:

- watch your weight – being overweight increases the risk of developing osteoarthritis and aggravates joints already affected
- keep active – exercise that strengthens muscles round affected joints and improves general fitness is particularly recommended if you have osteoarthritis. Check with your doctor or physiotherapist – some types of exercise can be harmful.

Speak to your GP if you have any of the symptoms described above. Guidelines on management of osteoarthritis were issued by NICE (the National Institute of Health and Clinical Excellence) to help GPs and patients agree best treatment. Arthritis Care offers information and support. ▶ page 19

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Look after your bones

Bone health is largely influenced by your genes but will also be affected throughout your life by diet and lifestyle. So the following advice applies – whatever your age.

- Eat a healthy diet – plenty of fruit, vegetables and calcium-rich foods such as dairy products and canned fish.
- Vitamin D is particularly important – it is found in oily fish and produced in your skin on exposure to sunlight. But be sure to follow the ‘sun smart’ advice.
- Keep active – regular weight-bearing activity such as brisk walking, dancing and climbing stairs stimulates bone formation.
- Do not drink to excess and do not smoke.

Loss of bone density is a natural part of ageing. Osteoporosis is diagnosed when bones are so weak that they may fracture after only a minor fall. If osteoporosis affects your spine, the vertebrae can collapse and cause severe pain and immobility. Contact the National Osteoporosis Society for more information.

Help with mobility

Osteoarthritis and osteoporosis can make walking and day-to-day activities such as getting in and out of a car or climbing stairs difficult and painful. To find out about equipment that might help and what assistance may be available to adapt your home, contact your social services.
Set your goals
You may already be following some of the suggestions on page 16 or in the rest of this guide but most of us find there is room for improvement in some part of our daily routine.

Changing behaviour, particularly longstanding habits, can be difficult. You can increase your chances of success by setting yourself clear goals, identifying actions you need to take and dates when you will review your progress. Why not draw up a plan, like the example below, to help you keep track of how well you are doing?

My goal is

after 2 weeks are:

after 6 weeks are:

after 3 months are:

My goal is

after 2 weeks are:

after 6 weeks are:

after 3 months are:

Ten steps to staying healthy
This guide contains a lot of information and suggestions about how to give yourself the best chance of enjoying good health for as long as possible. Ten key steps towards a healthier life are listed below.

● Stop smoking.
● Eat five portions of fruit and vegetables a day.
● Eat more fibre-rich foods.
● Eat fish twice a week – especially oily fish.
● Eat less salt – check food for its salt content.
● Keep to a healthy weight and eat less fatty food.
● Keep to safe limits for alcohol – know how much you are drinking.
● Take regular exercise, in a form you enjoy.
● Have your blood pressure and cholesterol checked regularly.
● Have your eyes tested at least every two years (every year once you are over 70).
Set your goals

You may already be following some of the suggestions on page 16 or in the rest of this guide but most of us find there is room for improvement in some part of our daily routine.

Changing behaviour, particularly longstanding habits, can be difficult. You can increase your chances of success by setting yourself clear goals, identifying actions you need to take and dates when you will review your progress. Why not draw up a plan, like the example below, to help you keep track of how well you are doing?

My goal is:

My targets after 2 weeks are:

after 6 weeks are:

after 3 months are:

My goal is:

My targets after 2 weeks are:

after 6 weeks are:

after 3 months are:
Keith, 63, has not needed to see his GP for many years …

Returning from holiday I found a letter from the NHS, inviting me to take part in the Bowel Cancer Screening Programme. The letter said a screening kit would arrive in the next two weeks.

The kit arrived with straightforward instructions. I was asked to collect samples for three consecutive days then post them back.

The results arrived by letter and this was where I started to get very nervous. They had found blood in the sample and so they asked me to make an appointment at my local screening unit. I saw the specialist nurse who explained what would happen in a colonoscopy where they could look inside my bowel. The people at the hospital explained things clearly and gave me information I could read at home.

Two days before the investigation I could only eat light meals with no fibre. The day before I only had water and in the afternoon I took a strong laxative, which meant I had to keep very close to the loo – you can imagine the rest.

At the hospital they gave me a sedative to relax me and to my surprise I could watch what was happening on a TV monitor. It wasn’t painful at all. They removed two polyps, which were sent away to check for abnormal cells. Thankfully, a week later I got the all-clear.

I’m pleased I went, even though I was terrified. If it is cancer, you want them to find it early.
Useful organisations

**Age Concern**
For further information and details of your local Age Concern in England, call the Age Concern Information Line on 0800 00 99 66 (free call) or visit our website at www.ageconcern.org.uk
In the rest of the UK, contact your national Age Concern office (see below).

**Age Concern Northern Ireland**
Tel: 028 9024 5729 (national call rate)
Website: www.ageconcernni.org

**Scottish Helpline for Older People (Age Concern Scotland)**
Tel: 0845 125 9732 (lo-call rate)
Websites:
www.olderpeoplescotland.org.uk
www.ageconcernscotland.org.uk

**Age Concern Cymru**
Tel: 029 2043 1555 (national call rate)
Website: www.accymru.org.uk

**Alzheimer’s Society**
National organisation offering information and support for families and carers of those affected by dementia.
Tel: 0845 300 0336 (lo-call rate)
Website: www.alzheimers.org.uk

**Arthritis Care**
National organisation offering information and support for people with arthritis.
Tel: 0808 800 4050 (free call)
Website: www.arthritisicare.org.uk
**British Heart Foundation**
A national organisation offering information and support, and sponsoring research into heart disease.
Tel: 0845 07 08 070 (lo-call rate)
Website: www.bhf.org.uk

**British Snoring and Sleep Apnoea Association**
Not-for-profit organisation to help those whose sleep is disrupted by snoring.
Tel: 01737 245638 (national call rate)
Website: www.britishsnoring.co.uk

**Cancer Research UK Sun Smart Campaign**
The UK national skin cancer prevention campaign: web-based advice on staying safe in the sun and raising awareness of the signs of skin cancer.
Website: www.cancerresearchuk.org.uk/healthyliving/sunsmart

**Hearing Concern**
National volunteer-led organisation dedicated to improving the quality of life for people who are deaf or hard of hearing.
Tel: 0845 0744 600 (lo-call rate)
Website: www.hearingconcern.org.uk

**International Glaucoma Association**
A patient-based organisation that works to prevent glaucoma blindness by providing information, literature and advice.
Tel: 01233 648170 (national call rate)
Website: www.glaucoma-association.com
Macular Disease Society
National organisation dedicated to helping people with age-related macular degeneration.
Tel: 0845 24 12 041 (lo-call rate)
Website: www.maculardisease.org

National Osteoporosis Society
National organisation offering information and support on prevention and treatment of osteoporosis.
Tel: 0845 450 0230 (lo-call rate)
Website: www.nos.org.uk

NHS Cancer Screening
A website offering information about bowel cancer screening and other cancer screening programmes in England.
Website: www.cancerscreening.nhs.uk

NHS Choices
A website offering information on a wide range of health conditions, healthy living advice and local NHS services and hospitals.
Website: www.nhs.uk

Primary Care Trusts (PCTs)
PCTs are responsible for arranging delivery of local NHS services, including sight tests. Call NHS Direct and ask for the number of your PCT’s Patient Advice and Liaison Service (PALS). Your PALS has details of opticians offering home visits.
NHS Direct: 0845 4647 (lo-call rate)
Website: www.pals.nhs.uk
Royal National Institute for Deaf People (RNID)
National charity offering information and support for deaf and hard-of-hearing people.
Tel: 0808 808 0123 (free call)
Textphone: 0808 808 9000 (free call)
Website: www.rnid.org.uk

Royal National Institute of Blind People (RNIB)
National organisation offering information and support for blind and partially sighted people.
Tel: 0845 766 9999 (lo-call rate)
Website: www.rnib.org.uk

Sense
National organisation offering information and support for people with dual sensory impairment (deafblindness).
Tel: 0845 127 0060 (lo-call rate)
Textphone: 0845 127 0062 (lo-call rate)
Website: www.sense.org.uk

The Stroke Association
National charity working to combat strokes in people of all ages.
Tel: 0845 30 33 100 (lo-call rate)
Website: www.stroke.org.uk
Feeling good!
Easy steps to staying healthy

Dr Alan Maryon Davis
and illustrated by Quentin Blake

£9.99 ● Paperback

This book is a joy.
Comments from MJA Awards 2008

This is a must-have self-help guide providing an uplifting approach to the secrets of keeping fit and healthy for longer. It pulls together all the crucial health and fitness facts that could really make a difference to you and your loved ones. It busts the common myths that many blindly follow and covers the 10 key lifestyle areas that can dramatically improve health including:

- Diet and nutrition
- Physical activity
- Stress
- Relaxation and sleep
- Sex
- Smoking
- Drinking and drugs
- Oral health
- Skincare and sunbathing
- How to develop a positive approach to life

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- call us on 0870 44 22 120
- visit our website at www.ageconcern.org.uk/bookshop
- try any good bookshop.

Please quote code 13414 when ordering.
What should I do now?

If you would like more information on the issues covered in this guide, to order further information guides or to obtain this guide in a more accessible format, please get in touch.

Call the Age Concern Information Line on 0800 00 99 66 (free call) or visit our website, www.ageconcern.org.uk/information

The following Age Concern information guides may also be useful:

- **Adapting your home** (ACIG07)
- **Attendance Allowance: are you missing out on it?** (ACIL26)
- **Your guide to healthy living** (ACIG12).

Age Concern publishes a range of books on issues relevant to older people. Browse our online bookshop at www.ageconcern.org.uk/bookshop

Your local Age Concern provides a wide range of services for older people. Contact details may be in the box below. If not, call the Age Concern Information Line on 0800 00 99 66 (free call).