Design menus around finger foods for dementia patients | Lauren Mahakian

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Our Solvang home is now a true home. We have welcomed some beautiful residents, the sun is shining in our outdoor spaces, and there is always something cooking — an aroma that is comforting and brings beautiful memories from the past.

I have been spending some personal time with each of the residents and their families, and as a benefit of our intimate and personalized setting, we have been taking stock of their











Cooking for the elderly and/or those with dementia is often labeled by many caregivers as "challenging." It can be ungratifying when all the efforts put into planning, shopping and preparation result in uneaten foods. Worse yet are concerns about nutrition. Often it is not just diminished appetite, but flavors, health, swallowing and dental issues can be a cause for uneaten foods. Among the many challenges are the common difficulties in handling utensils. Not only is all this of nutritional concern, but not being able to handle their own food can accelerate lack of independence for many seniors.

This is why I am often a proponent of designing menus around finger foods:

individual menu preferences. I even enjoyed doing some cooking myself!

- Finger foods are easier to handle. No forks, knives or spoons that include two hands, special dexterity, poking, cutting or balancing from plate to mouth are required;
- They can be more attractive on a plate, increasing interest;
 They may extend independence;

- They can be eaten at a relaxed pace;
 They can be snacks, meals or dessert; and
- They avoid the special posture and difficulty required by the formal setting at a table and/or the need to pull up a wheelchair to the table.

- As with any food, room temperature is normally best to avoid burns on fingers or mouth;
- While finger foods allow for the consumption time to be more flexible, be sure your choices don't lead to soggy or crusty/hard foods:
- Hands need to remain clean. Provide a paper towel or sanitizing wipes for before-and-after servings; and "Bite-sized" does not necessarily equal "solution" when swallowing is a concern. The dryness, consistency, texture and taste are equally as relevant. Chicken nuggets and dry cereals, for example, may fall in these categories. While many of us, for example, like egg salad, more dislike hard-boiled eggs. Egg salad seems more appetizing, smooth and easier to swallow. Often a paste form or smaller pieces ease swallowing (and enjoyment).

Some suggestions:

- Choose foods that are robust, moist and not too messy:
- Serve easy-to-hold foods the size of one or two bites;
- · Take the opportunity to make the food attractive, with tomato, red pepper or avocado for coloring and texture;
- For breakfast, buttered toast, English muffin, brioche with spread, King's Hawaiian rolls, hard-boiled eggs with cheese spread, pieces of firm omelet, French toast squares, and pancakes rolled with peanut butter, honey, cream

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- For lunch or dinner, serve cubes or thick slices of cooked meat, such as ham, beef or chicken, breaded fish sticks. mini burgers, meatballs, turkey rollups (deli meats rolled with soft, cream, cubes or Havarti cheeses), mini quesadillas;
- Fruits and vegetables are nutritious, attractive and at the right temperature. Consider apple wedges with caramel
 dip; bananas or orange wedges (remove membrane), strawberries, melon cubes, or fruit kabobs. For vegetables, consider tomato wedges, cucumber rounds, broccoli, carrots or zucchini slices with dip, pepper slices, pickle spears, sweet potato wedges, or veggie kabobs;
- For dessert, mini cookies, graham crackers with Nutella, peanut butter, jams or chocolate squares, mini brownies, popsicles (great for hydration!), angel food cake chunks, Fig Newtons, or bite-sized pastries; and
 Create some combinations, such as bananas with peanut butter, waffles with chicken salad, peppers with brie, or

There is no cookie-cutter approach. I always ensure my clients remember that there are as many tastes and challenges as there are individuals. Our focus is on nutrition, which is often $% \left\{ 1,2,...,n\right\}$ the result of the customized choices, the enjoyment that food can bring and a positive sense of good quality of life.

Whether it be lack of energy, inability to fully communicate, deficiency in dexterity, etc., those living with dementia are more susceptible to poor nutrition. I encourage you to experiment and consider safety and comfort as a guiding light, which in turn will lead to better nutrition.



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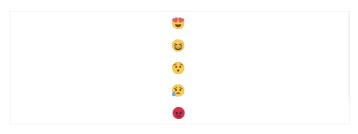




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Nearly 518,000 people are hospitalized in the United States each year for dehydration. Of these, about 10,000 will die there. And the percentage of those with dementia is significant.

Lauren Mahakian is a Certified Dementia Practitioner. She supports families affected by Alzheimers, dementia, and cognitive disorders through care management services and podcast "Unlocking the Doors of Dementia™ with Lauren," as well as free support groups, and specialty memory care homes located in Torrance and Solvang. Visit familyconnectmemorycare.com for more information.



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