

September 2014 Health Notes by Evelyn Ames

Staying Hydrated! Why Water Matters!

Our “hot” weather in the northwest comes and goes but the importance of staying hydrated remains the same. Water matters! Dehydration is when there is a lack of fluids in the body. A person loses more fluid than what it takes in. This means the body cannot carry out its normal functions. (<http://www.mayoclinic.org/diseases-conditions/dehydration/basics/risk-factors/con-20030056>)

As one ages, the body become more susceptible to dehydration for several reasons:

- body's ability to conserve water is reduced;
- thirst sense becomes less acute;
- one is less able to respond to changes in temperature;
- older adults, especially in nursing homes or living alone may tend to eat less and drink less fluids. Disability or neglect also may prevent them from being well nourished.
- “these problems are compounded by chronic illnesses such as diabetes, dementia, and by the use of certain medications.”

Symptoms of mild to moderate dehydration include: dry, sticky mouth, sleepiness or tiredness — children are likely to be less active than usual, thirst, decreased urine output, few or no tears when crying, dry skin, headache, constipation, and dizziness or lightheadedness. **Symptoms of severe dehydration**, which is a medical emergency include: extreme thirst, irritability and confusion, very dry mouth (and skin and mucous membranes), little or no urination (dark yellow or amber color), sunken eyes, low blood pressure, rapid heartbeat and breathing, fever, and no tears when crying.

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When one may need to take in more fluids than usual:

- Illness: “Start giving extra water or an oral rehydration solution at the first signs of illness — don't wait until dehydration occurs. And although they might sound appealing, traditional "clear fluids" such as ginger ale or other sodas contain too much sugar and too little sodium to replenish lost electrolytes.” Suggestion is to find a shady area, recline and drink water.
- Exercise. “In general, it's best to start hydrating the day before strenuous exercise. Producing lots of clear, dilute urine is a good indication that you're well hydrated. Before exercising, drink 1 to 3 cups (0.24 to 0.70 liters) of water. During the activity, replenish fluids at regular intervals and continue drinking water or other fluids after you're finished. Keep in mind that drinking too much not only can cause bloating and discomfort but also may lead to a potentially fatal condition in which your blood sodium becomes too low (hyponatremia). This occurs when you drink more fluids than you lose through sweating.”
- Environment: Additional water in hot or humid weather helps to lower body temperature and replace fluid lost through sweating (in cold weather, sweating because of insulated clothing). Hot indoor air may cause skin to lose moisture.

“To prevent dehydration, drink plenty of fluids and eat foods high in water such as fruits and vegetables. Letting thirst be your guide is an adequate daily guideline for most healthy people. Fluids can be obtained not just from water but also from other beverages and foods. But, if you're exercising, don't wait for thirst to keep up with your fluids.”

(<http://www.mayoclinic.org/diseases-conditions/dehydration/basics/risk-factors/con-20030056>) The Institute of Medicine determined that an adequate intake (AI) for men is roughly 3 liters (about 13 cups) of total beverages a day. The AI for women is 2.2 liters (about 9 cups) of total beverages a day. How much depends on one's health, where one lives and activity level. <http://www.mayoclinic.org/healthy-living/nutrition-and-healthy-eating/in-depth/water/art-20044256> Chart displaying water content of fruits and vegetables is at this site: <http://www2.ca.uky.edu/enri/pubs/enri129.pdf>

In summation, (<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2625510/>) “Dehydration is the most common fluid and electrolyte problem among the elderly. The usual causes of water loss are frequently absent in dehydrated elderly patients. Age-related changes in total body water, thirst perception, renal concentrating ability, and vasopressin effectiveness probably predispose to dehydration. Dehydration related to infection, high-protein tube feedings, cerebral vascular accidents, and medication-related hypodipsia are particularly relevant for elderly patients. Appropriate treatment depends on accurately assessing the water deficit and slowly correcting that deficit.”